

Overview and Scrutiny



Healthier Communities Select Committee Agenda

Wednesday, 6 September 2023

7.00 pm, Civic Suite

Civic Suite

Lewisham Town Hall

London SE6 4RU

For more information contact: Nidhi Patil (nidhi.patil@lewisham.gov.uk)

This meeting is an open meeting and all items on the agenda may be audio recorded and/or filmed.

Part 1

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The public are welcome to attend committee meetings. However, occasionally, committees may have to consider some business in private. Copies of reports can be made available in additional formats on request..

Healthier Communities Select Committee Members

Members of the committee, listed below, are summoned to attend the meeting to be held on Wednesday, 6 September 2023.

Jeremy Chambers, Monitoring Officer
Tuesday, 29 August 2023

<p>Members</p> <p>Councillor Chris Best (Chair)</p> <p>Councillor Aliya Sheikh (Vice-Chair)</p> <p>Councillor Peter Bernards</p> <p>Councillor Laura Cunningham</p> <p>Councillor Stephen Hayes</p> <p>Councillor John Muldoon</p> <p>Councillor Carol Webley-Brown</p> <p>Councillor Rudi Schmidt (ex-Officio)</p> <p>Councillor Ese Erheriene (ex-Officio)</p>	
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MINUTES OF THE HEALTHIER COMMUNITIES SELECT COMMITTEE

Tuesday, 20 June 2023 at 7.00pm

IN ATTENDANCE: Councillors Chris Best (Chair), Aliya Sheikh (Vice-Chair), Peter Bernards, Laura Cunningham, Stephen Hayes, John Muldoon and Carol Webley-Brown

ALSO JOINING THE MEETING VIRTUALLY: Nigel Bowness (Healthwatch Lewisham), Councillor Rudi Schmidt

ALSO PRESENT: Tom Brown (Executive Director for Community Services), Tristan Brice (Associate Director, Integrated Commissioning Team) and Nidhi Patil (Scrutiny Manager)

ALSO PRESENT VIRTUALLY: Councillor Paul Bell (Cabinet Member for Health and Adult Social Care), Councillor Andre Bourne (Cabinet Member for Culture, Leisure and Communication), James Lee (Director of Communities, Partnerships and Leisure), Neville Graham (Sport and Leisure Service Manager), Charles Malcolm-Smith (People and Provider Development Lead, SEL ICS), Ashley O'Shaughnessy (Associate Director of Primary Care for Lewisham, SEL ICS), Simon Parton (GP in Lewisham), Taj Singhrao (GP in Lewisham), Kenneth Gregory (Director of Adults Integrated Commissioning), Natalie Sutherland (Assistant Director of Adults Integrated Commissioning) and Catherine Mbema (Director of Public Health).

NB: Those Councillors listed as joining virtually were not in attendance for the purposes of the meeting being quorate, any decisions taken or to satisfy the requirements of s85 Local Government Act 1972.

RESOLVED: that Cllr Chris Best be elected as Chair of the Committee and Cllr Aliya Sheikh be elected as Vice-Chair.

1. Minutes of the meeting held on 28 February 2023

1.1. RESOLVED: that the minutes of the last meeting be agreed as a true record.

1.2. A member of the Committee mentioned that under point 4.14 of the minutes, it was recorded that the tennis courts in Hilly Fields could be booked for £5 per hour and that they would like to inform Members that there was also an option to get an annual subscription for £35 per year. As part of this subscription, one could play 3 times a week for an hour.

2. Declarations of interest

2.1. Councillor Cunningham declared an interest as a council representative on the Trinity Laban Board.

2.2. Councillor Hayes declared an interest as a council representative on the Albany Centre in Deptford.

The Chair informed the committee that the items on the agenda would be considered in the following order- Physical Activity Strategy, Healthcare and Wellbeing Charter and then Dementia Strategy.

3. Physical Activity Strategy

James Lee (Director of Communities, Partnerships and Leisure) and Neville Graham (Sport and Leisure Service Manager) introduced the report. The following key points were noted:

- 3.1. In pre-Covid times, a public consultation was undertaken to inform this strategy which involved interacting with over 2000 people. After Covid hit, the sports and leisure team had to rebuild its services.
- 3.2. In conversations with Sports England, officers had prepared this strategy that referred to Sports England's strategic approach so that the Council could lean on them for future capital funding. The strategy also set out the Council's clear vision and priorities for creating a whole systems approach to physical activity.
- 3.3. Along with the strategy, the independent assessment of Lewisham's indoor built sports facilities was also going to Mayor and Cabinet for approval. This assessment formed the basis of the work that the Council was undertaking at Bridge and Bellingham sites to try to re-provide swimming water and for increasing sports hall provision in the south of the borough.
- 3.4. The strategy would have an embedded link to its action plan which would be available on the website and be updated regularly

The Committee members were invited to ask questions. The following key points were noted:

- 3.5. The Committee noted that the action plan for this strategy was circulated late which hindered the committee's ability to comment on it. Therefore, the Committee's comments on the action plan would be circulated by email after the meeting.
- 3.6. Lewisham used to be the 3rd most active borough in London but had slipped down to 9. A member of the committee enquired whether an analysis had been done to understand why this downward shift had occurred. Although it was difficult to provide a concrete reason for this downward trend without running a full consultation, officers suspected that the Covid-19 pandemic influenced this decrease in physical activity.
- 3.7. A member of the Committee enquired whether an equalities impact assessment of the strategy had been undertaken to understand its impact on diverse communities. Nigel Bowness, the Healthwatch Lewisham representative on the Committee also commented that the equalities implications listed in the report were not comprehensive and just listed the duties. Officers informed the Committee that a full Equalities Impact Assessment had been undertaken and was currently being finalised. This assessment would list the impact of the strategy on all groups of people along with the steps being taken for mitigation of any negative impact.
- 3.8. A committee member highlighted that the way certain activities were being delivered sometimes hindered participation from diverse communities. For example, swimming pools at Glass Mill Leisure Centre had large glass windows allowing outsiders to see inside and discouraging some communities from attending.
- 3.9. In response to the need for more pool space in Lewisham, a committee member suggested exploring the possibility of having pools with higher temperatures for therapeutic purposes, and officers revealed ongoing discussions with Greenvale School and Watergate School to enhance access to their hydrotherapy pools outside of school hours.
- 3.10. A committee member proposed incorporating examples into the strategy, such as showcasing various activities in parks like park runs, Saturday football clubs, tennis

walking clubs, outdoor gyms, cricket, baby gyms, community gardening, bowls etc. However, officers informed the committee that this document served as a strategic framework rather than a platform for specific examples, citing advice received from Sports England.

- 3.11. Officers informed the Committee that they needed to conduct a mapping exercise to understand the various activities in the borough and to ensure that they endorsed it to the right people. Officers were engaging with London Sport to utilise their activity finder platform, where providers could promote their activities for free. Committee members were encouraged to inform officers of any activity providers they knew of.
- 3.12. The sports team and the parks team had been brought together under one head of service as the importance of parks in promoting physical activity was recognised. Through joint working, these teams had successfully redeveloped the basketball courts in Evelyn Green. Officers acknowledged the importance of addressing the basketball courts at Hilly Fields and were actively exploring costing and funding options to facilitate their improvement.
- 3.13. The importance of ensuring the inclusion of every group's voice in the stakeholder forum was discussed by the Committee.
- 3.14. A member of the committee suggested that working with local sports icons was an engaging way of promoting physical activity. Officers agreed with this suggestion, expressing their preference for partnering not only with local sports icons but also with regular individuals who actively advocate for sports.
- 3.15. During the discussion, the use of terminology was highlighted, as individuals perceived sports, exercise and physical activity differently, and some found these terms intimidating. Officers acknowledged the importance of using the correct terminology in the strategy.
- 3.16. Given the small size of the sports and leisure team, the Committee enquired about how they would manage the implementation of the strategy and coordinate efforts across different Council directorates.
- 3.17. A Committee member raised the question about having more female gyms, and officers informed the Committee that the Council typically acts as a facilitator and enabler rather than a direct provider of such services.
- 3.18. A member of the Committee enquired about the impact of physical activity on the QRISK factor. The QRISK score was a system that was used to identify those patients who were at risk of coronary disease within the next 10 years.
- 3.19. The Committee was pleased to see dance being mentioned in the strategy as physical activity and a Committee member asked if a reference to Good Gyms may be added to the strategy.
- 3.20. Nigel Bowness welcomed the inclusive aspect of the strategy and suggested that it would be beneficial to include an analysis of the barriers to inclusion for different groups of people regarding physical activity.
- 3.21. The Chair of the Committee had the following specific comments regarding the content of the strategy:
 - The Chair stated that it would be beneficial to see some Lewisham-specific examples in the strategy. For example, on Page 3, extra text could be added that showcased the different activities that were already on offer in Lewisham.
 - The Chair suggested that some areas of the strategy needed to use more simple and plain language as the target audience for this document was the residents.

- On Page 9 of the strategy, there was a mention of non-traditional spaces. The Chair asked if it could be spelt out what was meant by these spaces and if some examples could be given.
- On Page 15, there was an example of the Healthy Walks programme which was around 20 years old. The Chair asked whether some recent examples could be provided.
- The Chair enquired whether the strategy's action plan was going to be appended to the strategy when it went to Mayor and Cabinet.

3.22. Officers responded that following the Chair's suggestion, they would revisit some of the language used in the strategy and attempt to simplify it.

3.23. It was proposed that Page 19 of the strategy be revised to specify that the action plan was included with the strategy, along with outlining the methods for tracking progress in the implementing the strategy.

RESOLVED: That

- the report be noted along with the comments made by the Committee and that the comments be reflected in the final strategy report that goes to Mayor and Cabinet.

4. Dementia Strategy

Tristan Brice (Associate Director, Integrated Commissioning Team) and Tom Brown (Executive Director for Community Services) presented this item to the Committee. The following key points were noted:

4.1. An eight-week consultation was undertaken to inform the Dementia Strategy and received over a 1000 response. Over 850 of those responses were gathered from door-knocking and in-person engagement exercises rather than electronically.

4.2. The consultation revealed that residents wanted the Council to:

- identify and articulate what the targets were for each of the eight outcomes in the strategy over the next 3 years;
- use Healthwatch and other partner organisations to articulate to residents each quarter, how well the Council was doing against a target set within the strategy;
- arrange a series of consultations and workshops building upon the knowledge gained from the strategy's development and addressing its outcomes;
- develop short videos for each of the outcomes, showcasing the progress made through the 'you said, we did' approach.

4.3. In Lewisham, 0.4% of all residents were affected by dementia. Considering the intergenerational composition of households in Lewisham, officers were keen to ensure that the dementia strategy encompassed all age groups, recognising that this condition can impact anyone.

4.4. Officers noted that the Physical Activity Strategy presented to the Committee earlier in this meeting, did not mention how physical activity could reduce the risk of dementia.

The Committee members were invited to ask questions. The following key points were noted:

4.5. The Dementia Strategy was very well received by the Committee, who applauded its simplicity and use of plain language. The Committee was happy that the strategy acknowledged the impact of dementia on friends and families.

