1. MENTAL WELLBEING

Future in Mind – promoting, protecting and improving our children and young people’s mental health and wellbeing

The CCGs were successful in a bid to be a trailblazer area for Mental Health Support Teams (MHSTs) within educational settings. Adverts to recruit for Educational Mental Health Practitioners for the teams have been posted. Craven schools have received communications through North Yorkshire County Council inviting them to sign up to receive support from the MHSTs. The Mental Wellbeing Partnership Board has approved the Children and Young People (CYP) Local Transformation Plan refresh due to be submitted to NHS England at the end of October. The Board has suggested that this is reviewed following the system wide review of CYPMH services including crisis pathways.

Healthy Minds Digital Doorway

NHS Bradford City CCG allocated non-recurrent underspend to improve the information and awareness about mental health services across the district. One of the key areas of focus was to review and develop the much regarded Wellbeing Directory and Guideline. Chapel Street Studios and MIND in Bradford have been developing a proof of concept for a simple single digital door way to support, called Healthy Minds. The Healthy Minds platform went live at the end of September and providers were asked to sign up and register their details. The platform will utilise service information and ask a series of quick questions to guide people to right support. There is currently a request to frontline colleagues and GPs to become start-up ambassadors and help train the ‘Wellbeing Assistant’ function of the Healthy Minds platform to ensure the best possible results are presented to users. The Healthy Minds brand and website will be fully trained, launched and live to the public in January 2020.

Older People’s Mental Health

A successful application for Integrated Care System (ICS) transformation funding will enable the Intensive Home Treatment Team to extend care to older people with functional mental health conditions as well as to adults of working age.

Physical health in severe mental illness

In 2019/20 GP practices in all three CCG areas are incentivised to complete a series of six physical health checks for people on the Severe Mental Illness (SMI) register. Figures for July 2018 – June 2019 show that the largest numbers of interventions required were for weight management and smoking. The majority of people who required a smoking cessation intervention received one, although the data do not tell us how effective these interventions were. However over 1,000 people with severe mental illness and high BMI or blood pressure who could benefit from a weight management or exercise intervention did not access one. The CCGs have commissioned VCS organisations to work with clinical and Public Health colleagues to develop and provide bespoke physical health interventions for people with severe mental illness.
2. DEMENTIA

Diagnosis rates for dementia in Bradford district and Craven continue to be significantly higher than the 66.7% standard and above regional and national averages.

Dementia Friendly Communities are emerging in South Bradford and in Wrose to extend the work of existing Dementia Friendly Communities in the north of the area. A new and highly active Dementia Friendly Community is making an impact in Keighley. Organisations in central Bradford are also being supported to become Dementia Friendly.

Bradford Hospitals has published its dementia strategy including workforce development, improved recognition of delirium, review of dementia care in the Virtual Ward, development and implementation of a carer’s resource pack, and continuing work to ensure that environments are Dementia Friendly.

As part of a regional pilot, eleven Advance Care Planning facilitators from Local Authority, NHS and VCS organisations in Bradford district and Craven will cascade training to colleagues, increasing the number of practitioners confident to undertake advance care planning conversations.

3. AUTISM

*Autism – a lifelong disability which affects how people communicate and interact with the world*

*Addressing the backlog of autism assessments for children and young people*

This work is being taken forward through a provider collaborative and a general manager and project manager are now in post. Each of three NHS provider organisations has identified an executive lead to provide support and minimise organisational barriers.

Recruitment to additional clinical psychology roles has been completed with the new staff commencing work between November and January 2020. The services are in discussion with Bradford council around the purchasing of educational psychology support.

Bradford City CCG have identified additional non-recurrent funding through the Reducing Inequalities in City (RIC) funding and the general manager has been in discussion with private autism assessment providers to discuss options for them undertaking assessments for a cohort of Bradford City children.

We have been notified that additional funding to reduce the waiting lists could be available via the national children and young people’s mental health programme. The provider collaborative have been asked to complete the baseline tracker for submission by 7 November, this is required before funding can be released.

