

	<b>Brent Health and Wellbeing Board</b> 28 October 2024
	<b>Report from the Chair of Brent Children's Trust</b> <b>Corporate Director, Children and Young People</b>
<b>Brent Children's Trust 6 monthly progress report</b>	

<b>Wards Affected:</b>	All
<b>Key or Non-Key Decision:</b>	N/A
<b>Open or Part/Fully Exempt:</b> <small>(If exempt, please highlight relevant paragraph of Part 1, Schedule 12A of 1972 Local Government Act)</small>	Open
<b>List of Appendices:</b>	Appendix A - Governance Chart Appendix B - BCT Activity Plan 2024-2026
<b>Background Papers:</b>	0
<b>Contact Officer(s):</b> <small>(Name, Title, Contact Details)</small>	Wendy Marchese Strategic Partnerships Manager, <a href="mailto:Wendy.Marchese@brent.gov.uk">Wendy.Marchese@brent.gov.uk</a>

## 1.0 Executive Summary

- 1.1. The Brent Children's Trust (BCT) is a strategic partnership group with the primary function to coordinate and steer the joint strategic direction for the delivery of local authority and health partner integrated services for children and young people in Brent.
- 1.2. As the BCT is a strategic partnership group, all operational activities sit with the individual organisations represented on BCT.
- 1.3. The BCT has a strategic relationship with the Brent Health and Wellbeing Board and Brent Integrated Care Partnership (ICP).
- 1.4. The Health and Wellbeing Board maintain oversight of BCT activity (see **Appendix A** for full governance structure). As part of this governance arrangement the BCT provides the HWB with a regular update report.

1.5. This paper provides an update of the BCT work programme covering the period April to October 2024.

## 2.0 Recommendations

2.1. The Health and Wellbeing Board is asked to note the strategic oversight activity of the BCT for the period April to October 2024.

## 3.0 Detail

### The Brent Children's Trust

3.1. The BCT aims to strengthen integration and collaborative working between the Council and health service partners through a shared goal of improving the health and wellbeing of children, young people and their families in Brent.

3.2. The Chair of the BCT is the Corporate Director, Children and Young People, Brent Council. The Vice Chair is the Brent Borough Director, NWL ICP.

3.3. The full membership of the BCT consists of:

Organisation	Role
<b>Brent Council</b>	<ul style="list-style-type: none"> <li>➤ Corporate Director of Children and Young People (Chair)</li> <li>➤ Director of Public Health</li> <li>➤ Public Health Consultant</li> <li>➤ Director Education, Partnerships and Strategy, CYP</li> <li>➤ Head of Looked After Children and Permanency</li> <li>➤ Head of Inclusion CYP</li> <li>➤ Head of Early Help, CYP</li> <li>➤ Head of Localities, CYP</li> </ul>
<b>Brent Integrated Care Partnership</b>	<ul style="list-style-type: none"> <li>➤ Brent Integrated Care Partnership Lead</li> <li>➤ Brent Borough Director</li> <li>➤ Brent Clinical Director (Vice Chair)</li> <li>➤ Head of Mental Health, Learning Disabilities and Autism, Brent</li> </ul>
<b>Health Service Providers</b>	<ul style="list-style-type: none"> <li>➤ Central London Community Healthcare NHS Trust</li> <li>➤ Central North West London Mental Health Care NHS Trust</li> <li>➤ London North West University Healthcare NHS Trust</li> </ul>
<b>Community and Voluntary Sector</b> <i>(as of September 2024)</i>	<ul style="list-style-type: none"> <li>➤ Chief Executive Officer of CVS Brent</li> </ul>

3.4. During the last reporting period the BCT agreed that the membership should be expanded to ensure the voice of the Community and Voluntary sector is more clearly heard. As a result of this agreement, the BCT Chair invited the Interim Chief Executive Officer of CVS Brent to join the Trust.

3.5. The BCT also recognised the importance of ensuring the education sector has a voice at the strategic level and will continue to explore the most appropriate way to ensure that the education sector is represented within the Trust.