- 4.6. During the discussion, the importance of maintaining a balance between individuals' choice to live in their own homes and ensuring they are not left isolated without community support was emphasised.
- 4.7. One of the Committee members highlighted the need to acknowledge the connection between hearing loss and dementia.
- 4.8. It was discussed that this was not a clinical strategy but rather a strategy for how the Council can support residents with dementia and their families to live as well as possible. However, officers were aware of the academic research in the field. Certain components of the strategy such as the built environment and use of transport were influenced by the model of care and support for dementia in Netherlands.
- 4.9. A Committee member enquired whether there were any equalities issues when it came to being diagnosed with dementia i.e., did people from certain communities struggle to get diagnosed.
- 4.10. In care facilities, there were usually planned interactive sessions for residents. However, it was observed that care packages for patients staying at home often lacked opportunities for meaningful engagement and interaction with others. A member of the Committee emphasised the importance of incorporating interactive sessions with other patients into the care packages.
- 4.11. One crucial aspect addressed by the strategy was the concept of 'dying well'. This component underscored the significance of engaging in challenging conversations with individuals living with dementia and planning ahead to understand their wishes. It was noted that while discussing and planning for this aspect was difficult, it held tremendous importance in ensuring a dignified and satisfactory end-of-life experience.
- 4.12. The 'Maximising Wellbeing at Home' service was scheduled to go live on the 1st of September 2023 and the 'Maximising Wellbeing for Unpaid Carers' service was scheduled to go live in July 2023. Both of these services focused on improving the wellbeing of the client and the unpaid carer. As part of this service, both clients and the carers would be supported by solution focused wellbeing coaches. 300 hours per week of coaching would be available to around 1600 wellbeing workers.
- 4.13. Officers asked the Committee to be the champions of the Dementia Friends programme.
- 4.14. The Committee discussed that they may consider a visit to the Ladywell centre to explore the opportunities that the centre presented if it were to be redeveloped.
- 4.15. The Committee Chair suggested that officers engage in a conversation with their colleagues to explore the possibility of their inclusion in the stakeholder forum mentioned in the Physical Activity Strategy.

RESOLVED: That

- that the content and key outcomes of the Dementia Strategy be noted;
- the Committee champion the Dementia Friends programme, starting by incorporating it as a component of member training and development.

5. Healthcare and Wellbeing Charter

Charles Malcolm-Smith (People and Provider Development Lead, SEL ICS) and Ashley O'Shaughnessy (Associate Director of Primary Care for Lewisham, SEL ICS) presented this item to the Committee. The following key points were noted:

- 5.1. As agreed at the last meeting of the committee, a framework for the proposed Charter was presented to the Lewisham Health and Care Partners' (LHCP) Peoples Partnership Group (PPG) in May 2023 and a follow-up discussion had been scheduled for its July 2023 meeting.
- 5.2. In the May 2023 meeting of the PPG, it was discussed that for the proposed Charter to serve its purpose, there must be clarity on the accountability and the power that members of the population would have if its terms were not being upheld.
- 5.3. Important elements that were to be included in the Charter included- dignity, respect and culturally appropriate interactions, individualised and co-produced services and increased scope for self-referral to services.
- 5.4. The Primary Care Delivery Plan had just been signed off with the Local Care Partnership. Officers stated that they would be happy to share the full plan with the Committee as the presentation just included a summary of the plan.
- 5.5. The National Delivery Plan for recovering access to primary care had also recently been published and it outlined the national strategy and approach to providing support around improved patient experience.
- 5.6. The National Delivery Plan had four main areas of focus- empower patients; implement new Modern General Practice Access approach; build capacity and cut bureaucracy.
- 5.7. It was discussed that one approach to empowering patients was through increasing the use of digital technology such as improving the functionality of the NHS app. However, officers also recognised that digital inclusion was an important factor to consider, and work was already being done to address this. The Primary Care Digital Inclusion Plan was included in the papers submitted to the Committee and included some information on the different initiatives that had been taken to promote digital inclusion.

The Committee members were invited to ask questions. The following key points were noted:

- 5.8. A member of the Committee wanted to express gratitude for the work done by the doctors and nurses in NHS and wanted to assure them that members were aware of the pressures on the service.
- 5.9. Members of the Committee agreed that digital inclusion was an important issue and expressed concerns around the rapid pace of digitalisation, which seemed to disproportionately exclude certain groups of people, particularly older residents.
- 5.10. A GP from Lewisham, Simon Parton, reassured members that although importance had been given to digital communication as a way of empowering residents, that wasn't the only way of communication being used. Residents could still contact GPs through telephone, walk-ins, emails, referrals, contact through healthcare partners and so on. In theory, making a digital route available enhanced telephonic capacity, as individuals capable of utilising digital platforms would opt to contact their GP through those means. Consequently, this would result in reduced waiting time for callers as less people would be calling in.
- 5.11. It was discussed that the recruitment and retention of staff remained a significant challenge across NHS. However, a lot of work had been done to attract more nurse trainees to the borough.
- 5.12. A GP from Lewisham, Taj Singhrao, informed the Committee that there was a wider plan to expand the community pharmacy work, with the goal of conducting a greater portion of chronic disease monitoring through these pharmacies. This would take some pressure off the general practice and improve the chronic disease monitoring in Lewisham. However, there were capacity issues in pharmacies as

well, so this work needed to ensure that any one part of the primary care system was not being overloaded.

5.13. Officers mentioned that intensive training on cultural competency had been delivered to the staff a few years ago and acknowledged the need to re-evaluate and potentially revisit that training.

5.14. It was discussed that the People's Partnership Group was an important forum for the development of the Healthcare and Wellbeing Charter. Nigel Bowness further expressed Healthwatch Lewisham's desire for increased direct public engagement in shaping the Charter.

5.15. The Chair of the Committee enquired when the Committee would be able to see the draft Charter and it was discussed that September 2023 was an achievable deadline. The Healthcare and Wellbeing Charter as well as the Health and Wellbeing Strategy were due to go to the Health and Wellbeing Board in September 2023 as well.

RESOLVED: That

- the update on the development of the Healthcare and Wellbeing Charter be noted;
- the update on primary care access improvement and digital inclusion plan be noted;
- the draft Healthcare and Wellbeing Charter be presented to the Committee at its next meeting on the 6th of September 2023.

6. **Select Committee Work Programme**

RESOLVED:

- That the Committee's work programme for 2023-24 be agreed.

The meeting ended at 9.10pm.

Chair:

Date:

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Healthier Communities Select Committee

Declarations of Interest

Key decision: No

Class: Part 1

Ward(s) affected: All

Contributors: Jeremy Chambers (Director of Law and Corporate Governance)

Outline and recommendations

Members are asked to declare any personal interest they have in any item on the agenda.

1. Summary

1.1. Members must declare any personal interest they have in any item on the agenda. There are three types of personal interest referred to in the Council's Member Code of Conduct:

- (1) Disclosable pecuniary interests
- (2) Other registerable interests
- (3) Non-registerable interests.

1.2. Further information on these is provided in the body of this report.

2. Recommendation

2.1. Members are asked to declare any personal interest they have in any item on the agenda.

3. Disclosable pecuniary interests

3.1 These are defined by regulation as:

- (a) Employment, trade, profession or vocation of a relevant person* for profit or gain
- (b) Sponsorship –payment or provision of any other financial benefit (other than by the Council) within the 12 months prior to giving notice for inclusion in the register in

respect of expenses incurred by you in carrying out duties as a member or towards your election expenses (including payment or financial benefit from a Trade Union).

- (c) Undischarged contracts between a relevant person* (or a firm in which they are a partner or a body corporate in which they are a director, or in the securities of which they have a beneficial interest) and the Council for goods, services or works.
- (d) Beneficial interests in land in the borough.
- (e) Licence to occupy land in the borough for one month or more.
- (f) Corporate tenancies – any tenancy, where to the member’s knowledge, the Council is landlord and the tenant is a firm in which the relevant person* is a partner, a body corporate in which they are a director, or in the securities of which they have a beneficial interest.
- (g) Beneficial interest in securities of a body where:
 - (a) that body to the member’s knowledge has a place of business or land in the borough; and
 - (b) either:
 - (i) the total nominal value of the securities exceeds £25,000 or 1/100 of the total issued share capital of that body; or
 - (ii) if the share capital of that body is of more than one class, the total nominal value of the shares of any one class in which the relevant person* has a beneficial interest exceeds 1/100 of the total issued share capital of that class.

*A relevant person is the member, their spouse or civil partner, or a person with whom they live as spouse or civil partner.

4. Other registerable interests

4.1 The Lewisham Member Code of Conduct requires members also to register the following interests:

- (a) Membership or position of control or management in a body to which you were appointed or nominated by the Council
- (b) Any body exercising functions of a public nature or directed to charitable purposes, or whose principal purposes include the influence of public opinion or policy, including any political party
- (c) Any person from whom you have received a gift or hospitality with an estimated value of at least £25.

5. Non registerable interests

5.1. Occasions may arise when a matter under consideration would or would be likely to affect the wellbeing of a member, their family, friend or close associate more than it would affect the wellbeing of those in the local area generally, but which is not required to be registered in the Register of Members’ Interests (for example a matter concerning the closure of a school at which a Member’s child attends).

6. Declaration and impact of interest on members' participation

- 6.1. Where a member has any registerable interest in a matter and they are present at a meeting at which that matter is to be discussed, they must declare the nature of the interest at the earliest opportunity and in any event before the matter is considered. The declaration will be recorded in the minutes of the meeting. If the matter is a disclosable pecuniary interest the member must take not part in consideration of the matter and withdraw from the room before it is considered. They must not seek improperly to influence the decision in any way. **Failure to declare such an interest which has not already been entered in the Register of Members' Interests, or participation where such an interest exists, is liable to prosecution and on conviction carries a fine of up to £5000**
- 6.2. Where a member has a registerable interest which falls short of a disclosable pecuniary interest they must still declare the nature of the interest to the meeting at the earliest opportunity and in any event before the matter is considered, but they may stay in the room, participate in consideration of the matter and vote on it unless paragraph 6.3 below applies.
- 6.3. Where a member has a registerable interest which falls short of a disclosable pecuniary interest, the member must consider whether a reasonable member of the public in possession of the facts would think that their interest is so significant that it would be likely to impair the member's judgement of the public interest. If so, the member must withdraw and take no part in consideration of the matter nor seek to influence the outcome improperly.
- 6.4. If a non-registerable interest arises which affects the wellbeing of a member, their, family, friend or close associate more than it would affect those in the local area generally, then the provisions relating to the declarations of interest and withdrawal apply as if it were a registerable interest.
- 6.5. Decisions relating to declarations of interests are for the member's personal judgement, though in cases of doubt they may wish to seek the advice of the Monitoring Officer.

7. Sensitive information

- 7.1. There are special provisions relating to sensitive interests. These are interests the disclosure of which would be likely to expose the member to risk of violence or intimidation where the Monitoring Officer has agreed that such interest need not be registered. Members with such an interest are referred to the Code and advised to seek advice from the Monitoring Officer in advance.

8. Exempt categories

- 8.1. There are exemptions to these provisions allowing members to participate in decisions notwithstanding interests that would otherwise prevent them doing so. These include:-
- (a) Housing – holding a tenancy or lease with the Council unless the matter relates to your particular tenancy or lease; (subject to arrears exception)
 - (b) School meals, school transport and travelling expenses; if you are a parent or guardian of a child in full time education, or a school governor unless the matter relates particularly to the school your child attends or of which you are a governor
 - (c) Statutory sick pay; if you are in receipt
 - (d) Allowances, payment or indemnity for members
 - (e) Ceremonial honours for members

(f) Setting Council Tax or precept (subject to arrears exception).

