

# Lambeth Together Care Partnership Public Forum and Board Meeting in Public

[Microsoft Teams Meeting](#)  
Thursday 9 May 2024 | 1:00pm – 5:00pm

## AGENDA

Members of the public are welcome and encouraged to attend the Public Forum and observe the Board Meeting.

Agenda Item No. and Time	Agenda Item Title	Attachment / Supporting Information	Agenda Item Lead
1 p.m.	<b>Public Forum</b>		
60 mins	<b>Welcome and introductions</b>  <b>The Public Forum and how to take part</b>  <b>Questions from the public</b>		<b>Cllr Jim Dickson</b> <i>Co-Chair</i>
2 p.m.	<b>Board Meeting in Public</b>		
1.	<b>Introductions</b> <ul style="list-style-type: none"> <li>Welcome, introductions and apologies</li> </ul>		<b>Dr Di Aitken</b> <i>Co-Chair</i>
2.	<b>Declarations of Interest</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to declare any interests on items included in this agenda</li> </ul>		<b>Dr Di Aitken</b> <i>Co-Chair</i>
3.	<b>Review of Minutes</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to approve minutes and review any matters arising from the Lambeth Together Care Partnership Board meeting in Public on 21<sup>st</sup> March 2024</li> </ul>	Paper enc.	<b>Dr Di Aitken</b> <i>Co-Chair</i>
4. 2:10pm (10 mins)	<b>Lambeth Together Care Partnership - Place Executive Lead Report</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to receive an update on key developments since the last Lambeth Together Care Partnership Board meeting in Public on 21<sup>st</sup> March.</li> </ul>	Paper enc.	<b>Ruth Hutt</b> <i>Acting Place Executive Lead Lambeth, Corporate Director, Integrated Health, and Care, Lambeth Council and South East London Integrated Care Board</i>
5.	<b>Staying Healthy Programme – Deep Dive: NHS Health Checks</b>	Paper enc.	<b>Adrian Johnson</b> <i>Acting Lead Commissioner, Lambeth Council</i>

Agenda Item No. and Time	Agenda Item Title	Attachment / Supporting Information	Agenda Item Lead
2:20pm (30 mins)	<ul style="list-style-type: none"> <li>Members of the Board are asked to note and discuss the deep dive into the NHS Health Checks programme and provide feedback and questions to support programme development and delivery going forward.</li> </ul>		<b>Christopher D'Souza</b> <i>Lead Commissioner, Public Health, Lambeth Council</i>
6.  2.50pm (30 mins)	<b>Sexual Health Programme – Deep Dive: HIV Testing Week</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to note the work carried out during National HIV Testing Week, the key findings and consider the recommendations made.</li> </ul>	Paper enc.	<b>Alex Wicking</b> <i>Senior Commissioning Officer</i>
3:20pm	<b>BREAK</b>		
7.  3.30pm (15 mins)	<b>Lambeth Together Assurance</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to note the report from the Lambeth Together Assurance Sub-Group and the associated Integrated Assurance Report presented 26<sup>th</sup> March 2024</li> </ul>	Paper attached.	<b>Warren Beresford</b> <i>Associate Director Health and Care Planning and Intelligence</i>
8.  3.45pm (10 mins)	<b>Primary Care Commissioning Committee (PCCC)</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to note the update on discussions held at the Primary Care Commissioning Committee on 06 March 2024 and ratify decisions made</li> </ul>	Paper enc.	<b>Oge Chesa</b> <i>Director of Primary Care and Transformation</i>
9.  3:55pm (50 mins)	<b>Business Planning: Taking Forward 'Our Health, Our Lambeth' 2023/24 Annual Review and 2024/25 Action Plan</b> <ul style="list-style-type: none"> <li>Members of the Board are asked to note contents of the document, approve the Lambeth Together action plan for 2024/25 (contained within) and approve for the document to be published on the Lambeth Together public website</li> </ul>	Paper enc.	<b>Warren Beresford</b> <i>Associate Director Health and Care Planning and Intelligence</i>
10.  4:45pm (10 mins)	<b>Questions from public attendees</b> <ul style="list-style-type: none"> <li>An opportunity for members of the public to ask further questions</li> </ul>		<b>Dr Di Aitken</b> <i>Co-Chair</i> <b>Cllr Jim Dickson</b> <i>Co-Chair</i>