A trajectory has been developed which shows when the service providers expect to achieve full compliance with the NICE guidance in respect of the autism diagnostic assessment commencing within 3 months of the referral to the autism team.
This initial trajectory is based on the known recurrent and non-recurrent (CCG wait list funding and Bradford City RIC funding in the system and will be updated as any additional non-recurrent funding is identified:

Table 1: Projection – referral to 13 week outpatient first appointment (numbers waiting)

<table>
<thead>
<tr>
<th>Date</th>
<th>Total Wait List + Referrals</th>
<th>Closed Cases (per month)</th>
<th>Closing Waiting List</th>
</tr>
</thead>
<tbody>
<tr>
<td>August 2019</td>
<td>1078</td>
<td>50</td>
<td>1028</td>
</tr>
<tr>
<td>March 2020</td>
<td>951</td>
<td>101</td>
<td>849</td>
</tr>
<tr>
<td>March 2021</td>
<td>778</td>
<td>76</td>
<td>702</td>
</tr>
<tr>
<td>March 2022</td>
<td>621</td>
<td>76</td>
<td>546</td>
</tr>
<tr>
<td>March 2023</td>
<td>464</td>
<td>76</td>
<td>389</td>
</tr>
<tr>
<td>March 2024</td>
<td>307</td>
<td>76</td>
<td>232</td>
</tr>
</tbody>
</table>

Work continues to establish a unified project data dashboard to support the development of a single autism assessment service. The general manager has advised that a combined patient tracking list is in development to ensure an accurate and consistent approach to waiting list management and enable district wide visibility on where children are waiting the longest for assessment.

**Autism Partnership Working**

An all age autism strategy group has been established under the Transforming Lives Partnership Board bringing together local VCS organisations, key services and stakeholders, including Bradford Council and the CCGs. Working with a wide range of stakeholders the group is currently identifying key strategic priority areas and actions that will make a real difference to the lives of children and adults with autism, which includes:

- Better mechanisms to co-produce and engage with people with autism and family members in the development of local plans;
- Reduce the waiting list for assessment and diagnosis across all ages;
- To increase the Awareness and Understanding about Autistic Spectrum Conditions (ASC) through ongoing training and development opportunities;
- To ensure access to quality information and support pre and post diagnosis; and
- To improve cross system data collection and reporting.

An autism deep dive session was undertaken by the children and young people’s Transformation and Integration Group to gain better understanding of the current pathways, to discuss concerns and potential ideas to improve the processes. Areas discussed include identification, referrals, assessment and diagnosis process, pinch points, pre and post diagnosis support, training needs and transition. A high level process chart is being developed mapping the current provision to create a visual understanding of what is on offer and how the pathways are currently delivered.
4. MATERNAL AND CHILD HEALTH

The Maternity, Children and Young People’s Partnership is currently on hold, pending the results of the review of system programme boards. However, senior system leaders continue to consider and revise our approach to working in partnership to improve services for children and young people.

a. Improving Outcomes in Maternity Services

Better Births - Maternity services are personalised and safe, with women-centred care

A meeting is planned to review the progress of our service providers in respect of achievement of the requirements of Better Births to allow any risks to achievement to be identified and plans for mitigation to be developed.

b. Improving Outcomes for Children

0-19 Wellbeing and Mandated Duties for Children Prevention and early help for children, young people and their families with a focus on tackling inequalities; including Special Educational Needs and Disabilities and Children Looked After.

Special Educational Needs and Disability (SEND) – our children will achieve well in their early years, at school and in college, and lead happy and fulfilled lives

The SEND Code of Practice requires Education, Health and Care Plans (EHCPs) to be issued within 20 weeks from the point of receipt of referral within the local authority. Health services/organisations have a pivotal role to play, in that health advice needs to be provided within six weeks of receipt of the request being made to health. As data flowed from the LA to individual health service providers we have been reliant on the LA to monitor our overall compliance rates. In order to better monitor our health service compliance rates an education, health and care plan single point of contact (EHCP SPoC) has been established through which all requests for information from health (and subsequent return of information) will flow. The EHCP SPoC will allow us to oversee all relevant data flow and we will be able to capture and address issues with regard to timeliness of information sharing.

