

Chief Officer Confirmation of Report Submission Cabinet Member Confirmation of Briefing

Report for: Mayor

Mayor and Cabinet

Mayor and Cabinet (Contracts)

Executive Director

Information ☐ Part 1 ☒ Part 2 ☐ Key Decision

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Date of Meeting	16 September 2020	
Title of Report	Lewisham Health & Care Partners System Recovery Plan	
Originator of Report	Tom Brown, Executive Director for Community Services Sarah Wainer, Director of System Transformation	Ext. 48107

At the time of submission for the Agenda, I confirm that the report has:

Category	Yes	No
Financial Comments from Exec Director for Resources (<i>R Mellors</i>)		
Legal Comments from the Head of Law (<i>G Nunney</i>)		
Crime & Disorder Implications		
Environmental Implications		
Equality Implications/Impact Assessment (as appropriate)		
Confirmed Adherence to Budget & Policy Framework		
Risk Assessment Comments (as appropriate)		
Reason for Urgency (as appropriate)		

Signed:

Chris Best - Cabinet Member for Health & Adult Social Care

Date: 3/9/20

Signed:

Tom Brown - Executive Director for Community Services

Date: 1/9/20

Control Record by Committee Support

Action	Date
Listed on Schedule of Business/Forward Plan (if appropriate)	
Draft Report Cleared at Agenda Planning Meeting (not delegated decisions)	7/9
Submitted Report from CO Received by Committee Support	
Scheduled Date for Call-in (if appropriate)	29/9
To be Referred to Full Council	