

COVID-19: Lewisham system recovery plan summary

25 August 2020 Lewisham Health and Care Partners





1. Context and introduction

This document sets out our plans for the next 18 months. It includes how we will:

- **protect local people** and the key workers that support them by mitigating and managing any further waves of COVID-19, learning from our experiences since March of this year.
- re-start key services and manage existing and new need for support arising from the lock down period.
- work with local communities to "build back better" and ensure everyone in Lewisham can live safely and well.

The impact of COVID-19 on Lewisham has left scars which must be acknowledged and healed. We are proud of the diversity of our borough but we know that COVID-19 has disproportionately harmed those from Black, Asian and Minority Ethnic (BAME) communities, older people, those living in the most deprived areas of the borough and in care homes. It has highlighted existing inequalities and too often made these worse.

Right now men in Crofton Park ward can expect to live for 6 years longer than those in New Cross ward, and women in Perry Vale ward can be expected to live 8.5 years more than women in New Cross ward. Cardiovascular and respiratory disease, diabetes, obesity in adults and children, smoking, and asthma are all made worse by, and in turn contribute to, inequalities in our society and the risks from COVID-19.

There have been 1340 confirmed cases of COVID-19 in Lewisham residents (to 31 August) and 293 deaths associated with COVID-19 in Lewisham (to 14 August). As well as the tragic toll of the disease, the lockdown has affected both mental health and wider determinants of health and wellbeing, including access to vital services, our local economy, and the education of our children and young people. The full extent of this impact on the population of Lewisham and the inequalities that are created or exacerbated will only begin to emerge over the coming months and years.

In Lewisham we have a strong history of working together and through our Lewisham Health & Care Partnership the response to COVID-19 has shown the value of these relationships and of the joint response of our health and care services, with our voluntary and community sector, and with the communities we serve.

Our ambition for our recovery is to create a strong, sustainable and accessible health and care system which supports people of all ages: to maintain and improve their physical and mental wellbeing, to live independently and well, and to provide access to high quality care whenever they need it. To achieve this we need to deliver care in our communities which is proactive, joined up, cost-effective, and helps to prevent ill-health and promote wellbeing. And we need to tackle the wider causes of inequality.

2. Delivering together

Lewisham Health and Care Partners (LHCP) includes:

- Lewisham & Greenwich NHS Trust (LGT)
- London Borough of Lewisham (LBL)
- NHS South East London Clinical Commissioning Group (CCG)
- One Health Lewisham (Pan-Lewisham GP Federation)
- Primary Care Network Leads & Lewisham's Local Medical Committee
- South London and Maudsley NHS Foundation Trust (SLaM)

Discussions are taking place to secure strategic input from the voluntary and community sector given the important role of the VCSE in maintaining and improving health and wellbeing.

Alongside Lewisham's integrated health and care commissioning arrangements, the borough has two alliance leadership groups for Care at Home and Mental Health.

- The Care at Home Alliance Leadership Group brings together local health and care organisations to work together to establish proactive, accessible and coordinated community based care in order to achieve better health and wellbeing outcomes for adults.
- The Mental Health Alliance Leadership Group seeks to provide working age adults with a personalised approach to their treatment, care and support needs, based on the identification of assets and strengths, and facilitating the achievement of personal goals. The group's remit is being expanded to include Children's Mental Health and Older Adult Mental Health.

Our LHCP Executive Board provides shared leadership, helping to set strategic direction and oversee the changes required for better health and care across Lewisham. The Council and CCG are seeking to further strengthen shared commissioning arrangements for health and care services as part of ensuring our work is integrated around local people, communities, and our borough as a whole.



Our recovery plan reflects a number of key priorities for 2020-21.

Alongside our work on preventing and managing any future outbreaks of Covid-19, protecting and empowering our most vulnerable residents and building on learning since March, we will continue to work together to join-up community based care at a neighbourhood level, including in areas such as prevention, early intervention, care at home and end of life care.

Informed by local experiences, we will develop the links between our neighbourhoods and our hospitals, helping to keep people living safely, independent and well, and to regain their independence after a hospital stay.

These plans sit within the context of and support broader Lewisham Council recovery planning, including restoring essential social care and wider council services, and the linked priorities of promoting community development and resilience; a local economic recovery that is inclusive and sustainable; tackling widening social, economic and health inequalities; supporting cultural recovery, including the Borough of Culture 2022; delivering a Green recovery, with decisive action on the climate emergency; and one that creates educational opportunities and promotes the achievements of all our young people.

