

**Bromley Borough Based Board
Minutes of the meeting on 13 May 2021
Held through Microsoft Live**

Present:	Name	Title and organisation	[initials]
	Dr Andrew Parson	Borough CCG GP (Co-chair)	AP
	Cllr Colin Smith	Leader of the Council, London Borough of Bromley (Co-chair)	CS
	Jodie Adkin	Associate Director - Discharge Commissioning, Urgent Care and Transfer of Care Bureau (Item 6)	JA
	Dr Angela Bhan	Bromley Borough Based Director	AB
	Kim Carey	Interim Director of Adult Services, London Borough of Bromley	KC
	Paulette Coogan	One Borough Director of Organisational Development	PC
	Sonia Colwill	Director of Quality, South East London CCG (Item 10)	SC
	Mark Cheung	One Bromley Integrated Care Programme Director	MC
	Dr Robert Grounds	GP Registrar, Kings College Hospital (Item 8)	
	Harvey Guntrip	Borough Lay Member	HG
	Dave Harris	Associate Director of Finance for South East London Clinical Commissioning Group	DH
	Fiona Leacock	Head of Quality, South East London CCG (Item 10)	FL
	Dr Gurprit Mudhar	GP Registrar, Kings College Hospital (Item 8)	GM
	Helen Norris	Healthwatch	HN
	Sean Rafferty	Joint Assistant Director of Integrated Commissioning for South East London CCG and London Borough of Bromley	SR
	Dr Ruchira Paranjape	Borough CCG GP (Vice Chair)	RP
	Ms Jess Seal	Primary and Community Care Transformation Manager	JS
	Cllr Diane Smith	Portfolio Holder for Adult Care & Health, London Borough of Bromley	DS
	Dr Mukesh Sahi	Chair of the Local Medical Committee (LMC)	MS
	Matt Hodges	Borough GP Surgery IT Project Manager	MH
	Kofo Abayomi	Borough Governance Lead	KA
	Saimah Tahir	Borough Governance Officer	ST
Apologies:			
	Janet Bailey	Director of Children and Young People, London Borough of Bromley	JB
	Nada Lemic	Director, Public Health	LM
	Ade Adetosoye	Chief Executive, London Borough of Bromley	AA

Actioned by

1.	Introductions & Apologies for Absence	
1.1	Cllr Colin Smith welcomed members and attendees to the May Bromley Borough Based Board meeting. He highlighted that South East London CCG (Bromley) and Bromley Council continued to work closely for the benefit of Bromley residents.	
1.2	Dr Parson thanked Cllr Smith and introduced members and attendees of the Committee.	
1.3	Apologies for absence were noted as recorded above.	
2.	Declarations of Interest	
2.1	Dr Parson, Co-Chair invited members to declare any interests in respect to the items on the agenda. There were no additional declarations at this meeting.	
3.	Public Questions	
3.1	Dr Parson, Co-Chair noted that no questions were received from members of the public ahead of the meeting. Additional questions were invited to be posted in the Q&A section of the live event and written responses would be provided.	
4.	Minutes of the meeting 17 November 2020 and actions	
4.1	The Committee NOTED the minutes of the meeting held on 17 November 2020 as an accurate record of the meeting.	
5.	Bromley Borough Director's Report	
5.1	The Committee received a written report which outlined borough level working. Dr Bhan presented the Bromley Borough Director's report which was taken as read. Dr Bhan highlighted that it had been six months since the last meeting of the Bromley Borough Based Board, and in this period, this report and the agenda focussed on work that had been undertaken by the borough. Key highlights of the report were noted and discussed.	
5.2	<ul style="list-style-type: none"> Dr Parson noted the success of the COVID-19 vaccination programme which emphasised the robust joint working in Bromley and this had also provided a strong platform to get a large number of the local population vaccinated. He highlighted the role of Primary Care, the Primary Care Networks (PCN) in both the response to COVID and delivering vaccinations. Dr Parson also 	