The EHCP SPoC became operational on 16 September but issues have been identified around data handling procedures. Interim arrangements have been agreed and the flow of information for health advice is taking place. Wider discussions are planned between IG leads, local authority and health providers to ensure the process is IG/GDPR compliant.

The SEND code of practice suggests that local areas should have either designated medical officers (DMOs) or designated clinical officers (DCOs) in post and we have had our DMOs in post since 2014. However recent best practice (supported by the feedback from SEND inspections) suggests there are clear benefits to local areas from the DCO role in respect of creating more time to undertake the more operational elements of the role. Interviews for the Designated Clinical Officer (DCO) are planned for November 2019. The appointment of the DCO will provide the CCGs an opportunity to work with CBMDC and NYCC to refine current processes in line with the statutory code of practice to support our children. The DMOs will provide support to the DCO.
The CCGs and health providers have compiled a considerable amount of health data, including narrative in preparation for the imminent SEND inspection. A sense check of the data is underway prior to submission to the local authority and is providing a rich source of data for future planning purposes and addressing risk.

**Children Looked After** – As a result of an identified risk in respect of delivery of health assessments for children looked after within statutory timescales, the CCGs led a review of health support for children who are looked after (CLA). The review was undertaken with a view to understanding the impact of the increasing numbers entering the care system and ensuring there is sufficient capacity in the system to support the CCGs to deliver the statutory duties placed upon them.

The final CLA report and action plan were presented to the Children’s Services Programme Board (CSPB) and the Children’s Services Improvement Board (CSIB). Both boards were concerned with the pace and timeliness and asked for a timeline which highlighted when statutory duties would be met. The CSPB thanked the CCGs and providers for their response to urgent adoption medicals. The CSIB have asked for an update on the action plan and a map showing compliance and interdependencies highlighting when statutory duties would be met for the meeting on 4 December 2019. The CCGs hosted a meeting of all stakeholders in September where the action plan was reviewed, action leads were updated and there was agreement that it was a system wide issue which required input from all stakeholders to rectify the issues. The action plan will continue to be reviewed and updated at the monthly CLA Review steering group.

**Mobilisation of the 0-19 Service**

The risk on the CCG risk register has been reviewed and revised to reflect the move from procurement to mobilisation. CCG colleagues continue to attend the 0-19 systems partnership monthly meeting. The Director of Public Health will attend Joint Quality Committee in November to provide an update on what she believes are the risks to CCG commissioners services as a result of the new specification.

**Behaviour Evaluation Support Team (BEST)**

The BEST project is a service provided by Bradford Council that aims to enable children and young people, aged 5-18 years, (both male & female) who have a learning disability and ‘behaviour that challenges’ to remain at home with their families. BEST is jointly commissioned by Bradford District and Craven CCGs and Bradford Council with the larger proportion of funding allocated via health budgets. The BEST service provides a managed environment to enable children and young people to be assessed and, through a process of monitoring, planned interventions and evaluation, the children’s behaviours are improved. These planned interventions are then transferred to other settings where appropriate i.e. home, school and the child’s community. The service offered at BEST may include short periods of care in the unit and overnight stays depending on the targeted behaviours and specific areas of work.

A review of the service was undertaken to ascertain contractual requirements, demand and capacity, appropriateness of the commissioned components by health and local authority, risks and emerging issues. From the review it is clear that this service delivers positive interventions with a small number of children and their families in a safe and
supportive environment. There are clearly excellent working relationships between the team and specific individuals in local CAMHS and a real commitment to try support these children and their families and to prevent family breakdown.

There are a number of issues that have been flagged as part of the review process. A task and finish group involving key stakeholders has been established to implement the key recommendations from the review.

The key recommendations have been prioritised and include:

- A contract to be put in place identifying what outcomes are expected from the service. This includes developing an updated service specification and establishing clear service governance and monitoring arrangements to monitor quality and experience of care.
- A contractual arrangement with local CAMHS is to be established to ensure clarity of role and purpose of clinical input received / needed from CAMHS.
- The Local Authority to take necessary steps to register BEST as a stand-alone service and ensure that the CCG investment is used solely for the purpose of delivering BEST services.

5. SELF CARE AND PREVENTION – ‘LIVING WELL’ PROGRAMME

The Living Well programme is developing an ambitious whole systems approach to improving the health and wellbeing of our population through making it easier to live a healthy lifestyle.

