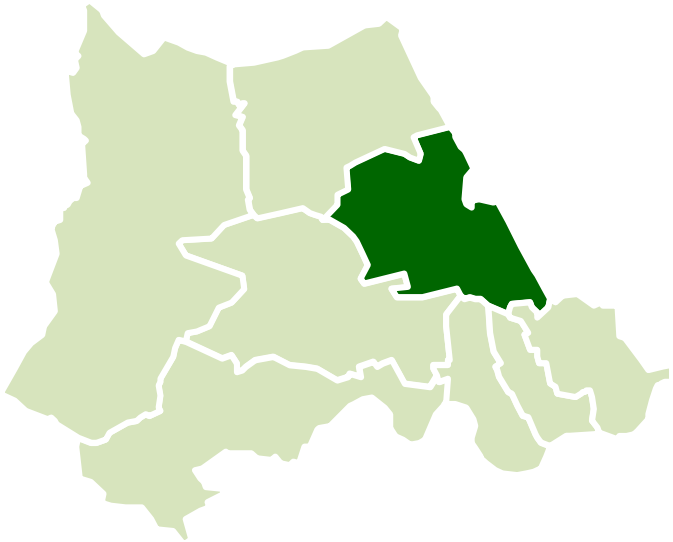
Brent

NHS
Brent
Clinical Commissioning Group

Brent Health and Care Plan



Our five year plan for

Brent residents to be well and live well

Brent

NHS Brent Clinical Commissioning Group

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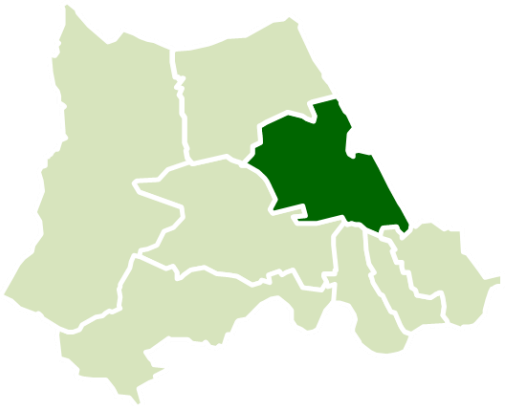
Introduction



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, 600 Brent residents[1]

369,166 GP-registered population[2]

£406,569k - 2016/17 CCG allocation[3]

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 1**4%** 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

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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.	• 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
Joined-up services helping residents get well and stay well- prevention	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.	• 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

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

Big Ticket Item 2	Description	Impact
New Models of Care- Greater access to more effective services	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. 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.	• 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
Joining up Older People's services	We're going to help our older residents live more active, engaged, and independent lives, with dignity guaranteed. 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. 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.	• 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
Improve outcomes for people with mental health illness	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. 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. 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.	• 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.

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

Big Ticket Item 5	Description	Impact
Transforming Care – Supporting People with learning disability	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. We will continue to implement the recommendations of the Transforming Care and Commissioning Steering Group's 2014 report on the Winterbourne View scandal. 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. 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.	• 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
Central Middlesex Hospital (CMH) a centre of excellence	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. 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. 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.	• 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

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