3.6. The responsibilities of the BCT include:

- Be responsible for developing a joint vision and strategy for improving outcomes for children, young people and their families in Brent.
- Work in partnership with all key delivery agencies (public, private and voluntary) to ensure delivery of key priorities and associated aims, targets and inspection criteria.
- Set a clear framework for strategic planning and commissioning promoting integration and collaborative working between all partners.
- Monitor an agreed suite of performance information, including national and local, and quantitative and qualitative indicators in conjunction with other partnership boards.
- Ensure that priorities are informed by the views of children, young people, their families, data on service demand and the Joint Strategic Needs Assessment (JSNA).
- Develop initiatives between the council and health service partners to improve health and wellbeing for children, young people and their families focussing on tackling Brent's health inequalities.
- Keep the workforce informed and involved, providing clear direction and identifying opportunities for joint training and development when appropriate.
- Ensure that legislation relating to services for children and young people is implemented in the borough.
- Ensure close links with the Health and Wellbeing Board, Integrated Care Board, the Safeguarding Children Partnership and other key partnerships as necessary.
- Share good practice emerging from the work of the Trust.

3.7. The BCT also has the responsibility to oversee and drive the partnership activity responding to the four Brent ICP priorities that focusses on children and young people services. The BCT provides regular progress updates to the Integrated Care Partnership Board.

3.8. The BCT has strategic oversight of three partnership groups tasked with implementing specific priorities across the partnership. These are:

<b>Partnership Group</b>	<b>Purpose</b>
<b>Inclusion Strategic Board</b>	➤ To drive the development, implementation and success of the Brent SEND Strategy.
<b>Early Help and Prevention Group</b>	➤ To drive the development, implementation and success of the Supporting Families programme and Youth Strategy.
<b>Looked After Children and Care Leavers Partnership Group</b>	➤ To drive a range of initiatives that reflect both national and local policies and best practice to improve outcomes for children in care and care leavers.

### **Brent Children’s Trust Priorities 2024-2026**

3.9. In May 2024, the BCT agreed a refreshed strategic vision and set of priority areas of focus for 2024-2026.

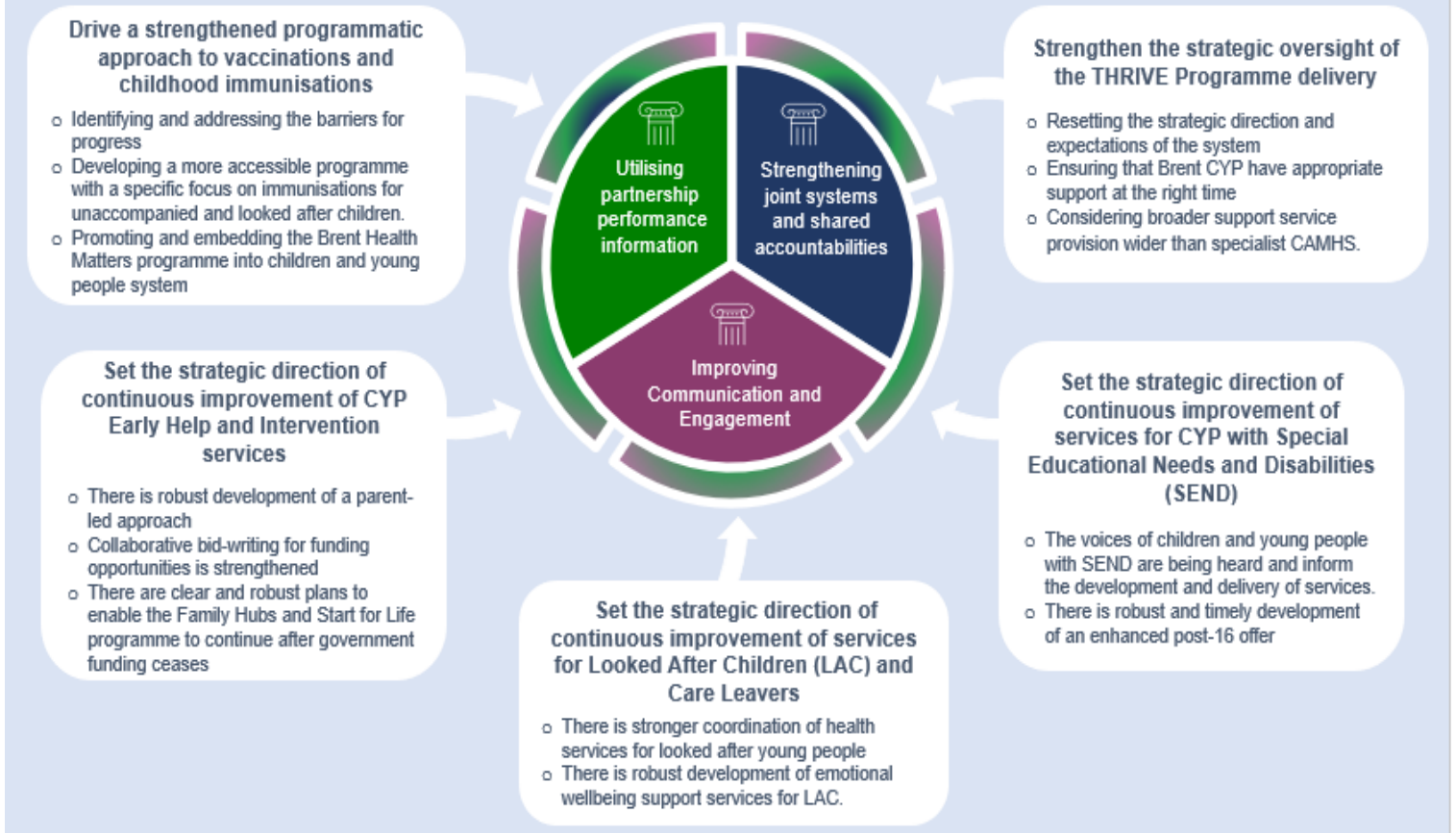
3.10. The BCT have identified five priority areas of focus that will drive the work programme for 2024-2026.