Key project updates include:

- The Living Well Programme Board met for the first time on 26th September. Terms of Reference were agreed and the following meeting will act as a development session to establish clear roles and responsibilities of the board members and deliver a whole systems presentation from Public Health England.

Work is underway in the three main workstreams and the core Living Well Systems group have had an initial meeting to agree reporting arrangements and governance mechanisms and it was agreed that we will recruit a new post to evaluate and measure the impact of the programme.

- Self Care Week with Living Well - last year Living Well won the prestigious National Self Care Week Award for our events and this year we are aiming to be even bigger and better. The theme for 2019 is ‘Think Self Care for Life’ and the celebrations will be held between the 18-24th November 2019.

We have some great events planned across Bradford district this year:
- Airedale Shopping Centre - Monday 18 & Tuesday 19 November 10am – 4pm
- Kirkgate Shopping Centre - Wednesday 20 November 10am – 4pm
- Broadway Shopping Centre - Thursday 21 & Friday 22 November 10am – 4pm
Other events celebrating Self Care Week are being organised by a wide range of partners including GP practices, VCS organisations, Bradford District Care NHS Foundation Trust, Bradford Royal Infirmary, Airedale General Hospital and a number of other business across the District. You can find out more at mylivingwell.co.uk

- Community Connectors – we are working with Sheffield Hallam University to evaluate the current service which is funded non-recurrently until the 31st March 2020. We are proposing to continue the current service through the new CLICS (Central Locality Integrated Community Service) proposal, which was submitted and agreed by the Reducing Inequalities in City panel for an enhanced service in City CCG. A workshop is taking place at the end of October with the CCG, clinical directors and current providers to discuss and agree future pathways and service collaboration.

- Care navigation for receptionists – the new dashboard highlights that practices have recorded 30,125 new signposts to services between December 2018 and October 2019 and 26,443 of these signposts have been accepted giving an overall acceptance rate of (88%). The acceptance rate has steadily increased each quarter (77-82-88-94%) throughout the year. 57 Practices are currently using the standard template and several others are training staff to engage in the project. We are currently working on launching phase two of the project in December and are working with external providers such as social care, carers and advice services to confirm their criteria for the template. Care Navigator workshops are planned for early December with GP practices and providers.

- Orcha (prescribe an app digital tool) – a new pathway for low level mental health support has been developed and supported by a series of recommended apps agreed by local clinicians. Plans have been developed to incorporate ORCHA referrals and the recommended apps list into the GP ASSIST clinical system to help streamline the referral process. Work has commenced with Bradford Hospitals to look at how other clinical speciality areas may use ORCHA.

- ABCD asset based community development funding – the VCS Alliance have announced a 4th final round of ABCD funding for the £18,257 remaining funds. They are inviting Bradford-wide applications from grassroots organisations that are not tied to a particular geography. This is following discussions with the VCS Anchor Organisations and feedback from across the system. Additionally, a number of the Community Partnerships have decided to allocate some of their project funding to continue the ABCD grants locally.

The list below shows the top eight types of activities which have been funded by the ABCD work to date:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Promotion</td>
<td>18.1%</td>
</tr>
<tr>
<td>Social Group Activities</td>
<td>15.7%</td>
</tr>
<tr>
<td>Exercise and Fitness</td>
<td>12.9%</td>
</tr>
<tr>
<td>Support Group</td>
<td>11.7%</td>
</tr>
<tr>
<td>Outdoor Spaces</td>
<td>8.1%</td>
</tr>
<tr>
<td>Café/Foodbank/Household</td>
<td>6.0%</td>
</tr>
<tr>
<td>Sport</td>
<td>6.0%</td>
</tr>
<tr>
<td>Crafts and Skills</td>
<td>5.2%</td>
</tr>
</tbody>
</table>
• Reducing Inequalities in City (RIC) funding – a number of the RIC proposals support
the Living Well programme and work is underway to progress the projects and
complete the business cases. There are also a number of non-recurrent proposals
which we will be developing with system partners.