9. Report author and contact

9.1. Jeremy Chambers, Director of Law and Corporate Governance
Jeremy.Chambers@lewisham.gov.uk, 020 83147648



Healthier Communities Select Committee

Lewisham Health and Care Partners (LHCP) - Local Care Plan 2023 - 2028

Date: 6 September 2023

Key decision: No

Class: Part 1

Ward(s) affected: Borough-wide

Contributors: Sarah Wainer, Director of System Transformation, Lewisham Health and Care Partnership

Outline and recommendations

Lewisham's Local Care Plan 2023 – 2028 sets out the key priorities and programme activity on which Lewisham Health and Care Partners will focus over the next five years. The plan sets out the priority actions for the first two years of the plan and the intended outcomes once the plan has been fully implemented. This report provides information on the plan's high-level objectives and provides an update on activity to date.

Members of the Committee are asked to note and comment on the contents of the report.

Timeline of engagement and decision-making

Lewisham Health and Care Partners held a workshop session in October 2022 to produce shared priorities to drive forward their work as a partnership. The agreed priorities have shaped the objectives and activity within the Local Care Plan.

The Local Care Plan (LCP) priorities were considered by Lewisham Health and Care Partners People's Partnership on 11 May 2023. Lewisham Healthwatch, VCSE and community organisations and service users attended.

The LCP Delivery plan was formally approved by the Lewisham Health and Care Partners Strategic Board on 18 May 2023 and shared with the Health and Wellbeing Board on 15th June 2023.

1. Summary

- 1.1. Lewisham's Health and Care Partnership (LHCP) brings together representatives from local organisations and groups who are committed to work together to help the people of Lewisham live happier and healthier lives.
- 1.2. In October 2022, partners discussed the priority areas on which they wanted to work together to achieve a substantial improvement in health and care outcomes and to address existing inequalities.

- 1.3. These priority areas formed the basis of the Local Care Plan (LCP). The LCP sets out the planned partnership activity under each local priority area and the intended outcomes once the plan has been fully implemented. The activity to deliver against these priority areas builds on existing partnership activity, including that on Mental Health, Urgent and Emergency Care, Long Term Conditions, Adult Social Care and Children's Services.
- 1.4. Lewisham's Local Care Plan forms part of the South East London Integrated Care Board's Joint Forward Plan and the full version of Lewisham's plan can be viewed at [Joint Forward Plan - Lewisham \(selondonics.org\)](http://selondonics.org). Details on the high-level objectives and priority actions are set out below.

2. Recommendations

- 2.1. Members of the Committee are asked to note and comment on the contents of the report.

3. The Local Care Plan and aligned programmes

- 3.1. Following the partners' initial workshop, further work with stakeholders took place. Subsequently the following high level priority objectives and actions were agreed:

<i>High Level Objective</i>	<i>Priority Actions</i>
To strengthen the integration of primary and community care	The model, infrastructure and approach required to deliver effective integrated working at a neighborhood level will be established. Through this approach local models of care will be established for at least two long term conditions and to support older people. The provision of early intervention and community support for mental health will also be expanded.
To build stronger, healthier families and provide families with integrated, high quality, whole family support services.	An integrated model for family hubs across Lewisham will be established and the integrated pathways which can be delivered through family hubs will be identified.
To address inequalities throughout Lewisham's health and care system and tackle the impact of disadvantage and discrimination on health and care outcomes.	An agreed infrastructure will be implemented through which initiatives to address health inequalities and achieve health equity in the borough can be delivered.
To maximise our roles as Anchor Organisations, be compassionate employers and build a happier, healthier workforce	Opportunities for joint apprenticeship programmes will be identified. Joint initiatives will be implemented to promote health and care careers and develop tools and approaches to inform workforce planning and address workforce.
To achieve financial sustainability across the system	The LHCP will work to optimise the use of resources, align financial planning and maximise financial resilience to system

Empowering Lewisham and Home First

- 3.2. As well as the new programmes which have been established to deliver against these priorities, existing programmes across the system contribute significantly to the achievement of the outcomes set out within the LCP. This includes the Council's *Empowering Lewisham Programme*, which aims to ensure that some of the most vulnerable residents are empowered to live as independently as possible, and which has already had a positive impact on maintaining independence, reducing residential placements and enabling people to regain their independence at home after a spell in hospital. Similarly, the *Home First Programme* which embeds the ethos that home is the best place for people to regain their independence, and where teams work together proactively to identify people who will require ongoing care once discharged, has seen a reduction over the last year in discharges to care homes by 30% and a reduction in the average length of stay in intermediate care beds while still improving people's functional outcomes by 30%.
- 3.3. Furthermore, through the priority to strengthen the integration of primary and community-based care at a neighbourhood level, staff across health and social care will continue to focus on the provision of personalised health and care services, delivered closer to home, and adopt integrated multi-disciplinary approaches. This priority also seeks to raise awareness of the services, information and advice available to individuals to maintain and improve their health and wellbeing, supporting both health and adult social care objectives.
- 3.4. In addition, the Older People's Programme looks to establish a model of care for older people which specifically addresses proactive care, reduces admissions to hospital and, working alongside the Home First Programme, supports Integrated Discharge and Intermediate Care for this cohort. The five-year aim for the Older People programme is to see a reduction to the best benchmarked peer borough in unplanned admissions and attendances for older people and an increased proportion of older adults remaining at home. This will see a further reduction in people being admitted to care homes.

4. Governance

- 4.1. The activity needed to meet local and national objectives, including those set out in the Local Care Plan, is co-ordinated through partnership programme boards and delivery groups. These partnership boards and groups report into the Place Executive Group, which oversees delivery across the partnership, and the Lewisham Health and Care Partnership.
- 4.2. The Place Executive Group is supported by a joint programme management approach. This provides resource for project and programme delivery to all LHCP partners.
- 4.3. To support the delivery of the Local Care Plan, Lewisham has also committed to a co-designed model of engagement. The LHCP People's Partnership sits alongside and feeds into the broader structures of the Lewisham Health and Care Partnership (LHCP), bringing patient and citizen voices and lived experience into supporting the strategy and delivery work of the LCP.

5. Progress on Priority Areas

- 5.1. Attached at **Annex A** are the latest progress reports on the priority areas. These reports are regularly reviewed by the Place Executive Group which in turn provides LHCP with the assurance that high quality programmes are being delivered effectively and to time and budget.

6. Policy Context

- 6.1. As part of the South East London Integrated Care System (ICS), the LHCP's local priorities align with the high-level priorities set out in the Integrated Care System Strategy and with the priorities outlined in South East London's Integrated Care Board's Joint Forward Plan.
- 6.2. Delivery of the Local Care Plan also supports the aims of the current Lewisham Health and Wellbeing Strategy. The plan has been shared with Lewisham HWBB members and the Board is satisfied that it supports and takes proper account of the aims of Lewisham's current Health and Wellbeing strategy which are:
 1. To improve health – by providing a wide range of support and opportunities to help adults and children to keep fit and healthy and reduce preventable ill health.
 2. To improve care – by ensuring that services and support are of high quality and accessible to all those who need them, so that they can regain their best health and wellbeing and maintain their independence for as long as possible.
 3. To improve efficiency – by improving the way services are delivered; streamlining pathways; integrating services, ensuring that services provide good quality and value for money.
- 6.3. The plan also supports the achievement of the Council's Corporate Strategy objective on Health and Wellbeing.

7. Financial implications

- 7.1. Although there are no specific financial implications arising from this report, it is important to note that delivery against the priorities is dependent on adequate resources being available and being identified in financial plans. However, it is also recognised that delivery of these priorities will support the longer-term financial sustainability of services and organisations within the LCP.

8. Legal implications

- 8.1. There are no legal implications of this report.

9. Equalities implications

- 9.1. A key focus of the SEL Joint Forward Plan and Lewisham's Local Care Plan is on addressing inequalities throughout the health and care system and on tackling the impact of disadvantage and discrimination on health and care outcomes.

10. Climate change and environmental implications

- 10.1. There are no climate change or environmental implications of this report.

11. Crime and disorder implications

- 11.1. There are no crime and disorder implications of this report.

12. Health and wellbeing implications

- 12.1. The Local Care Plan's overall aim is to improve health and care outcomes and to address inequalities. All activity to deliver the plan supports this aim.

13. Report author and contact

Sarah Wainer, Director of System Transformation, Lewisham Health and Care Partnership (LBL/SEL ICB Lewisham) sarah.wainer@selondonics.nhs.uk

Annex A

Lewisham Local Care Plan Progress Update

1 Strengthening the integration of primary and community based care

The model, infrastructure and approach required to deliver effective integrated working at a neighborhood level will be established. Through this approach local models of care will be established for at least two long term conditions and to support older people. The provision of early intervention and community support for mental health will also be expanded.

Neighbourhood integrated working

Reports into the Lewisham Integrated Neighbourhood Network Alliance

After a period of stakeholder engagement through a series of workshops, interviews, and surveys we will strengthen primary and community working by focussing on one neighbourhood at a time to identify local challenges and adopt an integrated way of working to address these, taking the learning and scaling this up across the borough. Following an invitation to all Lewisham PCNs, Neighbourhood 3 will be the first neighbourhood pilot. Work has started including setting up a steering group and holding a deep dive session with stakeholders to identify neighbourhood priorities for action.

MDM Review

Stakeholders across the system have identified the need to review how practice-based MDM meetings are currently working and explore solutions for enhancement to ultimately improve patient outcomes. A task and finish group has been established and Self-Assessment Questionnaire developed with Stakeholders to help understand how the current Standard Operating Procedure is being implemented, including variation in practice across the borough, identify challenges around existing processes and behaviours (e.g. access to systems, recording and following up of actions, effective chairing of and participation in meetings) and explore opportunities to enable an anticipatory model of identifying and supporting patients before their needs become complex. A number of in-depth interviews will be undertaken following completion of the questionnaire.

Directory and Signposting working group

Project to work with stakeholders to map directories of services that are used to support health and wellbeing and to identify opportunities to promote existing platforms and align future developments. Prototyping use of Community Connections Lewisham Directory with health teams to determine if this resource can be of wider benefit to partners across the system.

Lewisham's priorities: Progress against actions

1

Strengthening the integration of primary and community based care

The model, infrastructure and approach required to deliver effective integrated working at a neighbourhood level will be established. Through this approach local models of care will be established for at least two long term conditions and to support older people. The provision of early intervention and community support for mental health will also be expanded.

Local models of care for LTCs

Reports into the LTC Delivery Forum

We have identified Respiratory (asthma) and Cardiovascular (hypertension) as our two main areas of focus and in recent months we have held a number of workshops/discussions with all key stakeholders to help us understand our current offer within the borough and what we need going forward to help us manage the current and predicted demand. This will include identifying any duplication within our system which will potentially give us the opportunity to release funding for additional investment.

We are also linked in with colleagues across our wider system which includes the SEL Respiratory Network and our Cardiovascular Programme leads where we are developing service maps for both areas. For CVD an initial service map was developed by colleagues at KCH which we are building on and we have since met with CESEL and our wider team to discuss priority areas for Lewisham.

We will continue to work with key stakeholders and partners on the BGL diabetes work programme and one of the areas that we are currently exploring is to identify additional space for the DSNs (Diabetes Specialist Nurse) to deliver community clinics and a request has been submitted to the Lewisham Estates Board for review.

1 Strengthening the integration of primary and community based care

The model, infrastructure and approach required to deliver effective integrated working at a neighbourhood level will be established. Through this approach local models of care will be established for at least two long term conditions and to support older people. The provision of early intervention and community support for mental health will also be expanded.

