Appendix 1. BRENT Integrated Neighbourhood Team Development -

This is the detailed account of the findings from recent Listening-Engagement sessions with 25+ teams and organisations and more over 200+ staff and VCEs reps consulted about the development of Integrated Neighbourhood Teams in Brent.

EMERGING PRIORITIES IDENTIFIED DURING INITIAL ENGAGEMENT

We have undergone a period of initial engagement with 25+ teams and organisations in Brent and have consulted over 100 staff as part of this process. The following is a high-level overview of our findings across the three enablers.

| Design inter-operable IT systems to support effective Neighbourhood working. | Workforce model Translate workforce data collection into practical actions, e.g. recruitment/retention programmes, training/development, remuneration packages and career progression routes. Involve the right groups at the right time. Roles & responsibilities Build awareness of who's who across the partnership, e.g. develop directories of key stakeholders (including roles, responsibilities, governance structures and escalation routes), and available services (including referral information and coverage areas). | Ways of working Integrate ways of working and align KPIs. Cascade information to all practices and relevant staff effectively. Pilot ideas and share learning with partners. Consult communities from the outset and use co-production to ensure work is guided by what matters most to local people. Use a population health approach. |
|--|--|--|
| Estates | | |
| People are supportive of a Superhubs model | | |
| There are some successful examples of co-located working already happening across the partnership that can be built on | | Skills & Training • Develop joint training and induction materials for staff across the partnership. • Facilitate skill-sharing between organisations |

1.0 Engagement with partners, their views and aspirations and ocular site visits1.1 K&W South PCN:

- Wanted to see an inter-operable ICT system where GPs for example are able to see Mosaic entries from ASC partners and vice versa [ASC partners can have read only access for EMIS]. This aspiration has been implemented in other parts of London such as NEL via Medical Information Gateway, connecting 7 IT systems and partners able to view notes / entries about the patient. In NCL, there is Community Digital Records – almost real time (2 hours' lag) readonly access between clinicians and practitioners from health and social care able to view records. For example, this saves ample time having to wait for return calls from partners only to confirm if the patient has existing package of care or not. Early access to information, promotes early decision-making and intervention, eventually early recovery for the patients.
- Wanted to see Directory of Services and Contacts specifically wanting to know which services accepts self-referrals vs. those that do not. Where to refer for self-care advice / support. Wanted to see who to liaise with and escalate with. Foundations for robust relationship starts with knowing *who's who* within the partnership.
- As the recruitment of ARRS improves, access to hard and software devices from NWL ICT should be provided. This needs to happen within K&W South PCN's member practices.
- The data collection on workforce numbers need to translate in to deliverable actions. There is no point collating workforce information if they are not followed by action plans that are realised and tangible, for example:

- o Specific staff-type recruitment and retention programmes
- o Training and development
- Attractive remuneration packages + benefits / perks
- \circ Career progression opportunities within the organisation / employing Practices / PCNs

1.2 K&W North

- Presented the introductory slides on concepts of neighbourhood
- Asked member Practices on their views and aspirations for what good looks like
- Areas of focus / priorities:
 - Supportive of Diabetes Neighbourhood teams
 - Supportive of the development of the super hub concept
 - Wanted to look at Older People's needs, specifically the Frailty pathway in the community. This is reflective of the local population needs. There are a number of care homes located in the area as well.

1.3 <u>K&W West</u>

- Presented the introductory slides on concepts of neighbourhood
- Asked member Practices on their views and aspirations for what good looks like
- Areas of focus / priorities:
 - Diabetes Neighbourhood teams
 - Supportive of the development of the super hub concept
 - Use of technology to aid development of effective neighbourhood
 - Aligned their vision + mission with the neighbourhood concept, alongside the enablers – ICT; Workforce + Estates
 - Wanting to better understand local population needs before embarking on specific project/s for the neighbourhood
- 1.4 K&W Central pending

1.5 <u>Kilburn</u>

- Presented the introductory slides on concepts of neighbourhood
- Asked member Practices on their views and aspirations for what good looks like
- Areas of focus / priorities:
 - ARRS Mental Health Nursing support
 - Aligning KPIs of PCNs and partners ie CNWL (eg referrals to CNWL)
 - Contact list suggested to collate and share to enable awareness of who's who in the partnership
 - Strengthening relationship through co-production / consultation from the onset when developing services / redesigning pathways
 - Border patients difficulties when patients live in a different Borough from Brent but registered with a Brent GP, vice versa
 - Estates issues concerns on rental rates of premises, finding appropriate premises for those Practice/s that needing them urgently
 - Supportive of the development of the super hub concept
 - Agreed to explore representation to the 3 main workstream workforce +OD; Estates and ICT / Digitalisation

1.6 Harness North & South

- Presented the introductory slides on concepts of neighbourhood
- Asked member Practices on their views and aspirations for what good looks like
- Areas of focus / priorities:
 - Better understanding on what our neighbours are doing ie Community Centres