Agenda Item No. and Time	Agenda Item Title	Attachment / Supporting Information	Agenda Item Lead
11. 4.55pm	<b>AOB Close</b>  <i>Date of next meeting: 4<sup>th</sup> July 2024 (in person only)</i> <ul style="list-style-type: none"> <li>Public forum, 1pm-2pm</li> <li>Board meeting in Public, 2pm-5pm</li> </ul>		<b>Dr Di Aitken</b> <i>Co-Chair</i>

## Lambeth Together Care Partnership Board - Action Log

May 2024

No	Date Raised	Action	Current Status	Open/Closed
2	18.01.2024	Orla Oakey to share communications plan on Homecare once finalised.	Shared with Lambeth Together membership 26.04.24	Closed
3	21.03.2024	Jane Bowie to take Sarah Austin's point on missed opportunities to the next collaborative meeting in three weeks' time.	Meeting has taken place where this was discussed	Closed
4	21.03.2024	Dan Stoten and Simon Boote to meet outside of the Board meeting with the NWDA to discuss how a similar approach can be considered for children's services.	Meeting 24.04.24	Closed
5	21.03.2024	The Neighbourhood and Wellbeing Delivery Alliance to come back to a future Board meeting to discuss the evaluation and impact of the work presented at today's meeting.	On Forward Plan	Closed

## LAMBETH TOGETHER CARE PARTNERSHIP BOARD MINUTES

Thursday, 21<sup>st</sup> March 2024, 2pm

Lambeth Town Hall Basement, Brixton Hill, SW2 1RW and via Microsoft Teams

[Part 1 Meeting Recording - Public Forum](#) – (please note, the Public Forum does not have formal minutes taken).

[Part 2 Meeting Recording - Item 1 to 7 \(Inclusive\)](#)

[Part 3 Meeting Recording - Item 8 to 11 \(Inclusive\)](#)

[Board Meeting Papers](#)

[Supplementary Paper - Lambeth Together Assurance Group](#)

### Members Present:

Cllr Jim Dickson	Lambeth Together Care Partnership Board Co-Chair. Cabinet Member for Healthier Communities (job-share), Lambeth Council
Dr Di Aitken	Lambeth Together Care Partnership Board Co-Chair. Neighbourhood and Wellbeing Delivery Alliance Clinical and Care Professional Lead
Andrew Eyres	Place Executive Lead Lambeth, Corporate Director, Integrated Health, and Care, Lambeth Council and South East London Integrated Care Board
Cllr Judith Cavanagh	Young People's Champion, Lambeth Council
Cllr Marcia Cameron	Cabinet Member for Healthier Communities (job-share), Lambeth Council
Dan Stoten	Director of Integrated Children's Commissioning and Youth Services, Lambeth Council (deputising for Andrew Carter, Corporate Director of Children's Services, Lambeth Council)
Dr George Verghese (online)	GP, Co-Chair of the Lambeth Primary Care Clinical Cabinet
Dr Penelope Jarrett (online)	Chair, Lambeth Local Medical Committee
Dr Raj Mitra	GP, Children and Young People's Alliance Clinical and Care Professional Lead
Fiona Connolly	Corporate Director of Housing and Adult Social Care, Lambeth Council
Paul Coles	Chief Executive, Age UK, Lambeth
Sarah Austin	Chief Executive Integrated and Specialist Medicine, GSTT NHS Foundation Trust
Therese Fletcher	Managing Director Lambeth GP Federation
Ruth Hutt	Director of Public Health, Lambeth Council
Anna Clough (online)	Site Chief Operating Officer, Kings College Hospital NHS Foundation Trust (deputising for Julie Lowe, Site Chief Executive, Kings College Hospital NHS Foundation Trust)
Sarah B Flanagan	Patient and Public Voice Member
Rich Wiltshire	Patient and Public Voice Member
Sue Gallagher	Lambeth Together Care Partnership Board Lay Member