1. Drive a strengthened programmatic approach to vaccinations and childhood immunisations
2. Strengthen the strategic oversight of the THRIVE programme delivery.
3. Set the strategic direction of continuous improvement of Early Help and Intervention services.
4. Set the strategic direction of continuous improvement of services for Looked After Children (LAC) and Care Leavers.
5. Set the strategic direction of continuous improvement of services for children and young people with Special Educational Needs and Disabilities (SEND).

3.11. These priority areas are each underpinned by three success pillars:

1. Utilising partnership performance information
2. Strengthening joint systems and shared accountabilities
3. Improving communication and engagement

## Brent Children's Trust Priorities 2024- 2026



### **BCT strategic oversight activity during April to October 2024**

- 3.12. The BCT meets every two months to review progress against the identified priority areas of focus and consider any emerging local and national issues.
- 3.13. During the period April to October 2024, the BCT met three times on 21 May, 23 July, and 24 September.
- 3.14. As part of the meetings, the BCT considered and provided a steer on the progress and barriers of:
- The progress of the THRIVE programme in delivering mental health services for children, young people and families in Brent
  - The current position and progress barriers of the commissioning arrangements of SEND services in Brent
  - A proposal for a deep-dive project to measure and explore the factors that contribute to the identified concern of the low level of school readiness in Brent
  - The findings and recommendations of the Brent Oral Health Needs Assessment with a particular focus on children and young people.

- 3.15. The BCT also reflected on the findings of the Family Wellbeing Centre Annual Report 2023-24 and identified actions for the BCT.
- 3.16. The BCT also continued to assess the implementation of the BCT's vision and considered the stage which the partnership is at in realising the agreed pillars of success.
- **Strengthening joint systems and shared accountabilities** - The BCT felt that considerable improvements have been made in with strengthening joint systems and shared accountabilities across the BCT partners.
  - **Improving communication and engagement** - The BCT felt that communication and engagement with children and young people and their families has significantly increased with the voice and views of children and young people being evident in partnership activity.
  - **Utilising partnership performance information** – The BCT agreed this area requires more focus. It was recognised that whilst partners are using data and performance information within different workstreams, there is a need for the BCT to have a consolidated focus to this performance information to inform decision-making and planning. and get a more accurate picture of service needs and gaps.

### **BCT Activity Monitoring Log 2024-2026**

- 3.17. In May 2024 the BCT began to reflect on the agreed the priorities in line with the refreshed vision and developed an activity plan to enable the BCT to track the agreed partnership activity for each of the five priority areas of focus.
- 3.18. The detail of the BCT activity monitoring log is set out in **Appendix B**, this plan is updated every two months and reviewed during each BCT meeting.