- Promote health + care services from a unified voice (from PCNs, CLCH, CNWL, 111, UTCs, Acute, VCSEs, ASC)
- o Empower one another this will help with "releasing clinical time to care"
- Create a unified patient facing communication

1.7 <u>CLCH</u>

- Discussed opportunities and future directions on neighbourhood development in Brent with agreed actions:
 - JB to find out future Brent Practice Managers and/ Practice Nurse Forums + PCN meeting dates and share with JA. This will help CLCH cascade information to all Practices via PCN CDs, Px Managers and Px Nurses and wider staff
 - JB to invite Andrew C. to the upcoming ICT & Digitalisation workstream -
 - JB to share Brent partnership contact list once available. This will help CLCH understand *who's who* in the partner organisations to link with.
 - CLCH 5 x CBU managers to send their service organogram to JB. This will help partners understand the coverage areas in the community and who to escalate through the chain.
 - JA and team to send list of names who will be representing CLCH for each workstream:
 - Workforce + OD
 - Estates
 - ICT & Digitalisation

1.8<u>CNWL</u>

- Met with Kingsley + Matthew, Borough Director and Deputy
- Interested with the partners' contact list, happy for them to share theirs as well
- CNWL services in Brent:
 - Acute mental health c/o Park Royal Hpospital
 - Home Treatment Team
 - HBOS
 - CMHT
 - o Pscyh Liaison
 - o IAPT
 - OT Team
 - CAMHS
- Currently, CNWL has 3 x c-located hubs in Brent. These are co-located services with Local Authority + VCSE:
 - Kingsbury with Fairfield, ASC, Re-think + Ashford Place
 - Action Matthew to share the list to JB
 - Further 3 x sites for Adult MH and LD
- Actions agreed in the meeting:
 - KA to connect JB with JL and the rest of the CNWL Team Leads in Brent
 - KA to share *list of Brent CNWL services* to JB
 - MH to share the contact list of CNWL staff links
 - MH to share *list of the 3 x hubs co-located with Local Authority* + VCSE (separate list for Adult MH + LD)

1.9 Adult Social Care

- Joint induction for new joiners as well as joint training and development for staff
- Inter-operable systems: Mosaic + EMIS
- Care cap reform (2023) means testing changes
- CQC inspection for Council services
- Opportunities for Children's with Disabilities service (under YO)
- Attendance to the CPMG / WSIC meetings
- Roles & Responsibilities between RR OTs vs. LA OTs

- Aligning services co-terminus with health, localism with wrap around support
- Core vs. specialist MDT support
- Locality model mental health, LD, ASC explore options
- Access points referrals thru Brent Contact Services
- Rehab + reablement already in place look at integrating more
- Collaboration means integrated ways of working
- All ADASS services sensory, rehab, equipment, OTs, SW, HDT, Long Term, MH, LD
- Look at North and South split of ASC teams (complex team)
- Children's c/o Nigel
- Superhub community based easy to reach services located in the neighbourhood.
 - Library, Leisure centres, FWBCs, health + care co-located,
 - o sign posted
 - bring services to the community
 - o initial triage and assessment made simple
 - one stop shop model of health + care
 - Venues easy to reach for inclusive groups, more within deprived areas

1.10 <u>PHE</u>

- Children's vs. Adult services
- Generic interventions: Diabetes care, Imms, Obesity, CAMHS,
- Integrating care with VCSE
- Working with partners in the 5 connect areas
- JSNA refresh understanding our population better
- Services easily accessible to Inclusive groups
- Links with mental health services (CNWL)
- Explore opportunities for joint working in various Estates Libraries + Sports centre physical activities in the neighbourhood
- 1.11 Brent Council Performance Information and Insight Team
 - PII team will share latest JSNA iterations on Brent populations based on the 5 connect areas

1.12 Housing

- Presented the concepts of integrated neighbourhood development
- Asked Housing Lead on their views and aspirations for what good looks like
- Areas of focus / priorities:
 - Supportive of the integrated pathway development
 - Supportive of the development of the super hub concept
 - Supportive of the proposed pilot on FWBCs about health + housing one stop shop day / event
 - Willing to provide Education + Awareness training on housing with families in a chosen FWBC
 - Wish to access joint training and development needs or staff as well as offer those to other teams in the partnership

1.13 Brent Health Matters & VCSEs

- Presented the concepts of integrated neighbourhood development
- Asked BHM Lead on their views and aspirations for what good looks like
- Completed an engagement workshop (17/07/22) with Brent VCSEs facilitated by BHM team see *Appendix XX* on themes / findings from the engagement
- Attendance to the on-going BHM stakeholders meeting (once monthly)