### Apologies:

Andrew Carter	Corporate Director of Children's Services, Lambeth Council
Dr Nozomi Akanuma	Living Well Network Alliance Clinical and Care Professional Lead, South London, and the Maudsley NHS Foundation Trust
Julie Lowe	Site Chief Executive, Kings College Hospital NHS Foundation Trust
Lilian Latinwo-Olajide	Programme Director, Black Thrive, Lambeth
Mairead Healy	Chief Executive, Healthwatch Lambeth
Nathalie Zacharias	Director of Therapies, South London, and Maudsley NHS Foundation Trust attended

**In Attendance:**

Catherine Flynn	Head of Communications and Engagement, Southeast London Integrated Care Board
Edward Odoi	Associate Director of Finance, Lambeth, Southeast London Integrated Care Board
Jane Bowie	Director of Integrated Commissioning (Adults), Lambeth Council and Southeast London Integrated Care Board
Josepha Reynolds	Neighbourhood and Wellbeing Delivery Alliance Programme Director
Juliet Amoa	Associate Director, EDI Community Health and Engagement, Lambeth Council
Oge Chesa	Director of Primary Care and Transformation, Southeast London Integrated Care Board
Simon Boote	Children and Young People Alliance Lead
Warren Beresford	Associate Director, Health and Care Planning and Intelligence, South East London Integrated Care Board
Bill Tidnam	Thamesreach
Binki Taylor	The Brixton Project
Chris French	Community Connector
Chris Thomas	Mosaic Clubhouse
David Orekoya	Associate Director of Integrated Commissioning, Lambeth Council
Guy Swindle	Deputy Director, Living Well Network Alliance
Liz Pollock	Associate Director, Finance, Lambeth Council
Rashida Pickford	Guy's and St Thomas' Integrated Musculoskeletal Service
Sara Tarren	Guy's and St Thomas' Integrated Musculoskeletal Service
Shanet Lewis	Programme Lead, Public Health, Lambeth Council

**1 Introductions**

Those present introduced themselves. Apologies were noted from Julie Lowe, with Anna Clough deputising virtually, Mairead Healy, Dr Penelope Jarrett, who joined virtually, and Lilian Latinwo-Olajide.

The Board thanked Sarah Austin and Sue Gallagher for their many years of service and commitment to improving health and care services and outcomes and wished them well on their retirement from the end of March.

**Reporting back from the Public Forum**

Dr Di Aitken welcomed members to the meeting and noted the topics discussed during the public forum that included:

- Indoor air quality and a pilot programme putting filters in school classrooms.
- A newly created house of multiple occupancy in West Norwood, where residents had complained of poor living conditions.
- Dialysis services in Lambeth.
- South East London pathology service contracts.
- Brixton Seventh Day Adventist Church hosting health related services in the community.
- Blood test online booking systems.
- Physician Associates and their role within the borough.
- Rich Wiltshire also gave an update on what the Patient and Public Voice Members (PPV) have been working on since the January Board meeting. Rich requested, when reviewing the [Our Health, Our Lambeth Health and Care Plan](#), we could incorporate the aim of patients with multiple long-term health conditions seeing the same doctor, rather than seeing numerous doctors, during their appointments. This follows from the publication of a report from the University of Cambridge. Rich reported that he had met with the South East London (SEL)

Integrated Care Board (ICB) Medicines Optimisation Lead in charge of prescriptions. Rich noted the costs of drugs and prescriptions were increasing due to a range of causes post Covid and that local teams working hard over the years to keep prescribing effective and to keep costs low. 9<sup>th</sup> March was National Social Prescribing Day and Rich explained how taking part in activities through social prescribing can lead to a wide range of health benefits.

Responses to the specific questions raised will be published on the [Lambeth Together Website](#).

## **2 Declarations of Interest**

Members were asked to declare any conflicts of interests linked to the items on the agenda.

None were declared.

## **3 Minutes from 18 January 2024 Meeting**

The [minutes](#) of the meeting of Thursday 18 January 2024 were agreed as an accurate record of the meeting.

## **4 Lambeth Together Care Partnership – Place Executive Lead Report**

Andrew Eyres gave an overview of the key highlights in his Place Executive Lead report. There were no questions following this update.

### **RESOLVED**

#### **1. Board members noted the update on key developments since the formal Lambeth Together Care Partnership Board meeting in public on 18<sup>th</sup> January 2024.**

To view the report accompanying this item, refer to pages 15 to 21 of the Board pack.

To view the recording accompanying this item, refer to part 2 of the meeting recording from 09:10 – 13:20.