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3. Our Recovery Plan – a summary of our key priorities

COVID-19 has highlighted the importance of working together to accelerate our existing efforts to tackle inequalities and improve health and wellbeing in Lewisham, whilst also responding to the learning since March 2020. All of this we will need to do whilst continuing to safeguard local people and staff against any future wave of infection. The following table sets out our key priorities for recovery and for engaging with local communities over the next 18 months.

Addressing Inequalities

addressing inequalities and disparities in risks and outcomes, including a specific focus on our BAME communities and staff.

Care Homes

supporting care homes locally including coordinated support and safeguarding of all residents and staff

Prevention

restarting services reduced or put on hold during lockdown with a focus on addressing inequalities

Planned Care

including proactive immunisations, cancer screening, Long Term Conditions support and management, postnatal and health checks

Building Community Resilience

recognising individual strength, knowledge and skills to ensure people have more control and a greater voice

Children, Young People & Families

catch-up immunisations,

screening and weight management, mental health support and support to schools
Implementation of the i-Thrive model across early help and emotional health services to develop a common language and enable

better access to services.

creating improved family

resilience

Frailty

understanding and mapping mild, moderate and severe frailty, links to other conditions, and how best to provide more responsive care

Diabetes

including patients with undiagnosed diabetes, at risk of developing diabetes and with gestational diabetes

Respiratory

integrated respiratory community hubs, review of Lung Education Exercise Programme (LEEP), and implementation of multidisciplinary working for respiratory patients

Mental Health

Front Door & Rapid Crisis Response, Community Support, Rehabilitation & Complex Care, including addressing inequalities and improving outcomes for BAME communities

Safeguarding our communities and those who support them

mitigating and managing the risks of a "second surge" of Covid-19 in Lewisham, including Test and Trace, Shielding, "Covid-19 Secure" services

4. Addressing inequalities

We recognise that plans are only as good as the engagement that sits around them and the practical steps we take next.

- As part of our response planning we have considered the recent Public Health England review of disparities in risks and outcomes for COVID-19. The analysis has looked into effects of age, sex, deprivation, region and ethnicity, but it does not take into account the existence of comorbidities, which are strongly associated with the risk of death from COVID-19 and are likely to explain some of the differences.
- Continuing to improve the management of long-term conditions in Lewisham is a key priority for our partnership, as (working with VCSE colleagues) is addressing the broader socio-economic determinants of health and wellbeing. These include inequalities exacerbated by the effects of the COVID-19 outbreak.
- Birmingham City Council and Lewisham Council are launching ground-breaking work into the health inequalities of African & Caribbean communities. The programme, which will conclude in December 2021, consists of a series of reviews which aim to explore indepth the inequalities experienced by these ethnic groups and their drivers. The review topics include: children and young people, mental health and wellbeing and chronic health, amongst others. The aim is to find approaches to break the decades of inequality in sustainable ways that will lead to better futures for local citizens.
- In March 2020, the Health and Wellbeing Board agreed to the development of a new strategy for the period 2021-26. In developing a new strategy, Lewisham will consider the wider contributory factors to health and wellbeing such as housing, education and employment. It will also seek to encourage individuals to take greater control and responsibility for their own health and care and reflect the need to address health inequalities, particularly in Black, Asian and Minority Ethnic (BAME) groups.

A full communications and engagement plan is being developed with partners to support the borough's recovery plans.

This includes:

- Reflecting on what we know from previous engagement work.
- Understanding further what we have learned from people's experiences of receiving care during the pandemic and the impact this has had on them.
- Identifying and addressing gaps in our knowledge and understanding.
- Considering how this will shape our recovery planning and delivery going forward.
- Working collaboratively across our partnership in a coordinated way for the good of all of our residents.

Given the disproportionate effect that COVID-19 has had on older people and those from the BAME community – alongside the disproportionate impact on men, lower paid workers, people with long term conditions, people with learning disability and/or autism and people with mental health needs – we will engage proactively and work with people from these communities and groups to understand the impact across our borough.

This information will inform how recovery planning can address these issues, as well as supporting how people can help shape our plans. It will build on pre-pandemic work to address health inequalities including the 2018 BAME Mental Health Summit and the BAME mental health insight co-production work which followed.