### **Progress of the THRIVE programme**

- 3.19. In July 2024, the BCT reviewed the implementation of the THRIVE programme in Brent focussing on the current position with delivering this programme and expected outcomes and achievements.
- 3.20. The CYP THRIVE model is a national model that aims to be an integrated, person centred, and needs led approach to delivering mental health services for children, young people and families which conceptualises need in five quadrants:
- 1. Getting Advice**  
Supporting CYP with mental health and wellbeing advice and signposting.
  - 2. Getting Help**  
Supporting CYP with focused goals based mental health and wellbeing interventions.

### **3. Getting More Help**

Supporting CYP with more extensive, specialised goals based mental health and wellbeing interventions.

### **4. Getting Risk Support**

CYP in this quadrant may have some of the difficulties outlined in Getting Help and Getting More Help but remain a risk to self or others. This quadrant supports complex CYP mental health needs with significant input and more intensive treatments and interventions.

### **5. Thriving**

Supporting CYP to maintain mental and healthy wellbeing through effective prevention, early intervention, and promotion strategies to enable them to lead happier, healthier and emotionally stable lives.

3.21. In Brent, it has been agreed that the BCT in partnership with the Integrated Care Partnership Mental Health and Wellbeing Executive Group set the strategic direction and expectations of the system. This has been defined by:

- Agree governance arrangements
- Set up a THRIVE Working Group
- Map existing provision and interrogate mapping to determine which of the five quadrants the local offer sits in
- Recommend system and culture changes
- Implementation plan to be developed and agreed
- Identify capacity and resources required locally to implement CYP Thrive

3.22. The BCT acknowledged that currently in Brent a comprehensive range of mental health services are delivered collaboratively by statutory, voluntary and community organisations. This includes, under the Getting Advice and Getting Help quadrants, a range of services in schools and community settings delivered by numerous providers. The offer in Brent also caters to a broad age range from 0-25, including the transitional age group of 16-25, bridging the gap between child and adult mental health services. Digital support is also available providing accessible resources for self-help, text-based counselling, and community support; catering to those that prefer or require remote support.

3.23. The BCT agreed that the following key areas require progress:

- Addressing identified service gaps under the Getting More Help and Getting Risk Support quadrants
- Ensuring that there is appropriate funding and sustainability of the services
- Ensuring that current service access, capacity and capability must meet all the needs of Brent's children and young people.
- Clarity and transparency with referral pathways and Care and Treatment support

- Additional provision is needed to support neurodiverse children and young people.
  - Engagement with Brent children, young people, parents, carers and the local community to understand needs and experiences.
- 3.24. The BCT highlighted the ongoing concern that a great deal of the delivery of the programme is dependent upon funding and a reliance on the CNWL CAMHS service.
- 3.25. The BCT provided a steer that consideration must be given to ensuring all redesigned services are culturally appropriate.
- 3.26. The BCT also recommended that additional analysis was undertaken in relation to the cohort of children that attend specialist CAMHS services to understand what support could have been put in place for those children before they reach crisis point. The data so far indicates disproportionality in referrals and higher levels of referrals from some parts of the borough.
- 3.27. The BCT will continue to oversee and provide a strategic steer on the progress of the THRIVE programme.

### **Commissioning of SEND services in Brent**

- 3.28. In September 2024, the Brent Children's Trust discussed the commissioning arrangements to improve care for children and young people with special educational needs and disabilities (SEND). The BCT considered what is working well, what the challenges are and provided a steer on the next steps.
- 3.29. The arrangements for commissioning care and support services for children with SEND aim to ensure that more children get access to preventative care and are on track with social, emotional and physical development milestones.
- 3.30. The plans to improve care for children and young people with special educational needs (SEND) are focussed on three areas:
- **Child health and family hubs**  
Developing child health and family hubs, which will provide services from the NHS, local authority, and voluntary care services.
  - **Working with families**  
Working with families, children, and young people to design services that meet their needs.
  - **Transition from child to adult services**  
Ensuring a consistent transition from child to adult services, and to include this in SEND local offers.