Local models of care for older people

Reports into the Older People's Programme Board

ED attendances amongst older adults had returned by the end of 2022/23 to 2019/20 levels, while the number of ED admissions amongst older adults had doubled in this time. Lewisham now has the highest admissions rate per 100,000 people in SEL, and the highest readmissions and housebound rate in SEL.

Work is ongoing within the Older People's programme to identify which older adults would most benefit from a proactive service offering key preventive actions such as Comprehensive Geriatric Assessments, Falls Risk Assessments, Structured medication reviews, Personalised Care and Supported Plans to prevent deterioration and unplanned admission. Ideas about how to identify this cohort include:

1. Older adults who are frail (test whether mild/moderate/severe) but not had recent (<1 year) primary care or community care contact
2. Identifying what factors are most common in admissions in older adults to build a predictive model, such as age, gender, ethnicity, frailty score, care home resident, end of life care flag, number of previous admissions, admissions for a reason prevalent amongst re-admitted patients, days since last admissions, deprivations index score, long term conditions.
3. Older adults who had a care needs assessment and not met the threshold to receive care.

In addition, work is ongoing to develop a business case for a Lewisham Twilight service to provide care to patients overnight (between 11pm and 7am) while other services are closed. The model being considered is pairing two wellbeing workers to visit a caseload of one patient per hour, using a fleet of vehicles, to ensure they are stable overnight. Finally, work is ongoing to develop a Lewisham wide mechanism for capturing the voice of the older resident. This will be facilitated through the large number of community groups that support older people in Lewisham.

Lewisham's priorities: Progress against actions

1

Strengthening the integration of primary and community based care

The model, infrastructure and approach required to deliver effective integrated working at a neighbourhood level will be established. Through this approach local models of care will be established for at least two long term conditions and to support older people. The provision of early intervention and community support for mental health will also be expanded.

Early intervention for mental health

Reports into the All Age Mental Health Alliance

The continued focus of investment within the Alliance on the development and enhancement of our blended community mental health and Primary Care Mental Health Teams comprised of Health, Social Care and Voluntary Sector staff. Our intention is to continue to ensure that our community mental health offer is integrated into our neighbourhood and PCN footprint maximising opportunities to work collaboratively to meet the health and care needs of populations that we serve.

Mental Health Invest standard (MHIS) and Community Transformation priorities for Adults have been agreed through the Mental Health Alliance Leadership Board and are being taken through governance structures within the ICB and SLaM to be finalised in August. The three priority areas are:

- Additional Consultant Capacity x 2
- Discharge and flow workers including Supported Housing Uplift
- Additional Capacity within primary care and community mental health teams.

CYP MHIS priorities are yet to be agreed but will need to be finalised by the end of August.

The scoping phase of the Lewisham Adult Clinical model is at its later stage development and has been reported to SLaM's Board – a proposal for a 24/7 community hub (based on best practice models from other Mental Health Systems in other countries) is being considered for testing within one of our neighbourhoods with proposed investment via an NHSE Business case.

Lewisham's priorities: Progress against actions

2 Building stronger, healthier families and providing families with integrated, high-quality, whole-family support services

An integrated model for family hubs across Lewisham will be established and the integrated pathways that can be delivered through family hubs will be identified.

Reports into the CYP Transformation Board

Good progress has been made with the Family Hub in Clyde that is currently being piloted, supported by partners from health visiting and midwifery and across the voluntary sector. The pilot is being evaluated to ensure any lessons learnt can be implemented for the next Family Hubs. Additional services continue to be added, aiming to support related priorities such as paediatric outreach, vaccinations, weight management of children and CAMHS. The opening of the next Hub in Donderry (Downham) should take place by end September 2023 and in Bellingham in autumn 2023.

Local Child Health Teams are in development in Lewisham, with the first PCN pilot (TLCP PCN) being planned for autumn 2023. This will see enhanced clinical triage of children to assess whether General Paediatric Outpatients is the right pathway, and diversion of some patient cohorts into a joint GP- and Paediatrician-led community based clinic with shorter waiting times and closer to home care.

Lewisham's priorities: Progress against actions

3

Addressing inequalities throughout Lewisham health and care system

An agreed infrastructure will be implemented through which initiatives to address health inequalities and achieve health equity in the borough can be delivered.

Reports into the Health and Wellbeing Board

The Lewisham Health Inequalities and Health Equity Programme is progressing well, and a key achievement has been to develop a health equity team within each Lewisham Primary Care Network (PCN). Each team consists of a Health Equity Fellow (clinician) and commissioned community-based organisation. The teams are now being mobilised to co-produce specific health equity projects for their respective PCN footprint. Finalised projects will be confirmed at the end of August 2023.

Cancer Screening

The Lewisham Cancer Awareness Network (LCAN) continues to focus on improving cancer screening rates and improving awareness of the signs and symptoms of cancer. Of the three main cancer screening programmes, breast cancer screening uptake is the lowest in Lewisham. Specific work is underway to promote breast cancer screening across the borough including use of Council communications channels e.g. (Lewisham Life magazine breast cancer screening article due for distribution in August 2023) and engagement at local events over the summer period (e.g., Downham Celebrates in June 2023). Inequalities in breast and bowel cancer screening uptake have been highlighted in data for those with severe mental illness, learning disability, by geography and ethnic group. Similar analysis is underway for cervical cancer screening. Work to address inequalities includes:

- SEL Cancer Alliance bid submission to fund Lewisham voluntary and community sector organisations in target communities to support increasing cancer screening uptake.
- Working with Macmillan to develop Lewisham Cancer Champions, within the wider Lewisham Health and Wellbeing Community Champion programme, to raise awareness and improve uptake of cancer screening in specific communities. This will be a 3-year initiative with support from Macmillan.

Immunisations

Planning is underway to complete a JSNA topic assessment that will focus on inequalities in immunisation and cancer screening uptake. This will be completed over the course of the next year to inform work to address inequalities. A Lewisham vaccination and immunisation strategy has been developed to support improvements in vaccination uptake in the borough. Within this strategy, PCN immunisation open sessions are being planned to help address inequalities in access to vaccination appointments across Lewisham.

Workforce Toolbox

A proposal was taken to the July 2023 meeting of the Lewisham Health and Wellbeing Board to commission an external organisation to develop a framework for the Lewisham workforce toolbox to address health inequalities in Lewisham. This proposal was approved and will be progressed in coming months. As part of this consideration will be made to incorporate cultural competency training available via LGT into the toolbox.

Lewisham's priorities: Progress against actions

4 Maximising our roles as anchor organisations, being compassionate employers and building a happier, healthier workforce

Opportunities for joint apprenticeship programmes will be identified. Joint initiatives will be implemented to promote health and care careers and develop tools and approaches to inform workforce planning and address workforce.

Thread runs through all boards

The LHCP Workforce Group met in June and reviewed its purpose and partnership priorities. The particular areas of focus that have been agreed for this group are to assess the current apprenticeship offer across the partnership, to identify opportunities for joint working on equalities, and to explore an integrated workforce model. The next meeting of the group will focus on development of apprenticeships and the integrated workforce model with partnership apprentice leads and heads of nursing.

Work is also underway to connect the council's Lewisham Challenge programme for year 12 students with the proposed LHCP health and care careers insight programme, to launch in September/October.

5 Achieving financial sustainability

The LHCP will work to optimise the use of resources, align financial planning and maximise financial resilience to system pressures.

Thread runs through all boards

The LHCP is continuing to work collaboratively within the partnership and across Southeast London ICS to optimise use of resources and maximise financial resilience. We are working together to optimise outcomes across a range of funding sources including discharge to maximise patient flow, and winter resilience planning to ensure we get the best value from resources invested.

The ICS works to one financial plan across the system and has a substantial efficiency programme to deliver to ensure financial resilience. Further information regarding current pressures and progress are referenced in the finance paper presented to the LCP Board.



Healthier Communities Select Committee

Report title: A Vision and Strategy for Adult Social care in Lewisham

Date: 6th September 2023

Key decision: No

Class: Part 1

Ward(s) affected: All

Contributors: Tom Brown Executive Director Community services

Outline and recommendations

The purpose of this presentation is to provide members of the Committee with an update on the development of the Vision and strategy for Adult Social Care, in Lewisham.

Timeline of engagement and decision-making

Aug- Jan 2022 - Adult Social Care Staff Workshops

Feb/Mar 2023 - Adult Social Care Staff engagement to support appraisals and objective setting

1. Summary

- 1.1. The voices of people who access care and support should be at the forefront of conversations about the future of social care in Lewisham. The priorities outlined within this vision and strategy are based on what people have told us is important to them.

Our priorities also focus on delivering the many changes around social care coming from central government following the Social Care Reform white paper and the Health and Social Care Bill.

- 1.2 We have set out the priorities and the high level “We will “statements and will be continuing to work with residents and partners to work out how we deliver these aspirations.

2. Recommendations

- 2.1 Members to note the high-level priorities for Adult Social Care.

3. Policy Context

- 3.1. The contents of this report are consistent with the Council's policy framework. It supports the achievements of the Corporate Strategy objectives:
- 3.2 Open Lewisham, by celebrating Lewisham's diversity in terms of an inclusive and representative workforce, by ensuring our practice and service delivery is culturally competent.
- 3.3 Health and Wellbeing, by improving conditions for care workers, supporting unpaid carers, by working with partners to deliver the services that residents need to allow them to remain healthy, feel empowered and independent within their communities.
Safer communities, by continuing to work in partnership to safeguard adults from harm, abuse, and neglect
- 3.4 Co-production is a key component of further developing and improving adult social care and forms a baseline for the new CQC assessments for Local Councils starting in 2023. Therefore, the lived experience of service users and their carers will inform our actions going forward.
- 3.5 ASC provides support in a variety of ways to people living in Lewisham who have the highest level of need, for example those with a disability, long term illness, older people, and unpaid carers. Close working with public health and wider sector partners will ensure our ambitions are delivered and we are therefore working closely with these partners to ensure our plans are aligned.

4. Financial implications:

- 4.1 Despite a challenging economic environment and market, we are challenging and changing how we deliver services to improve outcomes for residents, reduce our expenditure and make the best use of resources. Adult social care funding has been a challenge over the last decade and more so in last few years with changing profile of clients who are living longer and requiring more complex care (escalated even more after pandemic). This has created a big sustainability challenge for both councils and provider market. In recent years government introduced the fair cost of care which would have addressed a lot of the funding issues with social care. However, this has been watered down in 23/24 and so there is a mis match between provider expectation in terms of funding and the monies transferred to council from government. Hence the present challenge is trying to manage this delicate balance and sustain the quality of care for Lewisham citizens while maintaining a health provide market.

Budgets	
<u>Expenditure:</u>	
<u>General Fund</u>	£
PoC (Third party and Transfer payments)	97,446,753
Staffing	20,614,317
Other Expenditure	5,952,472

Internal Recharges	1,499,090
Total Outgoings	125,512,632
<u>Income and Recharges</u>	
Government Grants	(19,309,208)
Health Monies, Recharges & Reimbursements	(31,227,631)
Client contributions	(11,498,240)
Other Recharges	(556,227)
Total Incomings	(62,591,306)
Total ASC Net Budget	62,921,326
<u>ASC Savings</u>	£'000
20/21	2,832
21/22	6,891
22/23	764
23/24	2,855
Total Savings	13,342

5. Legal implications

5.1 Adult Social Care is bound by its duties under the:

- Care Act 2014.
- Health and Social Care Act 2008.
- Mental Health Act 1983.
- Mental Capacity Act 2005.