## **5 Living Well Network Alliance Contract Extension**

Jane Bowie, Guy Swindle, Bill Tidnam, and Chris Thomas presented on the Lambeth Living Well Network Alliance Contract extension. Jane confirmed that sign off for the extension had been approved by Lambeth Council on the 14<sup>th</sup> March and by the South London and Maudsley NHS Foundation Trust Board on the 19<sup>th</sup> March. The following discussions were had:

- Sue Gallagher explained that when she first joined Lambeth, Lambeth was severely criticised for its mental health services and one of the positive changes Sue has experienced while being a part of Lambeth is the transformation in services. Sue wanted to pay a great compliment to all involved within the Alliance and reiterated that Mosaic is a fantastic initiative and the partnership with Certitude and Thamesreach is remarkable.
- Sarah Austin mentioned that despite the significant work being undertaken, emergency departments are seeing an increase in demand for services and length of stay in beds. Sarah noted the need to review people arriving in crisis in emergency departments to see what may have been done differently along the way.
- Sarah Flanagan attested to the value of Mosaic and explained that she is a member and that, without them, she would not be here today. Sarah asked what happens after the initial three-year extension and asked have plans been made and has anyone thought ahead of those three years.
- Dr Raj Mitra explained that, as a frontline GP for thirty years, he has seen a huge improvement in mental health care but asked, how can we keep our population well

mentally. In addition, Lambeth's population is aging and there are some of the population who cannot access Mosaic as they are housebound, so asked how outreach work would be completed to get to those members of the population in their homes.

- Fiona Connolly asked Board members to consider what does happen in the next three years and how will the Board assure that the Alliance and services continue to be here in the next ten to twenty years.
- Cllr Jim Dickson gave thanks to all involved in the work the Alliance has been doing and noted that one of the ambitions for 2025-2028 is the transition from child to adult integration of drug and alcohol services and asked, which of those are the biggest challenges and are there other challenges outside the set of ambitions.
- Guy responded to Sarah's point on missed opportunities and agreed that the Alliance needs to learn whatever it can. Jane acknowledged the experience that Guy's and St Thomas' and King's have and noted in regard to Fiona's point that part of the work is coordinating different partners in the system. Jane explained there was a meeting five weeks ago to pick up actions and make sure all partners are working in collaboration and there is another meeting on that subject in three weeks' time so will take Sarah's suggestion of looking at missed opportunities to that meeting.
- Guy echoed that there has been an increase in demand and complexity and that the demand is not going away. Guy explained that part of the ambition for the next three years and beyond is around how the Alliance can use resources, expertise and relationships already in place and bring that to communities and neighbourhoods. Guy noted that working with primary care is very important and the Alliance want primary care as formal members of the Alliance, building on relationships and trust.
- Bill Tidnam noted that until this approach is adopted more widely, Lambeth will always be seeing people from other boroughs as the borough is doing things on its own. Bill noted the need to encourage others to take the same approach as Lambeth.
- Chris Thomas mentioned Raj's point on an aging population and explained Mosaic are trying to measure their impact and found the younger the member, the bigger the impact but as members reach 55+, they tend to tail off. Therefore, Mosaic has put together a working group for those physically unable to leave their homes.
- Guy explained, in relation to Cllr Dickson's question on the biggest challenges, that the biggest ambition for the Alliance is tackling inequalities.

**Action: Jane Bowie to take Sarah Austin's point on missed opportunities to the next collaborative meeting in three weeks' time.**

#### **APPROVED**

- 1. Board members noted the progress to date against the original business for the Alliance and benefits as an expression of the aims of the Lambeth Together Care Partnership.**
- 2. Board members supported the overall direction of travel with respect to the Alliance ambitions and the contract extension, noting the approvals from individual partner boards.**

To view the presentation accompanying this item, refer to pages 23 to 47 of the Board pack.  
To view the recording accompanying this item, refer to part 2 of the meeting recording from 13:27 – 49:25.

## **6 Lambeth Together Assurance Group (LTAG)**

Sue Gallagher and Warren Beresford presented an update on the January LTAG meeting. The following discussions took place:

- Sarah Flanagan asked, in regard to the activities, have we planned for those to be completed this year and are there going to be other activities that will be completed.
- Warren explained that we have the five-year health and care plan, and the assurance report is designed to track how the partnership are progressing against that plan.