**a. Brent Child and Adolescent Mental Health Services (Specialist CAMHS)**

This service provides a specialist mental health service for children and young people with complex, severe, persistent emotional, behavioural and/or developmental problems.

**b. Brent Young People Thrive**

This provision works to raise awareness of mental health and emotional wellbeing of children and young people in Brent within schools, GPs, Children Centres and amongst residents.

**c. Brent Centre for Young People**

The service provides emotional wellbeing and mental health support to children and young people including empowering children and young people to take better care of themselves and live healthier lives, supporting children, young people, and their families to adopt and maintain healthy behaviours and identifying mental health needs in children and young people at an early stage to prevent more serious problems developing.

**d. Mental Health Support in Schools**

The provision works to meet the mental health needs of children and young people in primary, secondary and further education (ages 5 to 18), by providing mental health support in schools, colleges, and other education settings. The service works with schools to improve mental health and wellbeing amongst pupils as well as helping staff within a school or college setting to provide a 'whole school approach' to mental health and wellbeing. It works alongside and integrates with the mental health and wellbeing support that already exists in Brent such as counselling, educational psychology, school nursing and specialist mental health services (CAMHS).

**e. Brent's Talking Therapies for Children and Young People (formerly CYP IAPT)**

This service works to improve both the effectiveness of treatment and the experiences of children, young people and parents through specialist psychological interventions in a number of ways including one to one therapy, Cognitive Behavioural Therapy (CBT), group therapy and community support.

The service provides a collaborative care model for children and young people.

**f. Speech and Language Therapy (SLT)**

This service provides universal, targeted and specialist SLT for children and young people in Brent who have been identified as requiring additional support with speech, language, communication needs (SLCN) and includes:

- Support for parents and pre-school children (aged 0-5 years)
- Provision for children of primary school age (aged 5-11 years) with SEN Support who attend Brent mainstream schools and are registered with a Brent GP
- Provision for children of secondary school age (aged 11-16 years) without an Education, Health and Care Plan (EHCP) (SEN Support) who attend Brent mainstream schools and are registered with a Brent GP.

**g. Brent Special Schools Nursing**

This service offers a range of support to children and young people with complex health needs, within special schools. The Special schools nursing team provides a Healthy Child Programme in special education settings in Brent. They work closely with education and other agencies to ensure that children achieve their full potential in school.

**h. Paediatrics, Epilepsy and Respiratory Nurses**

The Brent Epilepsy Specialist Nurse for children and young people provides support to children with epilepsy and their families.

The Brent Respiratory Nurse supports the local paediatric services with provision for children and young people with asthma and breathing difficulties.

The Paediatric service provides clinical input to infants, children and adolescents.

- 3.32. The BCT commended the introduction of the waiting well initiative to support children, young people and parents on the waitlist for CAMHS services. This initiative ensures that all parents and children who are on the waiting list are kept regularly updated and has received positive feedback and suggestions on how this initiative can be improved from parents and children have been implemented.
- 3.33. The BCT summarised the challenges into three main themes:
- **Workforce challenges**  
There are pressures in specialised areas like speech and language therapy and there is a need to develop solutions for recruitment and retention.
  - **Improving service connectivity**  
The current siloed approach to services for children and young people is also problematic, with parents expressing frustration over being moved between services without their needs being met in one place. The BCT emphasised the importance of coordinating services to provide more seamless and effective support.  
The BCT agreed that the current patchwork of services is unsustainable, and there was consensus that speech and language therapy should be prioritised for redesign, given the significant budget and service pressures.
  - **Managing resources more effectively without additional funding**  
The reduction in early intervention services has compounded the issue, leading to increased demand for more intensive services down the line. There is a financial strain as the burden shifts between the LA and the NHS, with each side trying to manage costs.  
The BCT highlighted that there is a need to explore alternative models of service delivery, such as training communities to support children with communication difficulties. A more coordinated approach is needed to manage the situation, and this will require strong multi-agency collaboration.
- 3.34. The BCT agreed that the next steps are for the council and North West London ICB to develop a Joint Commissioning Plan for SEND related services, with the BCT maintaining strategic oversight of this work.

### **School readiness in Brent**

- 3.35. The BCT recognise that there is a lower than benchmark level of school readiness in Brent.
- 3.36. Whilst there are some statistics on school readiness, the BCT agreed that further detail and data analysis will help the partnership to formulate action plans and provide a baseline for evaluating that work.