6. Equalities implications

6.1 Our vision and strategy focuses on equalities and diversity and ensuring the voice of all service users is heard.

7. Climate change and environmental implications

7.1 No direct climate change or environmental implications.

8. Crime and disorder implications

8.1 n/a

9. Health and wellbeing implications

9.1 Adult Social Care is working alongside Public Health to support the development of the new Health and Wellbeing Strategy.


10. Report author and contact

10.1 Joan Hutton, Director of Adult Social Care- Joan.Hutton@lewisham.gov.uk



A Vision and Strategy for Adult Social Care in Lewisham

2023



Why do we need a Vision and Strategy

We need a vision so we, including all of our partners, are focusing on a common goal; an aspirational statement to help us deliver excellent health and social care services...

...and a strategy so we are clear on the journey we are going to take to get there.

It's therefore important that our vision and strategy :

- resonates with service users, staff , providers and the wider community
..So, we have co-produced this strategy with our staff and have plans in place to consult with our service users and providers.
- focuses work across the long term and helps us to make decisions and prioritise resource and effort
.. So, our plans started with the 10 year ASC reform strategy, LBL corporate strategy and flow down to everyone's team and individual staff objectives
- Links us across ASC and the wider Council and ICB Place based system
..and we continue to work closely with the wider Health and Wellbeing Board across SEL to ensure our plans align.

THE CURRENT LANDSCAPE

This past years have seen increasing challenges for adult social care.

Overall, our population is growing and more of us can expect to live long and healthy lives; If population estimates are right, there will be 16,000 more people in Lewisham in 2030, with 10,000 of them over the age of 65 (POPPI).

There are more people with long term conditions. More people have a higher risk of 2 or more at the same time, and many people are living longer with those conditions. This can make care and support more challenging in old age.

At the same time, more and more people aged under 65 have long term conditions or disabilities, increasing the number of individuals needing help.

The impact of the pandemic is far from over with more and more people requesting support; in Lewisham our referrals to the gateway are now consistently over xxx per month with more people coming to us in relation to their mental health, domestic abuse and safeguarding and unpaid carers are reaching the limits of what they can do.

We now also face the impact of the cost-of-living crisis, with those who need or work in care amongst the most exposed.

We are also seeing the impact of the NHS challenges ; We can see more people going into hospital for shorter stays and thus more people need to be discharged – with more complex needs and without sufficient recovery time. More people are waiting for assessments or for care at home. A proportion will inevitably deteriorate or fall – some will end up needing hospital which could have been avoided if they had received support earlier.

Despite the 10 year reforms and the commitment of more funding, Adult social care has had much less funding from Government over recent years at a time when demand and needs are growing and costs are increasing. Short term funding and stops and starts in Government reform has created uncertainty and instability requiring close work with the care provider market to ensure sustainability.

Our workforce continues to be affected; 12% of the adult social care workforce positions across the SEL area are vacant, with 11% of people working in the sector leaving and needing to be replaced in 2020/21.(ASC WFD) . Similarly 11% of our workforce left in 2022/23 and we continue to be dependent on agency staff who are more than a 1/3rd of our workforce.

OUR VISION & STRATEGY

We will work together to support you to live the best life you can in Lewisham.

We will do this by:

- Working together to enhance your Quality of Life and wellbeing and maximising your independence focusing on goals, strengths and connections, while protecting your right to live in safety.
- Working jointly with you, our citizens, carers and partners and providers to co-produce and provide the right support, in the right place, at the right time as close to home as possible
- Working towards Lewisham being a place that people want to work in ASC, both in the council and provider market. Developing, supporting and motivating our staff so they feel empowered to make the right decisions
- Focusing on innovation and improvement, in readiness for CQC assurance and wider ASC reforms
- Ensuring equality and accessibility by improving access and simplifying and streamlining our communications, data, processes and systems
- Delivering value for money making the best use of our resources across the system and spending within our means
- We will work with our local provider market to ensure that we have a sustainable and high quality care market in Lewisham that values staff and promotes independence and wellbeing

OUR VALUES AND PRINCIPLES



We will work together to enhance Quality of Life, wellbeing and maximise independence focusing on goals, strengths and connections, while protecting the right to live in safety.

OBJECTIVES

- We work with people and our partners to establish and maintain safe systems of care, in which risk and safeguarding is managed, monitored and assured.
- We will improve multi-disciplinary decision-making focusing on supporting Service Users to achieve their goals and more independent outcomes
- We will deliver progression pathways for adults with a Learning Disability and those young people preparing for adulthood who are transitioning from CYP into ASC.
- We will support more people to benefit from our enablement service and improve its effectiveness
- We will promote Direct Payments as a way of maximising choice and control
- We will value and work with carers, to help sustain them in their caring role, have a life outside of caring and support them to maintain their own health and wellbeing.

• Working towards Lewisham being a place that people want to work in Adult Social Care. Developing, supporting and motivating our staff so they feel empowered to make the right decisions

OBJECTIVES

We will ensure we have a sustainable workforce through:

- Developing and delivering a workforce strategy and plan that focuses on:
 - effective recruitment and retention
 - career progression
 - Increasing ASYEs and apprenticeships
 - Succession planning
 - Working with SEL ICB to improve access and promote careers in ASC
- Ensuring sufficient resources to meet demand and manage risk;
 - ensuring clarity over structure, job roles and case load equity
 - Using overtime effectively
 - Reducing our dependency on agency workers

We will empower, develop, motivate and support staff through:

- Developing an annual training plan for ASC ensuring all have clear CPD opportunities
- Creating a single point of access to key statutory and local information
- Improving leadership support and supervision
- Creating a more holistic approach to staff communication
- Improving staff wellbeing and MH
- Developing and delivering a clear quality of practice auditing framework
- Addressing inequalities within the system that adversely impact upon specific groups in the workforce.

- We will work with our local provider market to ensure that we have a sustainable and high quality care market in Lewisham that values staff and promotes independence and wellbeing

We will ensure we have a sustainable market through:

- Working in partnership to ensure we have a market that can meet the needs of local people
- Work towards funding provision at a Fair Cost of Care rate
- Delivering against the Unison Ethical Care Charter

We will empower, develop, motivate and support staff through:

- We will value jobs in social care & support the ADASS Proud to Care programme and implementing it locally
- We will ensure contracted providers pay LLW
- We will work with providers and the NHS to develop skills and open career pathways

Co-production and Collaboration

We will work jointly with our citizens, carers, partners and providers to co-produce and provide the right support, in the right place, at the right time as close to home as possible

OBJECTIVES

- We will develop and deliver a co-production strategy with our service users, providers and partners.
- We will work with our partners to deliver joined up care e.g. Home First; Transitions; Mental Health; Intermediate care; Prevention; Autism; Dementia; Paid and unpaid Carers ; Housing
- We will work with the Care Market to ensure services are able to meet need in a way that supports choice and independence and to improve conditions for care workers to ensure they feel valued
- We will collaborate with others to deliver the places, activities and programmes our residents need to feel empowered to live a physically active lifestyle;
- We will work with the local NHS to deliver the services Lewisham residents need and create the Lewisham Health Care and Wellbeing Charter.
- We will work with our partners and providers to digitise social care in line with the ASC 10 year vision.

- We will ensure continuous learning and development from compliments and complaints, appeals, incidence reporting, peer reviews, SARS, and quality of practice audits
- We will establish a Programme Management Change approach, in order to catalyse change and ensure project benefits are realised, alongside continued BAU requirements, aligning across the system
- We will make all necessary improvements to be ready for ASC reforms including CQC Assurance, client record digitisation and market sustainability improvement planning
- Data dashboards will be regularly assured and reviewed to inform better decision making, continuous improvement and learning

- We will create a single performance and quality assurance framework across ASC and integrated across the system, where appropriate, including introducing the new social care data framework.
- We will streamline the safeguarding pathways and Liberty Protection Standard Reforms
- We will ensure our information is timely, accessible and up to date, across all channels
- We will accommodate equality and diversity in our quality improvement and ensure significant changes have been through an Equalities Impact Assessment to ensure equality and accessibility is paramount.
- We will reach out to under-represented groups to ensure their voice is heard

We will deliver value for money making the best use of our resources across the system and spending within our means

- We will empower managers by devolving budgets
- We will improve the recording and understanding of our costs to ensure accuracy and transparency and to support clients to avoid debt.
- We will procure services that deliver the best outcomes at the most cost effective rate
- We will manage demand effectively at the points of access in order to maximise independence for residents
- We will ensure timely and adequate reviews of packages of care
- We will ensure support plans are strength based and proportionate to need, including for children and young people who are transitioning into ASC.
- We will make sure that funding is allocated appropriately across the system



Healthier Communities Select Committee

Report title: Health & Wellbeing Strategy and Healthcare & Wellbeing Charter

Date: 6th September 2023

Key decision: No

Class: Part 1/ Part 2 (Delete as appropriate)

Ward(s) affected: all

Contributors: Charles Malcolm-Smith (People & Provider Development Lead, South East London ICS), Dr Catherine Mbema (Director of Public Health), Ceri Jacob (Lewisham Place Executive Lead, South East London ICS)

Outline and recommendations

The purpose of this paper is to provide members of the Committee with an update to the development the proposed Lewisham Health Care and Wellbeing Charter

Timeline of engagement and decision-making

The committee agreed the approach to the key elements and development of the proposed Healthcare and Wellbeing charter at its June 2022 and February 2023 meetings and was updated on its development at its June 2023 meeting.

1. Summary

- 1.1. The committee received a summary of the feedback on the framework for the proposed Health and Wellbeing Charter and this has been developed further with the Lewisham Health & Care Partners (LHCP) People's Partnership group at its July meeting. A draft of the Charter is attached for comment (Appendix 1).

2. Recommendations

- 2.1. Members of the Healthier Communities Select Committee are asked to comment on the draft of the Health and Wellbeing Charter, and to note that it will be integral to the Health and Wellbeing Strategy for Lewisham.

3. Policy Context

- 3.1. The contents of this report are consistent with the Council's policy framework. It supports the achievements of the Corporate Strategy objective:

- We will work with the local NHS to deliver the services Lewisham residents need and create the Lewisham Health Care and Wellbeing Charter.

4. Background

- 4.1. The attached draft Health and Wellbeing Charter follows discussion at the LHCP People's Partnership meetings in May and July. It covers both the expectations that citizens have for the planning and provision of health and care services, and the responsibilities that people have for supporting those services and for their own health and wellbeing.
- 4.2. The Lewisham Health and Wellbeing Board is revising the Health and Wellbeing Strategy and the charter will be integral to the strategy and to delivery of its plans and priorities.
- 4.3. In line with the findings from the impacts of COVID-19 JSNA topic assessment for Lewisham and previous considerations of the Health and Wellbeing Board, there will be an ambition to develop a new Health and Wellbeing strategy that takes a holistic approach to address both needs around health and care services and the wider determinants of health.
- 4.4. A strategy working group has been convened, which aims to work with a wide range of stakeholders to develop priority areas and actions for the Health and Wellbeing strategy that focus on the interface between wider determinants of health and health services, where local action and influence lead by the Health and Wellbeing Board can have maximal impact.
- 4.5. Two strategy development workshops will be held (one in September and another in October 2023) to bring together stakeholders to develop priority areas for action in line with the recommendations from the following reviews:
- 4.6. [Build Back Fairer: The COVID-19 Marmot Review. The Pandemic, Socioeconomic and Health Inequalities in England \(December 2020\)](#)
- 4.7. [Health Equity in England: The Marmot Review 10 Years On \(February 2020\)](#)
- 4.8. Alongside the strategy development workshops, a mapping exercise will be undertaken to understand the range and breadth of Lewisham strategies that address wider determinants such as housing, employment and education to ensure that the new strategy will add value and complement existing strategies and initiatives.
- 4.9. The draft priority areas for action, proposed actions and links to the Health and Wellbeing Charter will be presented at the October 2023 meeting of the Health and Wellbeing Board.