	<p>noted improvements in Learning Disabilities and Children and Young People services</p> <ul style="list-style-type: none"> • Cllr Collin Smith referred to the mental health update and highlighted that considerable work which would be required as an aftermath of the pandemic, although the impact was still not understood. Cllr Smith noted that there is a link between mental health and loneliness (which was already an area of focus for the Local Authority) • In response to Dr Sahi's enquiry about the Post COVID Syndrome Service in Community and Secondary Care, Dr Bhan explained that a Post COVID service has been established at the Princess Royal University Hospital (PRUH) and GPs were now able to refer patients. Mr Cheung added that the CCG (Bromley) had now put resources into the service. He explained that this was a new and evolving condition therefore several approaches to the service were required. Consideration was still being given on how to support primary care. Due to the condition being multi-faceted, an integrated approach is needed in treating symptoms. To robustly manage the service, One Bromley partners are working together to develop a multi-disciplinary approach in both community and secondary care. Mr Cheung also summarised the specialist secondary care available and concluded that all stakeholders and organisations would be involved in further development of the service • Mr Guntrip also commented on the impact of the pandemic from a mental health perspective. He highlighted that elderly residents who lost their partners quickly become vulnerable and this is linked to low life expectancy. He advised that services developed should take this group into consideration so that support can be provided in a timely way. Dr Bhan responded that evidence supported this, however work still needs to be done in terms of information gathering and the problems this issue presents to the surviving partner. Action: Dr Bhan agreed to consider available routes within the system to identify and support this group • Ms Norris summarised patient feedback and experience from a recent Healthwatch report in relation to the vaccination programme. She stated that there had been positive feedback about the excellent facilities in the local vaccination premises and the good support provided by the staff. The report also highlighted that patients welcomed the flexibility of accessing GP services. Dr Bhan thanked Ms Norris for the feedback and acknowledged the contributions of Ms Rehal, Ms Seal and Dr Marossy in coordinating the vaccination programme within Bromley. The CCG(Bromley) was also grateful for the use of the Civic Centre to host the mass vaccination site. Furthermore, insights from Healthwatch have been useful in developing resources in addressing inequalities in some parts of South East London 	
--	---	--

	<ul style="list-style-type: none"> Mr Guntrip noted and formally thanked all volunteers for their significant role in the COVID-19 vaccination programme. 	
5.3	The Committee NOTED the report.	
6.	Bromley Single Point of Access and Hospital Discharge	
6.1	<p>Mr Rafferty introduced the item by summarising the background to the Single Point of Access, success and benefits which included saving 1200 bed days at the PRUH. All Bromley partners played a significant role in the success of this service and all agencies involved were supported by the additional government funding.</p> <p>Mr Rafferty explained that endorsement was now required to make it a permanent arrangement. To support this, the team have reviewed arrangements required to be put in place to make this service permanent and this included financial sustainability beyond the government funding and alternative funding streams.</p> <p>All agencies have agreed to continue with the resources and commitment put into the current service. The CCG will also continue to work with and support Bromley Healthcare in the contractual arrangements. Also, the risk that the Local Authority will be financially burdened because of inappropriate discharge into the community will continue to be mitigated. As part of the governance arrangements, risks (including financial risks) would be shared and managed across all partners.</p>	
6.2	<p>In considering the report, members raised the following comments:</p> <ul style="list-style-type: none"> Dr Paranjape thanked the team for the work and noted the success of the service and its pathways. She commented that the service needed to sit alongside a wider portfolio of services particularly for elderly patients. Dr Paranjape also enquired about how the service had impacted community services and primary care. In response, Mr Rafferty explained that the success of the service was also due to the pathway management, the four pathways have also supported people into domiciliary care, care homes and rehabilitation. Each of these have required a range of agencies working together including GPs, primary care providing support as people go into homes and further supporting people's health in care homes. Additional investment by the PRUH will also provide further improvements in the pathways and community between now and the winter period Ms Norris referred to the financial impact section of the report and sought clarification on the high mortality rate among patients and queried whether this was higher during the waves of the pandemic. Mr Rafferty stated that due to the pandemic, the mortality rate in the winter was higher. He drew the attention of the committee to this to support why the SPA service needed to be 	