Warren explained that things will evolve and adapt, and that is being refreshed this year to show what has been achieved so far and refining the plan and impact measures to assure ourselves for the year ahead.

- Dr Raj Mitra explained that GPs used to get a monthly practice pack and asked if we are able to start tracking attendances between trusts and GPs, as well as in emergency departments.
- Warren explained that there is the Primary Care Commissioning Committee, which has set up a Primary Care Transformation and Oversight group where members talk across primary care and discuss how partners could look across primary care at a more granular level, considering what do we want to achieve and how we assure ourselves around access and transformation work. Primary care are members of the Neighbourhood and Wellbeing Delivery Alliance (NWDA), so they are brought into the work the Alliance is expected to achieve. Warren noted there is more to do but we are making progress.
- Warren also explained that we want to build on things like Lambeth DataNet, looking at patients who don't engage, so we can work together in more transformational ways.

#### **RESOLVED**

- 1. Board members noted the report from the Lambeth Together Assurance Sub-Group and the associated Integrated Assurance Report presented on 30<sup>th</sup> January 2024.**

To view the presentation accompanying this item, refer to the supplementary papers pack.

To view the recording accompanying this item, refer to part 2 of the meeting recording from 49:50 – 1:00:34.

### **7 Primary Care Commissioning Committee (PCCC)**

Sue Gallagher and Oge Chesa presented an update on the January PCCC meeting. The following discussions were had:

- Oge noted that in regard to the Pharmacy First Plus Scheme presented at the January meeting, work has been done to address the concerns raised during the presentation.
- Sarah Austin asked about the analysis of the reduction in asylum seeker funding and if it was a material risk as a result of the reduction. Sue explained it was a relatively small allocation and the reduction was relatively small and wanted to note that great care will be taken to make sure the interface with Guy's and St Thomas' as the provider to asylum seekers and refugees would have no duplication and would have a good pathway for future use of funding.
- Cllr Jim Dickson noted it was good to see the Pharmacy First Scheme working.
- Cllr Dickson reiterated that, on the asylum seekers and refugee point, this was critical for us as a borough and a big priority for Lambeth. Cllr Dickson asked, is the Health Inclusion team run out of Guy's and St Thomas' not affected by this reduction and does it continue as normal.
- Sue assured the Board the aim of the reduction in funding is to avoid any duplication of work only.

#### **RESOLVED**

- 1. Board members noted the update on discussions held at the Primary Care Commissioning Committee on 10<sup>th</sup> January 2024.**
- 2. Board members ratified decisions made at the Primary Care Commissioning Committee on 10<sup>th</sup> January 2024.**

To view the presentation accompanying this item, refer to pages 49 to 56 of the Board pack.

To view the recording accompanying this item, refer to part 2 of the meeting recording from 1:00:35 – 1:07:50.

## **8 Business Planning: Taking Forward 'Our Health, Our Lambeth', Lambeth Together Health and Care Plan in 2024/25**

Oge Chesa, Warren Beresford, Edward Odoi, and Liz Pollock presented on taking forward Our Health, Our Lambeth health and care plan. The following was discussed:

- Sarah Austin asked how we can make sure that the relevant plans of Guy's and St Thomas' and Kings are played into the health and care plan as well and explained conversations will need to be had to ensure acute trusts are included.
- Dr Raj Mitra asked if there was a way we could have an innovation workshop to plan financially for the future, similar to ones held in the early 2000's.
- Fiona would welcome oversight of all of the budgets as each piece of the system will be struggling financially and noted that we need to consider where do we need to push our money collectively.
- Cllr Jim Dickson mentioned we have a huge increase in demand in the children's and adult's services within the Council. Homelessness is also impacting the Council greatly with a huge increase in demand for temporary accommodation. We are one of the most integrated places in South East London and most integrated in terms of operations and budget, but we need to do more, especially on the prevention side.
- Sue Gallagher explained that some of the solution can come from neighbourhood working and building up our community work. Sue does not believe we have maximised make every contact count, we haven't got the connection quite right between pharmacy and general practice so if we could build on social prescribers and other support, we would do a lot to support people in an inexpensive way. Sue noted that we also miss volunteering opportunities – there are so many obstacles in becoming a volunteer and Sue recognises some of it is statutory, but we could look at how to gain volunteers.
- Paul Coles explained in regard to future planning and contracts held with the voluntary sector, the impact of the commitment to pay the living wage needs to be factored into future planning.
- Rich Wiltshire asked if there would be another presentation to the Board once figures are finalised and service impact is reviewed.
- Warren Beresford explained that at the April Board Seminar, this item will be considered in a lot more detail and a document will be published so members of the public can see that we have progressed. We will adapt and adjust throughout the year and there will be sign off at a Board meeting.
- Ruth Hutt mentioned we need to consider our workforce and remember our workforce will deal with people who are affected by the financial constraints, which could affect their own health, dealing with the stress of those constraints.
- Andrew Eyres summarised that we are in a planning process and some elements still remain uncertain but that positively we have a five-year plan with a clear set of aims and outcomes that we said we wanted to achieve together. We have, within our Alliances and programmes, the means to have those conversations together and deliver change. The challenge for us is, what is realistic in terms of improvement and how do we best live within our means and progress the plan as we would like to.

### **RESOLVED**

- 1. Board members noted the process underway to review and refine our plans, along with the associated timelines.**
- 2. Board members provided feedback on the approach taken and reflect on their role within the planning process.**
- 3. Board members confirmed the commitment from partners to collaborate effectively on executing an impactful plan, taking into consideration financial and resource constraints.**

To view the presentation accompanying this item, refer to pages 57 to 75 of the Board pack.

To view the recording accompanying this item, refer to part 3 of the meeting recording from 0:10 – 35:10.

## **9 Deep Dive – Neighbourhood and Wellbeing Delivery Alliance (NWDA)**

Josephina Reynolds, Chris French, Binki Taylor, Shanet Lewis, Rashida Pickford, and Sara Tarren presented on the work currently being completed by the Neighbourhood and Wellbeing Delivery Alliance. The following discussions took place:

- Cllr Marcia Cameron commented on the amazing work the Alliance is doing and asked, in terms of the evaluation, how does the Alliance collect data on ethnicity and protected characteristics and also, when looking at spaces for events, what was the driver behind choosing those particular spaces.
- Sarah Austin commented on the musculoskeletal item and agreed the need for a health economic evaluation.
- Sue reiterated how important peer support is and wondered if the Alliance could think about groups, not individuals – can we get groups together to help each other and also, receive help from a clinician as well.
- Paul Coles asked how we integrate our clinicians and professionals with our patients to get better outcomes for patients.
- Dan Stoten mentioned that we need to think about how we can get more clinicians out into the community and how this work could be related to children's services as well. Dan noted that he and Simon Boote, Lead for the Children and Young People's Alliance, will have a discussion outside of the meeting with the NWDA to think about this further.
- Fiona Connolly asked how the work will contribute to improving outcomes for people in some of the most basic needs like housing, access to employment, healthy living, etc. as they are the key components that keep people well and asked, will the evaluation give us that data. Secondly, how will the work you are doing help other areas reduce spend in their critical areas. If we are investing more in prevention, we need to see evidence that the work being completed is of a benefit to all.
- Cllr Jim Dickson noted that this is what good community health and prevention work looks like and explained that the constraints we do have is on resource. Cllr Dickson also asked, what more can we do with the health and wellbeing bus – is there more that can be done and what are you planning to do. Shanet explained there are plans in place for the bus and this will be discussed at the next NWDA board to progress that work further.
- Josephina explained that it is all about evaluation and impact and considered how to take all the insight from today's meeting forward. Josephina committed to come back to the Board when more evaluation has been done by the NWDA to present on that and present on the impact.

**Action: Dan Stoten and Simon Boote, to meet outside of the Board meeting with the NWDA to discuss how a similar approach can be considered for children's services.**

**Action: The Neighbourhood and Wellbeing Delivery Alliance to come back to a future Board meeting to discuss the evaluation and impact of the work presented at today's meeting.**

### **RESOLVED**

- 1. Board members noted and discussed the Working with Communities programme for the Alliance.**
- 2. Board members noted the 2022/23 progress report for the Alliance.**

To view the presentation accompanying this item, refer to pages 77 to 88 of the Board pack.  
To view the recording accompanying this item, refer to part 3 of the meeting recording from 35:15 – 1:22:00.