5. Financial implications

- 5.1. There are no direct financial implications arising from the implementation of the recommendations in this report.

6. Legal implications

- 6.1. There are no direct legal financial implications arising from the implementation of the recommendations in this report.

7. Equalities implications

- 7.1. Reducing inequalities and health inequalities through improving inclusion and access to services are integral to the Charter.

8. Climate change and environmental implications

- 8.1. There are no direct climate change and environmental implications arising from the

implementation of the recommendations in this report.

9. Crime and disorder implications

- 9.1. There are no direct crime and disorder implications arising from the implementation of the recommendations in this report.

10. Health and wellbeing implications

- 10.1. The development work and improvement plans outlined in this report will contribute to improved access to health and care services

11. Report author and contact

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Charter for Health, Care & Wellbeing Services in Lewisham

What is the charter?

It describes the expectations of Lewisham people for the provision of health, care and wellbeing services in the borough. These services may be provided in the NHS, in social care or by voluntary and charity organisations.

The charter also describes the responsibilities that citizens have identified for supporting those services and for their own health and wellbeing.

This is what we have heard is important

Services should be **planned and delivered to take into account all of the diverse communities** in Lewisham, to **ensure equity** and to **reduce health inequalities**

Service planners and providers must be open about what can be provided with the resources and capacity that is available.

There must be **accountability for the quality and delivery** of services to clear and specific standards.

Access is paramount. Services should be located so that people are able to easily get to them taking into travel and transport.

Information or access to services should **not depend on people having digital technology**

To minimise anxiety from waiting, **appointments should be provided promptly.**

All information that is provided to people must be **easily understood**, including on appointments, services or treatments.

Privacy and confidentiality must be respected; personal information should not be shared inappropriately with other people, services or agencies.

Services should **consider the whole person** and give them the opportunity to contribute to their own treatment plans. There should be scope for **self-referral** to services.

Everyone must be treated with **dignity and respect**, this includes people who use services, carers and people who work in the NHS and health and care services

Social connections can help with good health, care and wellbeing and should be supported. The role of paid and unpaid **carers should be recognised.**

There must be opportunities so **people can help themselves and others in their communities**, by promoting ways of achieving better health, prevent ill-health if possible, providing information and developing the assets we have in our community.

For the benefit of the whole community, people have a responsibility to support the NHS and other vital health and care services by **using the right service and keeping appointments.**

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Healthier Communities Select Committee

Report title: Select Committee Work Programme Report

Date: 6 September 2023

Key decision: No.

Class: Part 1

Ward(s) affected: Not applicable

Contributors: Nidhi Patil (Scrutiny Manager)

Outline and recommendations

This report gives committee members an opportunity to review the committee's work programme and make any modifications required.

The Committee is asked to:

- To review the work programme attached at Appendix B.
- To consider the items for the next meeting and specify the information required.
- To review the forward plan of key decisions at Appendix E to consider whether there are any items for further scrutiny.

Timeline of decision-making

Healthier Communities Work Programme 2023/24 – draft agreed on 20.06.23

Healthier Communities Work Programme 2023/24 – agreed by the Overview and Scrutiny Committee on 04.07.23

1. Summary

- 1.1. The committee proposed a draft work programme at the beginning of the municipal year. This was considered alongside the draft work programmes of the other select committees and agreed by the Overview and Scrutiny Committee on 4 July 2023.
- 1.2. The work programme should be reviewed at each meeting to take account of changing priorities.

2. Recommendations

2.1. The Committee is asked to:

- Review the work programme attached at Appendix B.
- Consider the items for the next meeting and specify what evidence is required, including being clear about the information the committee wishes to be included in officer reports.
- Review the forward plan of key decisions at Appendix E to consider whether there are any items for further scrutiny.

3. Work Programming

3.1. When reviewing the work programme the Committee should consider the following:

The Committee's terms of reference (Appendix A)

3.2. The Committee's areas of responsibility, include, but are not limited to:

- Adult social care
- Primary and secondary care
- Mental health
- Adult learning
- Leisure centres

3.3. The Committee has a key role in scrutinising the performance and supporting the development of the council's health and care-related strategies and policies. It also has a role in engaging and reflecting the views of residents in relation to health and care-related matters.

Whether any urgent issues have arisen that require scrutiny

3.4. If there is any urgent issue that is brought to the Committee's attention, it should consider the prioritisation process (Appendix C) and the Effective Scrutiny Guidelines (Appendix D) before deciding on its priority.

Whether a committee meeting is the most effective forum for scrutinising the issue

3.5. When scrutinising an issue of interest, the Committee should consider if there are any alternative methods for receiving information on the issue that would be more appropriate. For example, would a briefing or a written summary be more effective and appropriate for the issue in question?

Whether there is capacity to consider the item

3.6. The Committee should consider which work programme items could be removed or rescheduled to make space for the full consideration of more important issues.

Whether the item links to the priorities set out in the Corporate Strategy

3.7. A new corporate strategy has been developed¹ – which sets out the Council's values, priorities and focus for the next four years (2022-2026). These are categorised under the following headings:

- Cleaner and Greener
- Strong Local Economy
- Quality Housing
- Children and Young People

¹ <https://lewisham.gov.uk/mayorandcouncil/corporate-strategy>

- Safer Communities
 - Open Lewisham
 - Health and Wellbeing
- 3.8. The work of the Healthier Communities Select Committee will relate most closely to the 'Health & Wellbeing' priority, which commits the Council to:
- ensuring that everyone can access food and other essentials through our Lewisham Food Action Plan;
 - mitigating and ultimately ending structural racism and discrimination as a driver of health inequalities;
 - progressing towards a fairer care system and improving conditions for care workers to ensure they feel valued;
 - working with the local NHS to deliver the services Lewisham residents need and creating the Lewisham Health Care & Wellbeing Charter;
 - collaborating with other organisations to deliver places, activities and programmes that our residents need in order to live a physically active lifestyle.
- 3.9. The Committee should consider how its work programme reflects these priorities. The Committee might also consider whether there are suggestions that should be put forward for consideration in the new municipal year.

4. The next meeting

- 4.1. The following items are scheduled for the next meeting. For each item, the Committee should clearly define the information and analysis it wishes to see in officer reports
- 4.2. The Committee should also consider whether to invite any expert witnesses to provide evidence, and whether site visits or stakeholder engagement would assist in the effective scrutiny of the items.

Agenda Item	Review type	Corporate Priority
Learning Disabilities Implementation Plan	Policy development	CP5
Health Equalities (to include update on recommendations from BLACHIR)	Performance monitoring	CP5
Improving our Mental Health Provision (Early intervention, prevention and the physical estate)	Policy review	CP5

5. Scrutiny between meetings

- 5.1. Below is a list of scrutiny activity, including briefings, information requests, visits and stakeholder engagement, that has taken place outside of the committee meeting. The scrutiny activity below covers the time period between the last committee meeting on the 20th of June 2023 to the committee meeting on the 6th of September 2023.

Agenda Item	Date	Outcome	Corporate Priority
Site-visit to the Ladywell Centre	3 August 2023	<p>Provided members with first-hand insights into the invaluable services provided at the centre, which offers intensive support to adults with profound learning disabilities and complex needs, as well as a specialist service for people with Dementia.</p> <p>Members wished to assess if the centre was being utilised to its full potential.</p>	Health & Wellbeing

6. Financial implications

- 6.1. There are no direct financial implications arising from the implementation of the recommendations in this report. Items on the Committee's work programme will have financial implications and these will need to be considered as part of the reports on those items.

7. Legal implications

- 7.1. In accordance with the Council's Constitution, all scrutiny select committees must devise and submit a work programme to the Overview and Scrutiny Committee at the start of each municipal year.

8. Equalities implications

- 8.1. Equality Act 2010 brought together all previous equality legislation in England, Scotland and Wales. The Act included a new public sector equality duty, replacing the separate duties relating to race, disability and gender equality. The duty came into force on 6 April 2011. It covers the following nine protected characteristics: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.
- 8.2. The Council must, in the exercise of its functions, have due regard to the need to:
- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
 - advance equality of opportunity between people who share a protected characteristic and those who do not.
 - foster good relations between people who share a protected characteristic and those who do not.
- 8.3. There may be equalities implications arising from items on the work programme and all activities undertaken by the Select Committee will need to give due consideration to this.

9. Climate change and environmental implications

- 9.1. There are no direct climate change or environmental implications arising from the implementation of the recommendations in this report. However, in February 2019 Lewisham Council declared a Climate Emergency and proposed a target to make the borough carbon neutral by 2030. An action plan to achieve this target was subsequently agreed by Mayor and Cabinet (following pre-decision scrutiny by the Sustainable Development Select Committee)². The plan incorporates all areas of the Council's work. Items on the work programme may well have climate change and environmental implications and reports considered by the Committee should acknowledge this.

10. Crime and disorder implications

- 10.1. There are no direct crime and disorder implications arising from the implementation of the recommendations in this report. Items on the Committee's work programme may have crime and disorder implications and these will need to be considered as part of the reports on those items.

11. Health and wellbeing implications

- 11.1. There are no direct health and wellbeing implications arising from the implementation of the recommendations in this report. Items on the Committee's work programme may have health and wellbeing implications and these will need to be considered as part of the reports on those items.

12. Report author and contact

If you have any questions about this report please contact the scrutiny manager:

Nidhi Patil, 020 8314 7620, Nidhi.Patil@lewisham.gov.uk

² See <https://lewisham.gov.uk/TacklingTheClimateEmergency> for a summary of the Council's work in this area.

Appendix A – Healthier Communities Select Committee Terms of Reference

The following roles are common to all select committees:

(a) General functions

- To review and scrutinise decisions made and actions taken in relation to executive and non-executive functions.
- To make reports and recommendations to the Council or the executive, arising out of such review and scrutiny in relation to any executive or non-executive function.
- To make reports or recommendations to the Council and/or Executive in relation to matters affecting the area or its residents.
- The right to require the attendance of members and officers to answer questions includes a right to require a member to attend to answer questions on up and coming decisions.
- To consider matters referred to it in accordance with the Council's Petition Scheme.

(b) Policy development

- To assist the executive in matters of policy development by in depth analysis of strategic policy issues facing the Council for report and/or recommendation to the Executive or Council or committee as appropriate.
- To conduct research, community and/or other consultation in the analysis of policy options available to the Council.
- To liaise with other public organisations operating in the borough – both national, regional and local, to ensure that the interests of local people are enhanced by collaborative working in policy development wherever possible.

(c) Scrutiny

- To scrutinise the decisions made by and the performance of the Executive and other committees and Council officers both in relation to individual decisions made and over time.
- To scrutinise previous performance of the Council in relation to its policy objectives/performance targets and/or particular service areas.
- To question members of the Executive or appropriate committees and executive directors personally about decisions.
- To question members of the Executive or appropriate committees and executive directors in relation to previous performance whether generally in comparison with service plans and targets over time or in relation to particular initiatives which have been implemented.
- To scrutinise the performance of other public bodies in the borough and to invite them to make reports to and/or address the select committee and local people about their activities and performance.
- To question and gather evidence from any person outside the Council (with their consent where the law does not require them to attend).
- To make recommendations to the Executive or appropriate committee and/or Council arising from the outcome of the scrutiny process.

