

## Appendix 2: Current Brent ICP Priorities

### Priority 1: Tackling health inequalities

1. **Clinical:** work with PCNs and the community to try and deliver prevention and management to people in Brent that do not normally access healthcare services. Manage a patient advice line.
2. **Mental health and wellbeing:** co-design culturally appropriate awareness and training sessions with communities and VCS organisations.
3. **Community:** implement local action plans with 5 Brent Connect areas and develop action plans for thematic remits with statutory services. Committed to deliver at least 5 community events per month.
4. **Engagement & comms:** develop targeted comms assets to promote events, vaccinations and health & wellbeing offer to communities. Co-develop translated comms assets with community leaders and work with them to ensure appropriate distribution. Communicate and engage with communities through a range of channels.
5. **Capacity development in the community:** provide grants to community organisations to support health and wellbeing in the community. Work with VCS to promote health education and awareness in the community.

### Priority 2: Strengthening Primary Care

1. **Access to Primary Care** Meeting the needs of an increase in demand for primary care access. Working alongside Community pharmacies, the UTC team and patient representative groups to ensure accessibility to services in the right setting. In addition facilitating easier patient registration and upskilling front line staff to co-ordinate patients into the most appropriate setting
2. **CYP Priorities** – Improving access to on the day demand for advice/ guidance through closer working with Community Pharmacies and the Community Pharmacy Consultation Scheme. Expanding on our Paediatric Hubs to support management of patients in the community
3. **Integrated Working at Scale** – Focusing on wrapping around services based on population health needs, assessing the needs and working with Partner organisations to deliver services in the community
4. **Population coverage Local Enhanced Services** – Developing services provided in primary care settings and ensuring these services are accessible to all Brent registered patients
5. **Workforce Development** – Establishing a Training Hub structure and supporting PCNs to develop into Learning Environments

### Priority 3: Developing Community Care

1. **Heart Failure:** co-design and co-implement the proposed new Models of Care / Pathways for Brent Heart Failure Services as part of the Community Services Transformation and create a Heart Failure service that is NICE compliant and closer to home.
2. **Respiratory:** co-design and co-implement an integrated model of care for Brent Respiratory Service that is NICE compliment and closer to home.
3. **Frailty:** co-design a holistic model and strengthen the current Frailty Model with a joined-up approach that aligns with NWL ICS objectives. This will link in with the NWL Frailty Virtual Ward Model and help prevent hospital admissions.

4. **Rehab and reablement:** Rehab and Reablement have been managed separately to focus on immediate priority of extending the Avery Healthcare (Aster unit) contract and to set up a new LA provided reablement service in-house. This takes into account NWL CCG's community rehab bed review to inform future strategic commissioning plans reporting to the Community Beds review Group.
5. **Children Specialist services:** reduce waiting times for social communication/ASD assessments for Under 5s in Brent by understanding demand and capacity; developing the U5 Assessment Pathway; and workforce planning.

#### Priority 4: Better Mental Health and Wellbeing

1. **Access, Demand and Pathways:** improve access to services and maintaining wellness, by working towards increased access to IAPT. Reduce admissions and readmissions. Increase the number of people with SMI cared for in the community. Increase the number of discharges from SMI services.
2. **Employment:** improve links and communication between key facets of the system (Health, DWP and Service Providers). Support individuals with mental illness to navigate the system and get the right support at the right time. Stimulate business appetite for recruiting and supporting those with mental health conditions in the workplace.
3. **Housing and Accommodation:** Target provision of accommodation options for those with the most complex needs. Improve pathways from in-patient support to low support and independent accommodation. Improve access to independent housing in public and private sectors. Provide more flexible support to our patients.
4. **Children and Young People:** Waiting List Initiative and Trajectory need to be updated, NWL Strategic Review CAMHS needs to be completed and resources identified as part of the NWL levelling up agenda. A Joint Strategic Needs Assessment needs to be completed to ascertain post COVID-19 mental health priorities. Core20Plus5 Inequalities programme needs to address Brent CAMHS inequalities.