	<p>financially sustainable. Post-COVID, there is a need to understand discharge and financial implications of patients requiring community support therefore a robust and sustainable system is required</p> <ul style="list-style-type: none"> • Mr Guntrip advised the need for high quality end of life care. He also requested that the Committee is kept updated on plans for this area. Mr Rafferty explained that end of life care was an important part of the SPA arrangements. He noted that the work done by St Christopher's and other End of Life agencies had been pertinent in the support provided to patients. End of life remained a priority for the CCG and more work is planned in this area, with updates to be reported to the Committee • Dr Parson queried how the skills and knowledge from the current workforce would be embedded in the permanent service. He asked whether there are plans to retain part of the current workforce. Mr Rafferty confirmed that there are plans to retain and further develop some of the current staff • Cllr Colin Smith was supportive of the service but advised that the Local Authority governance process would need to be followed to receive endorsement from the Local Authority. 	
6.3	The Committee considered and agreed the recommendations.	
7.	Finance Reports	
7.1	<p><u>2020/21 Month 12 Finance Report</u></p> <p>Mr Harris presented the 2020/21 month 12 report and highlighted the following key points:</p> <ul style="list-style-type: none"> • The South East London Clinical Commissioning Group allocation totalled £3,475m and the underspend was £1m • The Bromley allocation totalled £209m and the underspend was £0.9m. The key budget underspends relating to this position were corporate budgets £0.5m and continuing healthcare services £0.7m • The Bromley expenditure relating to covid totalled £10.4m of which £5.4m related to the Hospital Discharge Programme • The borough has fully committed its £2.4m share of the CCGs budgeted COVID-19 allocation for the second half of 20/21. 	
7.2	<p><u>2021/22 H1 SEL CCG Financial Plan</u></p> <p>Mr Harris presented the report and highlighted the following key points:</p> <ul style="list-style-type: none"> • SEL CCG had finalised the draft operational plans for the first half (H1) of 2021/22 and this was submitted on 6 May 2021 • In setting its financial plans for H1, the CCG followed national planning guidance, which predominantly meant a rollover of M7-12 2020/21 budgets, plus the application of 2021/22 uplifts 	

	<ul style="list-style-type: none"> The CCG's H1 allocation is £1.9bn. While SEL CCG plans to deliver a balanced financial position, the current assessment is that savings of £6.1m will be required to deliver a break-even position The CCG savings will need to be delivered in H1 through a combination of non-recurrent savings, recurrent savings and an exercise looking at all Covid commitments for H1. The Bromley allocation is £101m in H1. 2021/22 uplifts will be added to this figure. 	
7.3	<p>The Committee discussed the report making the following points:</p> <ul style="list-style-type: none"> Dr Parson commented that there were challenging times ahead and careful management of funds would be required to deliver the savings In response to Mr Guntrip's query whether there would be a clawback of the COVID-19 spend, Mr Harris explained that there was an expectation after the pandemic but this was dependent on the duration of the pandemic or whether there is a third wave. 	
7.4	The Committee NOTED the finance reports.	
8.	Flu Vaccination Programme	
8.1	<p>Ms Seal introduced the report, highlighting that the flu programme this year was different from previous years due to the pandemic and the preparation for the COVID-19 vaccination. The approach was also collaboratively carried out by partners. This had been the most successful programme with significantly increased uptake.</p> <p>Dr Grounds described this year's vaccination programme including cohort of patients and financial incentives provided to practices to increase uptake for 2020/21. In comparing the flu vaccine uptake across all London Boroughs, Bromley was the top for the 'over 65's' group. In addition to this, in comparison to South-East London, Bromley was top for the 'under 65's at risk group. The Committee noted that practices where uptake had been low are in areas of greater social deprivation in Bromley.</p> <p>Dr Mudhar summarised areas to be progressed as part of the programme and this included vaccine hesitancy; learnings from feedback received from practices with high uptake, the use of social media to correct the myths around vaccination etc.</p>	
8.2	<p>The Committee discussed the report making the following points:</p> <ul style="list-style-type: none"> Dr Parson attributed Bromley's success to the Borough's improvement focussed approach. He then enquired whether there was collaborative working among the practices in the flu vaccination, similar to that of collaborative working to deliver COVID vaccination. Ms Seal explained that 	

	<p>there was collaborative working with practices that were co-located but not on a wider scale</p> <ul style="list-style-type: none"> • Dr Sahi noted that it had been an exceptional year due to the pandemic and felt that most practices had done well and increased uptake. He further advised that learnings from high performing practices should be shared with the less performing practices in a positive way. Dr Sahi also queried plans to increase uptake in deprived areas. Ms Seal explained that the team have always shared best practice and the team are already considering additional measures above this • There was a recommendation from Mr Guntrip and Cllr Colin Smith for infection control measures and social distancing to remain beyond the pandemic to further reduce the spread of flu infections. Dr Bhan responded that infection control measures have helped in reducing outbreaks, the lockdown also had a significant impact on flu and other winter infections. Dr Bhan highlighted that there was a challenge of maintaining or surpassing the current uptake rate. In September, the flu campaign would begin again and it would be a challenge to repeat the current arrangement in place. There was also the added challenge of delivering the COVID booster vaccination. It was anticipated that there is a tough winter/autumn ahead and there was a need to start early preparations. The CCG would follow NHS guidance on whether it is possible to give both flu and COVID booster vaccinations at the same time to reduce the pressure on primary care. An update will be provided in the next winter campaign report • Dr Paranjape acknowledged the work done by the team and the success rate achieved. She highlighted that negative media messaging in the past had negatively impacted vaccination hesitancy. She advised that going forward, the messaging needed to highlight that everyone had a responsibility and a part to play in vaccination. The Primary Care team in Bromley has done a significantly good job in the current programme however work remained to be done to build on this. 	
8.3	The Committee NOTED the report.	
9.	COVID-19 Vaccination Programme	
9.1	<p>Ms Rehal presented the report and summarised the One Bromley COVID-19 programme and the governance arrangements in place between the CCG and the Borough. In Bromley there are 2 oversight mechanisms (Bromley Covid Vaccination Taskforce and the Senior Leadership Group).</p> <p>The Committee noted that the Pfizer/BioNTech, AstraZeneca and Moderna vaccinations are available to the Bromley population. Ms Rehal</p>	