(d) Community representation

- To promote and put into effect closer links between overview and scrutiny members and the local community.
- To encourage and stimulate an enhanced community representative role for overview and scrutiny members including enhanced methods of consultation with local people.
- To liaise with the Council's ward assemblies and/ or Positive Ageing Council so that the local community might participate in the democratic process and where it considers it appropriate to seek the views of the ward assemblies and/ or Positive Ageing Council on matters that affect or are likely to affect the local areas, including accepting items for the agenda of the appropriate select committee from ward assemblies and the Positive Ageing Council.
- To keep the Council's local ward assemblies and Positive Ageing Council under review and

to make recommendations to the Executive and/or Council as to how participation in the democratic process by local people can be enhanced.

- To receive petitions, deputations and representations from local people and other stakeholders about areas of concern within their overview and scrutiny remit, to refer them to the Executive, appropriate committee or officer for action, with a recommendation or report if the committee considers that necessary.
- To consider any referral within their remit referred to it by a member under the Councillor Call for Action, and if they consider it appropriate to scrutinise decisions and/or actions taken in relation to that matter, and/or make recommendations/report to the Executive (for executive matters) or the Council (non-executive matters).

(e) Finance

- To exercise overall responsibility for finances made available to it for use in the performance of its overview and scrutiny function.

(f) Work programme

- As far as possible to draw up a draft annual work programme in each municipal year for consideration by the Overview and Scrutiny Committee. Once approved, the relevant select committee will implement the programme during that municipal year. Nothing in this arrangement inhibits the right of every member of a select committee to place an item on the agenda of that select committee for discussion.
- The Council and the Executive will also be able to request that an overview and scrutiny select committee research and/or report on matters of concern and the select committee will consider whether the work can be carried out as requested. If it can be accommodated, the select committee will perform it. If the committee has reservations about performing the requested work, it will refer the matter to the Overview and Scrutiny Committee for decision.

Healthier Communities has specific responsibilities for the following:

- a) To fulfill all of the Overview and Scrutiny functions in relation to the provision of service by and performance of health bodies providing services for local people. These functions shall include all powers in relation to health matters given to the Council's Overview and Scrutiny Committee by any legislation but in particular the NHS Act 2006 as amended, the Health and Social Care Act 2012, the Care Act 2014 and regulations made under that legislation, and any other legislation in force from time to time.
- b) To review and scrutinise the decisions and actions of the Health and Wellbeing Board and to make reports and recommendations to the Council and/or Mayor and Cabinet.
- c) To review and scrutinise in accordance with regulations made under Section 244 NHS Act 2006 matters relating to the health service in the area and to make reports and recommendations on such matters in accordance with those regulations
- d) Require the attendance of representatives of relevant health bodies at meetings of the select committee to address it, answer questions and listen to the comments of local people on matters of local concern.
- e) With the exception of matters pertaining to the Council's duty in relation to special educational needs, to fulfill all of the Council's Overview and Scrutiny functions in relation to social services provided for those 19 years old or older including but not limited to services provided under the Local Authority Social Services Act 1970, Children Act 2004, National Assistance Act 1948, Mental Health Act 1983, NHS and Community Care Act 1990, NHS Act 2006, Health and Social Care Act 2012 and any other relevant legislation in place from time to time.
- f) To fulfill all of the Council's Overview and Scrutiny functions in relation to the lifelong learning of those 19 years or over (excluding schools and school related services).
- g) To receive referrals from the Healthwatch and consider whether to make any report/recommendation in relation to such referral (unless the referral relates solely to health services for those aged under 19 years of age, in which case the referral from the Healthwatch should be referred to the Children and Young People Select Committee .

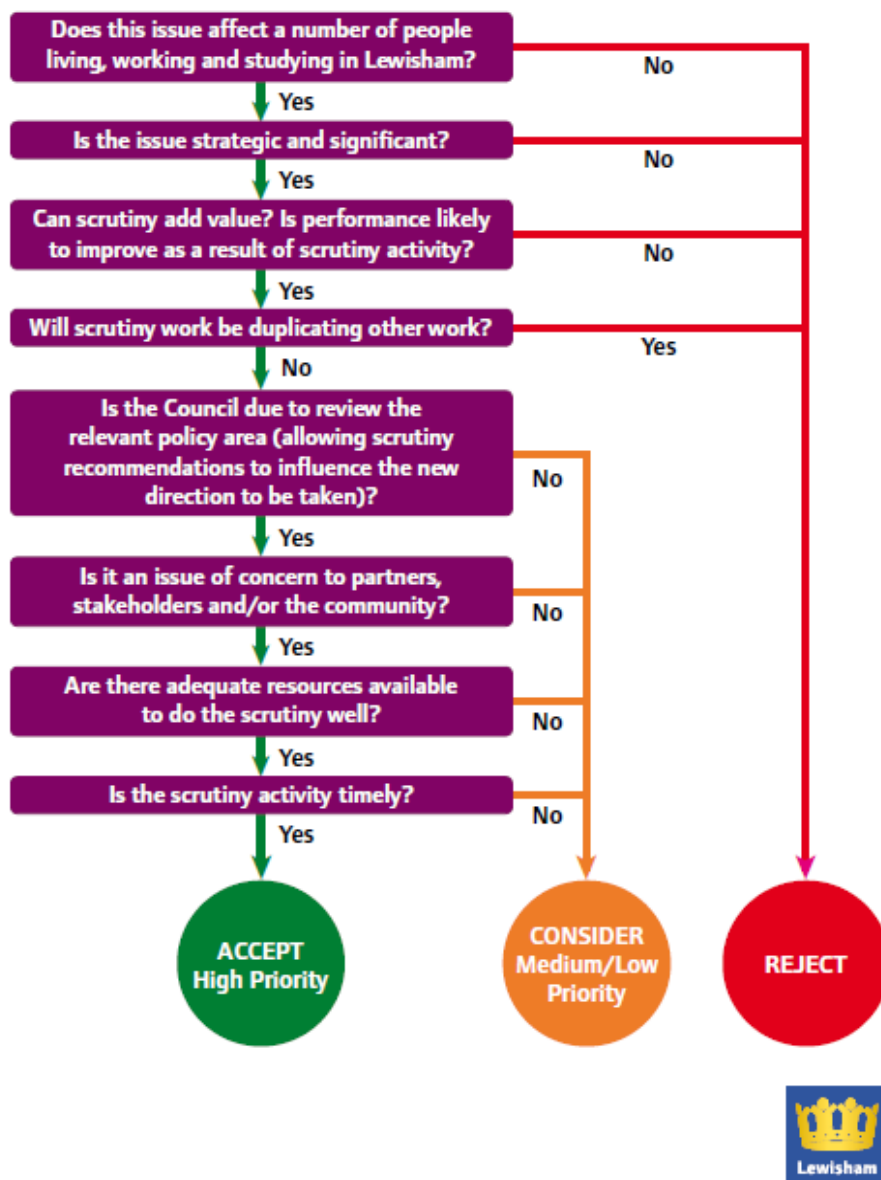
- h) To review and scrutinise the Council's public health functions.
- i) Without limiting the remit of this Select Committee, its terms of reference shall include Overview and Scrutiny functions in relation to:
- people with learning difficulties
 - people with physical disabilities
 - mental health services
 - the provision of health services by those other than the Council
 - provision for elderly people
 - the use of Section 75 NHS Act 2006 flexibilities to provide services in partnership with health organisations
 - lifelong learning of those aged 19 years or more (excluding schools and school related services)
 - Community Education Lewisham
 - other matters relating to Health and Adult Care and Lifelong Learning for those aged 19 years or over.
- j) Without limiting the remit of the Select Committee, to hold the Executive to account for its performance in relation to the delivery of Council objectives in the provision of adult services and health and lifelong learning.

NB In the event of there being overlap between the terms of reference of this select committee and those of the Children and Young People Select Committee, the Overview and Scrutiny Committee shall determine which Select Committee which shall deal with the matter in question.

Appendix C

The flowchart below is designed to help Members decide which items should be added to the work programme. It is important to focus on areas where the Committee will influence decision-making.

Scrutiny work programme – prioritisation process



Appendix D

Effective Scrutiny Guidelines

At Lewisham we:

1. Prioritise

It is more effective to look at a small number of key issues in an in-depth way, than skim the surface of everything falling within scrutiny's remit. We try to focus on issues of concern to the community and/or matters that are linked to our corporate priorities. We only add items to the work programme if we are certain our consideration of the matter will make a real and tangible difference.

2. Are independent

Scrutiny is led by Scrutiny Members. Scrutiny Members are in charge of the work programme and, for every item, we specify what evidence we require and what information we would like to see in any officer reports that are prepared. We are not whipped by our political party or unduly influenced by the Cabinet or senior officers.

3. Work collectively

If we collectively agree in advance what we want to achieve in relation to each item under consideration, including what the key lines of enquiry should be, we can work as a team to question witnesses and ensure that all the required evidence is gathered. Scrutiny is impartial and the scrutiny process should be free from political point scoring and not used to further party political objectives.

4. Engage

Involving residents helps scrutiny access a wider range of ideas and knowledge, listen to a broader range of voices and better understand the opinions of residents and service users. Engagement helps ensure that recommendations result in residents' wants and needs being more effectively met.

5. Make SMART evidence-based recommendations

We make recommendations that are based on solid, triangulated evidence – where a variety of sources of evidence point to a change in practice that will positively alter outcomes. We recognise that recommendations are more powerful if they are:

- Specific (simple, sensible, significant).
- Measurable (meaningful, motivating).
- Achievable (agreed, attainable).
- Relevant (reasonable, realistic and resourced, results-based).
- Time bound (time-based, time limited, time/cost limited, timely, time-sensitive).

Healthier Communities Select Committee: Work Programme 2023-24

Item	Type	Priority	20-Jun-23	06-Sep-23	02-Nov-23	10-Jan-24	05-Mar-24
Election of Chair and Vice Chair	Constitutional req	CP5					
Work programme 2023-24	Constitutional req	CP5					
Physical Activity Strategy	Pre-decision scrutiny	CP5					
Dementia Strategy	Pre-decision scrutiny	CP5					
Healthcare & Wellbeing Charter	Pre-decision scrutiny	CP5					
Adult Social Care Strategy	Performance monitoring	CP5					
Local Care Partnerships- Priorities and Action Plan	Policy review	CP5					
Lewisham Joint Local Health and Wellbeing Strategy and Healthcare and Wellbeing Charter	Pre-decision scrutiny	CP5					
Learning Disabilities Action Plan	Performance monitoring	All					
Health Equalities (to include update on recommendations from BLACHIR)	Performance monitoring	CP5					
Improving our Mental Health Provision (Early intervention, prevention and the physical estate)	Policy review	CP5					
Social Care Institute for Excellence's work on Co-Production	Performance monitoring	CP5					
Lewisham Safeguarding Adults Board- Annual Report	Performance monitoring	CP5					
Role of Cultural Competency in Delivering Healthcare Services	Policy review	CP5					
CQC Assurance (TBC)	Performance monitoring	CP5					

Information reports, briefings and visits	Type	Priority					
Lewisham and Greenwich NHS Trust (LGT) quality account 2023-24	Performance monitoring	CP5					
South London and Maudsley NHS Trust (SLaM) quality account 2023-24	Performance monitoring	CP5					
Adult Learning Lewisham (ALL) annual report 2023-24	Performance monitoring	CP5					
Site-visit to Gibbes Court, Mayow Road	Visit	CP5	18.04.23				
Extreme weather, advice and support	Information item	CP5	05.05.23				
Site-visit to the Ladywell Centre	Visit	CP5	03.08.23				
Update on the work of POSAC	Information item	CP5					
Health and Wellbeing Board's work on Trans Healthcare	Information item	CP5					
Digitalization in Health Care	Information item	CP5					
GP Surgeries and Capacity (Safe Surgeries)	Informal briefing	CP5					
Update on the Lay Visitor's Scheme	Information item	CP5					

Corporate Priorities**Priority**

1	Open Lewisham	CP 1
2	Quality Housing	CP 2
3	Children and Young People	CP 3
4	A Strong Local Economy	CP 4
5	Health & Wellbeing	CP 5
6	Cleaner and greener	CP 6
7	Safer Communities	CP 7

FORWARD PLAN OF KEY DECISIONS

Forward Plan September 2023 - December 2023

This Forward Plan sets out the key decisions the Council expects to take during the next four months.