## **10 Questions from public attendees**

- Nicola from the Brixton Patient Group commented on the NWDA presentation and reiterated that it would be great to consider children and young people in the same way, as mentioned by Dan Stoten. Nicola asked if we could have events for young people and their carers where waiting lists for certain conditions is very long.

- Gay Lee asked, in regard to the business planning item and the Unison Ethical Charter paying the living wage, will that be protected and when savings are needing to be made, this will not be affected. Cllr Jim Dickson noted the living wage charter has taken four years to come forward as a lot of work has gone into planning the budgets so Cllr Dickson can give assurance that extensive planning has gone into this piece of work.
- Gay also commented on the use of PowerPoint presentations in the meetings, as they are very small and difficult to read and the use of microphones in meetings as it can be difficult to hear certain speakers. Cllr Jim Dickson agreed this would be considered for future meetings.

To view the recording accompanying this item, refer to part 3 of the meeting recording from 1:22:15 – 1:28:43.

## **11 AOB**

The date of the next Lambeth Together Care Partnership Public Board meeting was confirmed as 9<sup>th</sup> May 2024, changed from the original date of 2<sup>nd</sup> May 2024, due to the elections, and will be held virtually.

The meeting ended at 17:00.

CHAIR  
LAMBETH TOGETHER CARE PARTNERSHIP BOARD  
Thursday 21 March 2024

## Lambeth Together Care Partnership Board

<b>Title</b>	Lambeth Together Place Executive Lead Update
<b>Meeting Date</b>	09 May 2024
<b>Author</b>	Andrew Eyres – Strategic Director, Integrated Health and Care Ruth Hutt – Acting Place Executive Lead Lambeth, Corporate Director, Integrated Health, and Care, Lambeth Council and South East London Integrated Care Board
<b>Lead</b>	Ruth Hutt – Acting Place Executive Lead Lambeth, Corporate Director, Integrated Health, and Care, Lambeth Council and South East London Integrated Care Board

### This item is for:

<input checked="" type="checkbox"/>	<b>Information</b>	<input type="checkbox"/>	<b>Discussion</b>	<input type="checkbox"/>	<b>Decision</b>	<input type="checkbox"/>	<b>Ratification</b>
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### Recommendations:

The Lambeth Together Care Partnership Board is asked to:

1. Note an update on key developments since the formal Lambeth Together Care Partnership (LTCP) Board meeting in public on 21<sup>st</sup> March 2024

### What other groups or committees have considered this item to date?

N/A. Individual items addressed at various fora.

### Summary and Impact on Inequalities

An update to the Lambeth Together Care Partnership Board (LTCP) from the Lambeth Place Executive Lead Andrew Eyres, reporting on key issues, achievements, and developments from across our Partnership.

## Lambeth Together Care Partnership

### Place Executive Lead Report 9<sup>th</sup> May 2024

**Andrew Eyres – Corporate Director, Integrated Health and Care**



#### **‘Our Health Our Lambeth’, Health and Care Plan – One Year On**

We are soon approaching a significant milestone as we mark one year since our Health and Care Plan, [‘Our Health, Our Lambeth 2023-2028’](#) was agreed by the Lambeth Together Care Partnership (LTCP) Board, May 18 2023. Work continues to refine and evaluate our first delivery year, reflecting on the ways we work and what our staff, partners and residents need, to help us deliver on the outcomes and ambitions that we committed to just under a year ago.

At the LTCP Board meeting in May 2024, we will be asking our Board to approve the first annual review and our planned activities for 2024/25. It will also be an opportunity for the board to reflect and acknowledge the many significant achievements that we’ve achieved by working together throughout the year. Additionally, we’ll have the privilege of hearing directly from service users who will share their experience and enable insight into how collaborative working between our partner organisations has impacted their health. As we near the completion of our annual review and prepare for the upcoming year, we extend our heartfelt appreciation to all those who have contributed to our collective progress.

#### **Our Governance and Leadership**

Our Lambeth Together leadership has seen a few changes in the recent months. At our last Board meeting in March we said goodbye to two retiring Board members, our Board Lay Member Sue Gallagher and also Sarah Austin, Chief Executive of Integrated and Specialist Medicine at Guy's and St Thomas' NHS Foundation Trust. We thank both for their many years of service to the NHS and to our Lambeth residents.