	<p>explained the conditions of use for the vaccines, recommended doses and guidance regarding cohorts of patients recommended for each vaccine. The Moderna vaccination as at the reporting period is only available at a hospital site and release of this vaccine to other sites is dependent on the national programme.</p> <p>There are six vaccination sites in Bromley led by Primary Care Networks (PCN), a mass vaccination site at the Civic Centre, hospital hubs and pharmacies detailed in the report.</p> <p>Ms Rehal summarised the eligible cohorts, workforce and uptake of the vaccination. It was noted that Bromley was now in the 2nd phase and eligibility had been extended to ages 38-30years old. Regarding uptake, Bromley had a high overall rate of vaccine uptake amongst the eligible population. The committee noted that uptake among health and care staff was lower, there are various engagement messaging in place to support this and the Borough continues to work with the SEL CCG team to increase uptake.</p> <p>The CCG (Bromley) is working with the Local Authority to address vaccine variation and to determine factors causing vaccine hesitancy. This piece of work will also include increased access to the vaccinations.</p>	
9.2	<p>The Committee discussed the report making the following points:</p> <ul style="list-style-type: none"> • Dr Bhan commented on variations in uptake and vaccine hesitancy and highlighted that the various communication resources put in place have provided insights into vaccination hesitancy. Dr Bhan summarised work to be done by both the CCG (Bromley) and the Local Authority to support the vaccination hesitancy programme. This piece of work will also take on board feedback from residents that they want to see real evidence of residents who had been vaccinated talking about their experience rather than celebrities in the media • Mr Guntrip stated that there was positive feedback from local volunteers. There was also a request for a more up to date information handbook to be developed to support the programme. Mr Guntrip advised that the CCG continue to work with volunteers who have been able to influence residents to get vaccinated. He highlighted that some of the volunteers had significantly impacted the vaccination programme and felt that the Borough should continue to use them for future programmes • Cllr Colin Smith agreed with the above point and formally thanked Mr Guntrip for his role and part played in the programme. Cllr Smith acknowledged the work done by volunteers and their commitment to help. Cllr Smith reiterated the Council's commitment to support the vaccination programme. 	

10.	South East London CCG Quality Report – Bromley Update	
10.1	<p>Ms Colwill presented the report and explained that Quality reports will be produced for each Borough Based Board and in future will be included within the SEL Assurance Report. This report included highlights from the South East London CCG Quality and Safety Sub Committee with focus on the following areas:</p> <ul style="list-style-type: none"> • Women’s experience on of maternity (at KCH) during Covid • Safer maternity care • NHS Staff Survey • Infection, Prevention and Control • CQC ratings for General Practice and Care Homes • Serious Incidents • Quality Alerts 	
10.2	<p>The Committee discussed the report making the following points:</p> <ul style="list-style-type: none"> • Ms Norris enquired whether there was any focused work or recommendations on maternity outcomes for people from Black Ethnic Minority communities. Ms Colwill responded that that there was still lack of data regarding ethnicity in maternity and this had been recognised as an issue. The next review would focus on this. • Dr Sahi enquired about the CCG’s planned Quality alert reviews and how the outcome would be communicated to Practices. He also asked when the CQRG meetings with Providers would restart and how issues raised would be fed back to practices. Ms Colwill explained that the CQRG was now stood down as this duplicated internal Committees which the CCG now attended. She also explained that feedback from the quality alerts are communicated via practice bulletins. 	
11.	<p>Any other business There was no other business discussed at this meeting.</p>	
12.	<p>Date of Next Meeting: 8 July 2021, to take place by MS Live Video Conference, 11.30am – 1.30pm</p>	