Anyone wishing to make representations on a decision should submit them in writing as soon as possible to the relevant contact officer (shown as number (7) in the key overleaf). Any representations made less than 3 days before the meeting should be sent to Head of Governance and Committee Services, the Local Democracy Officer, at the Council Offices or emma.campbellsmith@lewisham.gov.uk. However the deadline will be 4pm on the working day prior to the meeting.

A “key decision”* means an executive decision which is likely to:

- (a) result in the Council incurring expenditure which is, or the making of savings which are, significant having regard to the Council’s budget for the service or function to which the decision relates;
- (b) be significant in terms of its effects on communities living or working in an area comprising two or more wards.

June 2023	Delegated decision to award Care Leavers Medium to High Support Supported Housing contract (Pt 1&2)	18/08/23 Executive Director for Community Services	Jonathan Scarth and Councillor Paul Bell, Cabinet Member for Health and Adult Social Care		
June 2023	Delegated decision to award Mental Health Supported Housing Higher Needs	18/08/23 Executive Director for Community Services	Jonathan Scarth and Councillor Paul Bell, Cabinet Member for Health and Adult Social		

FORWARD PLAN – KEY DECISIONS

Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
			Care		
July 2023	Appointment of Directors - Lewisham Homes legacy company	20/09/23 Mayor and Cabinet	David Austin, Director of Corporate Services and Councillor Sophie Davis, Cabinet Member for Housing Management, Homelessness and Community Safety		
May 2023	Approval to procure: School Minor Works Programme 2023 (SMWP 23)	20/09/23 Executive Director for Children and Young People	Lemuel Dickie-Johnson, Project Manager Capital Delivery Programme and Councillor Chris Barnham, Cabinet Member for Children and Young People		
August 2023	Approve allocation of Section 106 monies to fund employment and training programmes, and confirm acceptance of a UK Shared Prosperity Fund 'People and Skills' grant	20/09/23 Mayor and Cabinet	and		
June 2023	Articles of Association - transition of Lewisham Homes	20/09/23 Mayor and Cabinet	Jeremy Chambers, Director of Law, Governance & Elections and Councillor Sophie Davis, Cabinet Member for Housing Management, Homelessness and Community Safety		

FORWARD PLAN – KEY DECISIONS					
Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
July 2023	Catford Regeneration Partnership Limited (CRPL) Appointment of Directors	20/09/23 Mayor and Cabinet	David Austin, Director of Corporate Services and Councillor Sophie Davis, Cabinet Member for Housing Management, Homelessness and Community Safety		
March 2023	Contract award for Council Insurances	20/09/23 Executive Director for Corporate Services	Karen Eaton, Group Manager, Insurance and Risk and Councillor Amanda De Ryk, Cabinet Member for Finance and Strategy		
May 2023	Contract Award Report for School Minor Works Programme 2023 (SMWP 23)	20/09/23 Children and Young People Select Committee	Lemuel Dickie-Johnson, Project Manager Capital Delivery Programme and Councillor Chris Barnham, Cabinet Member for Children and Young People		
May 2023	Contract Award to a Registered Provider for Supported Accommodation for Young People -Site 1 and Site 2	20/09/23 Executive Director for Children and Young People	Chloe Vergara, CLA Placements Contract Manager and		
March 2023	Dementia Strategy	20/09/23 Mayor and Cabinet	Tristan Brice, Associate Director, Community Support and Care and Councillor Paul Bell, Cabinet Member for Health and Adult Social Care		

FORWARD PLAN – KEY DECISIONS

Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
August 2023	Gambling Policy 2023-2026	20/09/23 Mayor and Cabinet	Richard Lockett and Councillor Sophie Davis, Cabinet Member for Housing Management, Homelessness and Community Safety		
June 2022	Home Park and Edward Street Development Budget and Programme Update Report	20/09/23 Mayor and Cabinet	James Briggs, Head of Strategic Housing and Growth and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
August 2023	Home Park and Edward Street Development Programme and Budget Update	20/09/23 Mayor and Cabinet	Patrick Dubeck, Director of Inclusive Regeneration and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
April 2023	Lewisham and Lee Green LTN monitoring update	20/09/23 Mayor and Cabinet	and Councillor Louise Krupski, Cabinet Member for Environment and Climate		
June 2023	Lewisham Homes Interim Business Plan 2023/24	20/09/23 Mayor and Cabinet	Katharine Nidd, Head of Strategic Finance, Planning and Commercial and Councillor Sophie Davis, Cabinet Member for Housing Management, Homelessness and		

FORWARD PLAN – KEY DECISIONS

Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
			Community Safety		
June 2023	Old Fairlawn Primary School Annexe (nursery) - appropriation for planning purposes	20/09/23 Mayor and Cabinet	Luke Riley, Head of New Initiatives and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
May 2023	Permission to award Maximising Wellbeing at Home contracts (Lots 5,6,8,9)	20/09/23 Mayor and Cabinet	Tristan Brice, Associate Director, Community Support and Care and		
June 2023	Permission to procure - Integrated Community Equipment Service	20/09/23 Mayor and Cabinet	Tristan Brice, Associate Director, Community Support and Care and Councillor Paul Bell, Cabinet Member for Health and Adult Social Care		
June 2023	Review of all Supported Housing Contracts	20/09/23 Mayor and Cabinet	Jonathan Scarth and Councillor Paul Bell, Cabinet Member for Health and Adult Social Care		
July 2023	Statement of Community Involvement for adoption	20/09/23 Mayor and Cabinet	Michael Forrester, Head of Development Management and		
May 2023	to approve the annual Besson Street Business Plan	20/09/23 Mayor and Cabinet	Luke Riley, Head of New Initiatives and Councillor Brenda Dacres, Deputy Mayor and Cabinet		

FORWARD PLAN – KEY DECISIONS

Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
			Member for Housing Development and Planning		
June 2023	Treasury Management Strategy Mid-Year Review	20/09/23 Mayor and Cabinet	Katharine Nidd, Head of Strategic Finance, Planning and Commercial and Councillor Amanda De Ryk, Cabinet Member for Finance and Strategy		
August 2023	Gambling Policy 2023-2026	27/09/23 Council	Richard Lockett and Councillor Sophie Davis, Cabinet Member for Housing Management, Homelessness and Community Safety		
May 2023	Adventure Playgrounds Grant of Leases and Contract Award	01/11/23 Mayor and Cabinet	Harsha Ganatra, Joint Commissioner (FQC) and Councillor Chris Barnham, Cabinet Member for Children and Young People		
July 2023	Approval for s106 monies to go to Deptford Challenge Trust	01/11/23 Mayor and Cabinet	Julia Robbins, Developer Contributions Manager and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
April 2023	Approval to enter into contract - Drakes Court development	01/11/23 Mayor and Cabinet	Eleanor Davies, Associate Director Joint Mental Health		

FORWARD PLAN – KEY DECISIONS					
Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
			Commissioning and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
July 2023	Catford Regeneration Partnership Limited (CRPL) Business Plan	01/11/23 Mayor and Cabinet	Kplom Lotsu, SGM Capital Programmes and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
July 2023	Financial Monitoring - Period 4	01/11/23 Mayor and Cabinet	Nick Penny, Head of Service Finance and Councillor Amanda De Ryk, Cabinet Member for Finance and Strategy		
April 2023	Grant of Leases for Adventure Playground Sites	01/11/23 Mayor and Cabinet	Harsha Ganatra, Joint Commissioner (FQC) and Councillor Chris Barnham, Cabinet Member for Children and Young People		
July 2023	Levelling Up Fund Programme - approval for procurement of contractors	01/11/23 Mayor and Cabinet	and		
April 2023	Millwall FC Lease Restructuring Proposals	01/11/23 Mayor and Cabinet	Patrick Dubeck, Director of Inclusive Regeneration and		

FORWARD PLAN – KEY DECISIONS					
Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
May 2022	On Street Advertising Contract Variation and Extension	01/11/23 Mayor and Cabinet	and Councillor Amanda De Ryk, Cabinet Member for Finance and Strategy		
August 2023	Property Agreement between LB Lewisham and TfL in relation to the A205 Road Realignment Project	01/11/23 Mayor and Cabinet	Charlotte Harrison, Head of Strategic Regeneration and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
March 2023	Public Space Protection Order consultation outcome	01/11/23 Mayor and Cabinet	James Lee, Director of Communities, Partnerships and Leisure and Councillor Louise Krupski, Cabinet Member for Environment and Climate		
July 2023	Sustainable Streets recommendations and next steps - Evelyn	01/11/23 Mayor and Cabinet	Martha Lauchlan, Transport Planner and Councillor Louise Krupski, Cabinet Member for Environment and Climate		
August 2023	Treasury Management Strategy - Mid-Year Review	01/11/23 Mayor and Cabinet	Katharine Nidd, Head of Strategic Finance, Planning and Commercial and Councillor Amanda De Ryk, Cabinet Member for Finance and Strategy		
December 2022	Ladywell - Budget requirement	06/12/23 Mayor and Cabinet	James Ringwood, Housing Delivery		

FORWARD PLAN – KEY DECISIONS					
Date included in forward plan	Description of matter under consideration	Date of Decision Decision maker	Responsible Officers / Portfolios	Consultation Details	Background papers / materials
			Manager and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
July 2023	Learning Disability Implementation Plan	06/12/23 Mayor and Cabinet	Heather Hughes, Joint Commissioner, Learning Disabilities and Councillor Paul Bell, Cabinet Member for Health and Adult Social Care		
December 2022	Mayfield - Budget Requirement	06/12/23 Mayor and Cabinet	James Ringwood, Housing Delivery Manager and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		
January 2023	Annual progress update on the Autism Strategy Action Plan	24/01/24 Mayor and Cabinet	and		
June 2022	Approval to appoint operator for concessions contract at Beckenham Place Park Lake	24/01/24 Mayor and Cabinet	Peter Maynard, Contract Officer, Green Scene and Councillor Andre Bourne, Cabinet Member for Culture, Leisure and Communication (job share)		
February 2022	BfL Programme - Approval to enter into contract Valentines	24/01/24 Mayor and Cabinet	James Ringwood, Housing Delivery		

FORWARD PLAN – KEY DECISIONS

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	Court		Manager and Councillor Brenda Dacres, Deputy Mayor and Cabinet Member for Housing Development and Planning		

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