6. LEARNING DISABILITY – HEALTH WORKSTREAM

People with LD have more long term health conditions than the general population
and at times are dying of preventable and premature deaths.

Annual health checks - all CCGs expected to achieve 75% of people on LD
registers to have an annual health check, as this is a reasonable adjustment to
reduce health inequalities for this client group. Across the district we are currently at
27% in first 6 months, with Airedale CCG lowest and Bradford City at highest at 34%
. Some practices have already reached and over achieved the target. All practices
have been made aware of their current uptake and have been reminded of need to
achieve the 75%. We have been highlighting the need for annual health checks in
younger people with local paediatricians, voluntary groups and schools with
awareness sessions being offered by local Advocacy services and LD Transition
nurses in BDCFT.

STOMP – STOMP stands for ‘stopping over medication of people’ with a learning
disability, autism or both with psychotropic medicines such as antipsychotics, anti-
depressants and anti-convulsants. It is a national project involving many different
organisations which are helping to stop the over use of these medicines. STOMP is
about helping people to stay well and have a good quality of life.

Evidence suggests people with LD are prescribed antipsychotics to manage their
behaviour rather than for a diagnosed mental health condition and the side effects of
these medications can have a serious impact on people’s health, which may already
be poorer. The national average for prescribing antipsychotics is 17% and across
the CCGs we have an average of 10%. We are aware that the majority of people
with LD prescribed these medications are supported by secondary care and the
psychiatrists in the LD community team. They are supportive of the STOMP agenda
and have been working on this since it started. The community LD team in BDCFT
have also run a number of STOMP training sessions for the local providers which
have been well attended so that services are aware and supportive.

Flu vaccinations – People with learning disabilities are entitled to free flu
vaccinations. The biggest cause of death for people with LD is respiratory disease
and therefore increasing numbers of people having their flu vaccination reduces the
risk of them getting a respiratory related illness. We now have easy read flu
information available and are promoting this across networks.

7. PERSONALISED CARE

Individual Service Funds (ISF)
The VCS, Local Authority and CCG Open Space event is planned, with two events in December in Bradford and Keighley). “Open Space” is a technique for running meetings where the participants manage the agenda themselves, gain ownership of the work and come up with solutions to issues that they have identified. The topic for the event is personalised care including ISFs. The individual service funds programme continues to be developed as part of BMDC’s offer for personal budgets. The first ISF phase one tender process is currently being carried out to identify independent homecare providers to deliver this service from Jan 2020. ISF phase two is under development, which will identify further activities with providers in relation to other responsibilities i.e. brokerage, personal assistant recruitment, personalised assessments etc.

**Personal Health Budgets (PHB)**

Work is underway to revise the current PHB procedure document to incorporate all types of care pathways within the Personalised Commissioning Department (PCD). This will enable the document to give clear guidance around the implementation of personal health budgets to professionals involved.

Bradford CCG hosted the regional personal wheelchair network group at the end of September to share good practice. Work towards the implementation of personal wheelchair budgets continues with the CCGs now being mentored by Leeds CCG to support the implementation. This work will commence via Airedale Hospital mobility services initially.

**Progressing Integrated Working**

A joint review of our current Continuing Healthcare referral process has been completed, which has highlighted further opportunities for integrating personalised commissioning processes across health and social care. This is being progressed through CCG and Social Services working groups. It is apparent that some elements can be clearly integrated such as our commissioning and financial arrangements. However, there is further work needed to look at the joint operational issues such as interpretation of local and national guidance or national policy and to define which standing rules and regulations might affect integration. A joint audit is scheduled which will assist in informing future planning and agreements.

**Children’s Integrated Pathway**

The Bradford Children’s integrated pathway process is underway and will be due for review soon. New referrals appear slow and training sessions for all staff involved are planned to ensure eligible children are not missed. Work continues to identify and join processes to prevent duplication and the working arrangements for children’s continuing care staff have been changed to aid this. The mapping of children’s health services is complete and is to be mirrored by the Local Authority to aid staff in correct service referrals to reduce delays and duplication.