5. Safeguarding our communities and those who support them

A cross-sector COVID-19 Health Protection Board has been established to oversee our Local Outbreak Control Plan.

In Lewisham our partnership response to COVID-19 was swift with emergency structures put in place quickly, supported by coordinated communications across partners and with the local population.

In planning to mitigate and manage any second wave, we will explicitly build on the accomplishments and the lessons of the first, including:

- Continue with robust infection control practices including supporting secondary school reopening in September.
- Target services to those most in need quickly using population health data. This information continues to be built on and refined.
- Continue with collaboration between health and care providers to ensure that those most in need receive relevant care and support.
- Enable access to key services through use of digital for consultations and patient support and providing safe face-toface services supported by PPE, training and effective use of sites.
- Consultant Connect provides access for GPs to specialist input reducing the need for patients to be seen at the hospital.
- Support for staff to work remotely where possible. Laptops and telephone solutions are in place and continue to be supported.
- Extra critical care capacity available as required to support any second wave and winter plans.
- The 2nd COVID Centre which was set up for the first wave of COVID to be reinstated if needed.
- The infrastructure to support shielded people will be maintained to allow the service to restart in the event of a second peak. A shadow team of volunteers are "on call" for swift redeployment.
- Ensure effective mental health services are available including co-producing support on offer with local BAME groups.

Key aspects of Lewisham's response to Covid-19 to-date include:

Harnessing local knowledge and data: Lewisham population health data system was used to identify vulnerable people quickly and offer support via the shielding team and Lewisham Local.

Improving capacity in our hospitals: Working jointly to support people leaving hospital and improve A&E performance.

Supporting people at home: Ensuring Home care providers were able to flex care provision easily. Home-based swab tests and self-monitoring to avoid potentially risky contact during lockdown.

Volunteering: Over 2,000 people mobilised to support the most vulnerable in our community with practical and emotional support.

New technologies: Laptops were issued to GPs and other staff to enable remote working with a further 1,000 from DfE provided to children & young people.

Testing: Staff testing co-ordinated jointly by the Council and CCG, including key workers in primary care, pharmacies and care homes.

COVID Centres: 2 COVID Centres rapidly established in the north and south of Lewisham, to manage patients with suspected COVID.

Personal Protective Equipment: Distribution of PPE locally to GPs, council staff, Care Homes and Domiciliary Care agencies.

Infection Prevention & Control: providing advice and support to care homes, mental health settings and supported housing providers as well as schools and early years.

Mental Health: Triage in Emergency Department extended 24 / 7.

Service changes and additional support: delivery of food parcels to shielded and vulnerable families and provision of safe temporary accommodation.

6. Enabling local priorities



Improving capacity and managing future demand

We are working with partners across South East London to model demand and capacity in order to help support the recovery of routine services and ensure we are able to manage any potential second wave.



Workforce

Our priorities are valuing and investing in our people and working collaboratively to improve working lives, workloads and wellbeing. This includes supporting staff physical and mental health and wellbeing, clear risk assessments and support for BAME staff, and building multi-disciplinary teams to enable integrated working including the development of broader workforce and volunteering models.



Digital

We will build on progress during Covid-19 in using digital technologies to improve access and health outcomes, including in our ability to securely share information and data and match services to needs, whilst ensuring that we continue to provide an inclusive set of services which support our overall goal of tackling inequality and do not create new barriers to accessing care.



Care Homes sector support

The vulnerability of the local care homes market especially in light of the impact of COVID-19 remains a major concern, voluntary closures are likely. Lewisham will work proactively to support vulnerable care homes and ensure the safety of residents.



Estates

We aim to utilise existing estates more intensively to support a wide range of community-based health and care services, as well as providing flexible and adaptable spaces to support health and wellbeing. We are committed to releasing inappropriate estate where possible, withdrawing from property which is at the end of its useful life, and from leasehold property where public freehold estate is available, to maximise available funding to the frontline.



Finance

While the overall implications of the funding regime for 2020/21 are unclear at this point, it is clear that we face a very challenging financial position across both the health and care sector. We continue to be committed to pooling and delegating budgets to support better integrated, person-centred care but will need to be realistic around the resources required to support delivery of this plan, and the increased costs of sustaining and restoring key services due to Covid-19.