3.37. In September 2024 the BCT agreed the proposal to carry out a deep dive analysis to provide sufficient detail to target the geographical areas, parents and CYP with lowest levels of school readiness.

3.38. The findings and recommendations of this deep dive project will be brought back to the BCT once it is completed to enable the BCT to provide a steer on the next steps.

### **Brent Oral Health Needs Assessment (focus on children and young people)**

3.39. The BCT considered the findings and recommendations specific to children and young people of the Brent Oral Health Needs Assessment 2023 and what action has been taken to date in response to the findings of the assessment.

3.40. The needs assessment serves as a roadmap to the improvement of oral health outcomes for children, young people, and vulnerable adults in Brent through the following objectives:

- Comparatively explore oral health outcomes for children and young people (CYP) in Brent, with regional and national estimates
- Identify the gaps in oral health knowledge and practices among CYP and vulnerable adults in Brent
- Make recommendations for oral health promotion/intervention for Brent CYP and vulnerable adults

3.41. The needs assessment identified that the burden of dental decay in Brent has been on the increase over the past decade, while in London and England, the average has been on a stable decline. The assessment highlights data that suggests:

- up to 46% of children in the borough had experienced some form of tooth decay by age five
- more children in Brent are being admitted to hospital because of dental decay than the rest of London.
- less than half of the children and young people population in the borough access dental services yearly
- amongst adolescents there are gaps in the knowledge and practice of recommended oral hygiene techniques, as well as a high proportion of this age group regularly consuming foods high in free sugars.

3.42. The needs assessment recommended:

- the development of an action plan over the next three years to qualitatively explore oral health-seeking behaviours among CYP and families and supplement current oral health promotion and intervention efforts with a focus on diet as well as hygiene.

- **Oral health promotion** - the public health team would want to qualitatively explore the perspectives and motivations of various resident groups regarding oral health behaviours and their engagement with current health promotion efforts.  
Supplement the efforts of the commissioned oral health promotion team in increasing the knowledge of good oral health practices among children, their parents/guardians, and their families.  
Focus health promotion on the relationship between diet and oral health outcomes and the dangers of regular consumption of fizzy drinks and foods high in free sugars.
- **Intervention** – Continuation and expansion of the mobile dental check project (oral health bus) for children and supervised toothbrushing programme and launch targeted oral health promotion to young people to increase knowledge on good oral health practices.

3.43. The BCT acknowledged that the oral health bus has been operational for three years; however, due to suboptimal temperatures on the bus, services have been transitioned to school settings. The BCT was pleased to note that over 800 children have received services this year, with recent data indicating improvements in oral health, as 40% of the children assessed show signs of progress.

3.44. The BCT also acknowledged that activity is already being implemented to address the findings of this needs assessment which includes:

- Providing basic oral health training to staff to improve service delivery and awareness.
- A focused initiative on tooth extraction is underway, targeting services to areas identified as having the greatest need for dental care.
- Targeted work with children and young people is ongoing, with an emphasis on improving health education.

3.45. The BCT recommended that:

- this initiative should align with the Brent ICP priorities, the Brent Health Matters programme and the NWL ICB priorities.
- further consideration is given to educating parents and carers on the importance of children and young people's oral health.
- the findings and responses to the recommendations of the Brent Oral Health Assessment are shared with the Brent Health and Wellbeing Board at a future meeting.

#### **4.0 Stakeholder and ward member consultation and engagement**

4.1. Brent Council and NWL ICB (Brent) are members of the BCT and the partnership groups and have contributed to this report.

## **5.0 Financial Considerations**

- 5.1. There are no financial and budgetary implications relating to the Brent Children's Trust progress update report.

## **6.0 Legal Considerations**

- 6.1. There are no legal implications relating to the Brent Children's Trust progress update report.

## **7.0 Climate Change and Environmental Considerations**

- 7.1. There are no climate change and environmental considerations relating to the Brent Children's Trust progress update report.

## **8.0 Communication Considerations**

- 8.1. There are no communications considerations relating to the Brent Children's Trust progress update report.

**Report sign off:**

***Nigel Chapman***

Corporate Director of Children and Young People