**Liberty Protection Safeguards (LSP)**

The LPS are set to replace the current Deprivation of Liberty safeguards (DoLS) framework, which ensures individuals without capacity are not unlawfully deprived of their liberty in relation to managing their safety and care delivery. A proposal is being prepared to allow the CCG to consider how it will follow it’s legal responsibilities once this comes into effect from October 2020.
8. VOLUNTARY AND COMMUNITY SECTOR

The voluntary, community and social enterprise sector (VCSE) has a key role in creating a vibrant and healthy society and is increasingly seen as an important partner for the public sector in addressing some of society’s biggest challenges. The voluntary and community sector is extremely diverse, ranging from large national charities to small local providers with few or no paid staff; what connects these organisations is that they operate independently for the public good, supporting people and communities.

The VCS sections of this report may not be funded by the CCGs; the report highlights those with the greatest impact on health and wellbeing.

Bradford VCS Alliance

This report provides some very brief highlights from BVCSA of developments and progress over the last month.

Contract Delivery Highlights

- **Extended Access**

  BVCSA is now delivering ‘clinical’ services as part of the Extended Access offer. Since the beginning of September, Step 2 are delivering Young People’s Counselling Services across Bradford and contributing to the NHS Mental Health Services Data Set. Mind in Bradford are also working towards delivering this level of ‘clinical’ services.

  Between July and September 2019, 115 people across Bradford have received support to address their welfare, benefits and debt needs.

- **Asset Based Community Development (ABCD) Small Grants Funding**

  A final round aimed at Bradford-wide grass roots VCS organisations has recently been launched to focus on organisations whose work does not directly link with specific geographical communities.

  Several Bradford Community Partnerships have allocated some of their funding this year to invest in additional ABCD approaches and projects within their local communities. At the time of writing, an additional £85,000 will be invested in grass roots VCS organisations to help them to address a variety of health and social care issues in their local communities. Further investment has already been pledged by some Community Partnerships for 2020-21.

- **Diabetes Management Programme**

  The Diabetes Management Programme has now concluded.

  - As a result of the Programme 162 people were supported to begin some form of Structured Education to help them better manage their Diabetes.
  - 347 hours of engagement was carried out in local communities through GP Practices, and supporting events such as World Diabetes Day and Self Care Week.
Bradford District Assembly

The Bradford District Assembly report provides a snapshot of current work and activities over the last month:

The outcome of the VCS infrastructure review consultation was presented to VCS stakeholders on 8 October. Participant’s comments and suggestions will be fed into the report prior to it being presented to elected members later this month.

- **Forums**

  The Safer Forum Event “Drugs and Alcohol misuse; impact on communities and crime.” included a personal story; addiction to recovery, and presentations from Project 6, Bridge and West Yorkshire Police.

  The Hate Crime task and finish group met to agree how they could raise community concerns to the appropriate statutory partners. We also hosted a “Healthy Happy at Home” consultation for the VCS, jointly facilitated by James Drury and CNet.

  Young Lives has supported the VCS in understanding the changed referral arrangements for children’s services including the new multi-agency referral form and continuum of need.

  The Community Economic Forum meeting included updates on the economic strategy (Mark Clayton), procurement (Ian Westlake), the Creative People and Places City of Culture bid (Mary Dowson) and Locality (Cassandra).

- **Partnership Work**

  Meetings are ongoing to plan two open space events informing the VCS about Independent Service Funds, led by Bridget Jones (Programme Lead – Integrated Personalised Commissioning) and working in partnership with the Equality Forum, Equalities Together, Age Concern, 3 CCGs and Bradford Council. The Keighley Event is at Victoria Hall on 10 December, and the Bradford Event is at Manningham Mills on 11 December.

  The Anti-poverty events group (Carers Resource, Bradford Council/People Can, Barnado’s, CAB and the Assembly Equalities Forum) have secured funding from the Stop Loan Sharks Community Fund, eight community centres have been awarded grants to host Halloween events. The aim is to create a fun space for families whilst offering advice and links to support for debt, gambling, cost cutting, etc. Also Partnership work towards the Credit Unions Build a Better World conference on 17 October at the Thornbury Centre.

- **Training**

  Two sessions of BAME youth leadership programme have been delivered to women and young people. We are hosting a settlement information session for VCS frontline staff on 28 October, facilitated by Vie Lusandu.