- Areas of focus / priorities:
 - Supportive of the integrated pathway development in the neighbourhood
 - Supportive of the development of the super hub concept
 - Supportive of the Integrated Diabetes Neighbourhood Team
 - Will share Local Action Plans from recent community engagement with the neighbourhood areas (5 connect areas) *what matters most to the residents*
 - \circ Suggest to link with Community Coordinators from the 5 connect neighbourhood areas
 - Suggest to start with the proof of concept in a particular neighbourhood, ie Harlesden (Jessica is the coordinator)

1.14 Family & Well Being Centres (8 premises sites)

- Site ocular visit done to look at potential for super hub site (see separate report on the FWBC findings), visits completed in August '22
- Presented the concepts of integrated neighbourhood development
- Asked Leads on their views and aspirations about collaborative working at neighbourhood level
- Areas of focus / priorities:
 - Supportive of the integrated pathway development in the neighbourhood, largely for Children (up to 18 y/o or 25 y/o if in special needs / education) and their families
 - Supportive of the development of the *super hub* concept
 - Supportive of implementing proof of concept / pilot on Children and Family pathway/s For example:
 - FWBC and Therapy services (CLCH)
 - Linking with Housing Team/s for complex family situations
 - Cross-training and development of staff NHS and Council behavioural modification techniques for staff handling ADHDs, ASDs, etc.
 - Paediatric Clinic pathway can be hosted at existing site Willow SEND for face to face Children's clinic w/ a Paediatrician
 - Health literacy and self-care Event days including Saturday (weekend)

1.15 Brent Libraries (Community Hubs)

- Site ocular visit done with 2/5 libraries to look at potential for super hub site visits completed in September '22
- Presented the concepts of integrated neighbourhood development
- Areas of focus / priorities:
 - Willesden Library is a potential Super hub site 3 storey building with potential spaces for 1:1 meetings / groups sessions including classes in a mini auditorium and reading area for i.e. cardiac rehab classes
 - Has 2 rooms for computer access for digital literacy training, one room can host up to 12 attendees and the other room for 10.
 - Supportive of the development of the *super hub* concept
 - Supportive of implementing proof of concept / pilot on Children and Family pathway/s For example:
 - Can host health literacy and self-care Event days
 - Can host Exhibitions in relation to Health + Care
 - Can host Tai Chi classes or similar for Falls prevention and improving balance
 - Can host a garden event (*Kilburn Library*) for 1:1 IAPT (or similar) sessions or summer barbeque party (healthy eating campaigns). The garden is wheelchair accessible and has elevated garden plots.

- 1.16 Brent Sports Centres pending (3 sites)
 - Site ocular visit completed with 3/3 sports centres in Brent looked at potential for super hub site/s, done last 23rd September 2022.
 - Presented the concepts of integrated neighbourhood team development to the site team
 - Findings:
 - Generally, the Leisure / Sports Centre has its usual offer similar to a standard Sports Centre in the county. There are rooms / spaces available on all 3 Sports Centre sites. There is ample space in the car park as well as good transport links with local buses. Two (2) of the sites are sub contracted operationally to an external provider, whilst there is one (1) directly managed by Brent Council.
 - Willesden Sports Centre has a meeting room by the entrance that can house up to 10-15 people during a meeting. There are no AV facilities in the room. However, there is a huge space (indoor track) that can be utilised for face to face health classes or similar. The foyer extends up to the back where the café is, will be ideal for health + care awareness campaigns during event days. There is a kitchen facility in the first floor to prepare light snacks / refreshments for event organisers or those using the outdoor track field. This site is approximately 10 minutes' walk from Willesden Centre for Health and Care (just few minutes' walk behind). This site is managed and operated by 1Life (Willesden Sports Centre: Gym, Fitness & Swimming Pool 1Life).
 - Bridge Park Leisure Centre (<u>Bridge Park Community Centre | Brent Council</u>) have abundant rooms that can be used for meetings or perhaps convert into an office space (may require capital investment). The other half of the building is being rented out to businesses for office space use. The building was a converted bus garage; it looks needing an upgrade. Currently, there are plans of re-generating the site and making a brand new Leisure Centre subject to consultation. Therefore, if this site is being ear marked for an integrated hub service/s or co-location space for staff, might only be available temporarily (up to 2 years max). Opportunity to be part in the regeneration planning should this be considered for an integrated "superhub" site.
 - Vale Farm Leisure Centre <u>Vale Farm Sports Centre (brent.gov.uk)</u> has modern meeting facilities for up to 35 people per room, each of which comes with audio/visual equipment and free WiFi. The sizeable sports hall has capacity for 300 people and is regularly hired for sporting tournaments, community events, fairs and exhibitions. There is a good size performance room / dance studio for group face to face classes. This site is already working jointly with GPs for their GP Exercise Referral Scheme which aims to provide opportunities for people with underlying medical conditions or at risk of developing medical conditions to become more active, provide access to safe and effective exercise in a supervised environment and raise awareness of the benefits of physical activity and long-term behaviour change. This site is beside the Sudbury Primary Care Centre, an NHS Property run service.