Additionally, new executive appointments last month have established further changes to our Board leadership. Cllr Marcia Cameron has been appointed as Cabinet Member for Economic Inclusion and her previous appointment, Cabinet Member for Healthier Communities - a job share with Cllr Dickson, is now taken up by Cllr Jacqui Dyer. These changes mean that Cllr Dyer will now also take up Cllr Cameron's Board member position on the Lambeth Together Care Partnership Board. I would like to thank Cllr Cameron for her fantastic contributions to the Lambeth Together Care Partnership (LTCP) Board and also now warmly welcome Cllr Dyer whose profound expertise in addressing inequalities and championing culturally appropriate mental health services resonates deeply with our mission.

Following the success of CCPLs (Clinical and Care Professional Leads) in Lambeth Together over the last two years, we are looking to appoint our cohort of CCPLs to take up leadership roles in a wide range of areas across health and care in Lambeth. A clinical and care professional leader is someone who supports people to work together across organisations and professions to improve the health and wellbeing of people in their patch. The roles provide a brilliant opportunity to shape and influence the future direction of integrated health and care in the borough of Lambeth and take a key role in the development of our Alliances and Local Care Partnership.

#### **System Pressures**

For the health and care system in all care settings, across the country, the considerable pressure from the level of demand for unplanned care and the need to ensure ongoing recovery of planned activities and elective care waiting times continues. Positively, consultants voted on 5 April to accept the governments revised offer, however junior doctors have supported continued strikes until 19 September 2024 although no further dates of industrial action have been released. The increase in demand for mental health support, presenting in general practice and in community teams and through our emergency departments, including from non-local residents has also continued and we are working across the different care settings to respond to the challenges this has placed on all partners.

The 111 Press 2 for Mental Health Service, the new South London-wide service which supports residents who are in mental health crisis to be able to access mental health care, was operational across 24 hours in South East London from February 2024. Patients can talk to an experienced call handler and, if needed, with their local Mental Health Crisis Line (for Lambeth – 0800 731 2864). The implementation of this service represents an increase in the number of mental health clinicians who will triage, refer-on, and offer advice and guidance to those needing crisis support.

### **Equality, Diversity and Inclusion (EDI) Group**

The London Inspire Programme, co-led by Lambeth's Associate Director for Community Engagement, Juliet Amoa, organised the first-ever Black Health Inequalities Summit at the Royal Society of Medicine on March 25th. More than 400 guests attended the summit, which focused on addressing health gaps among Black Londoners. Professors Kevin Fenton and Bola Owolabi delivered important speeches at the event. The summit was sponsored by Impact on Urban Health, who will also partner with our NHS South East London Integrated Care Board to fund projects focused on improving the health of Black South East Londoners. Our local Lambeth Inspire Health and Wellbeing Day will be back this year, happening at St. Mark's Church in Kennington on July 6th.

To uphold our commitment to equality and inclusion, the Lambeth Together Equality, Diversity, and Inclusion (EDI) group proposed using a crib sheet to ensure that all our work undergoes scrutiny through an EDI lens. This proposal was presented to our executive group in early April and is currently being reviewed for implementation into our regular business operations. Additionally, the group has continued to meet and has received presentations from the Brixton and West Norwood Women's Health Networks. They have also been engaging in ongoing discussions about EDI, particularly focusing on disparities in access, experiences, and outcomes in healthcare for our residents.

Since 2022, South East London Integrated Care Board (SEL ICB) has been allocating funding targeted at addressing health inequalities - aligning with our collective priorities for enhancing health and care services and reducing the inequalities experienced by our community. Lambeth has received funding for the years 2022/23 and 2023/24 and will once again receive funding for the year 2024/2025. This renewed funding will enable us to continue our efforts in conjunction with existing strategies, utilising data on health disparities within our borough. The health inequalities funding represents an exciting opportunity to make significant strides towards our overarching goals as outlined in 'Our Health and Our Lambeth' through collaborative endeavours and targeted interventions.

### **Our Delivery Alliances – a selection of highlights**

**Living Well Network Delivery Alliance (LWNA):** I'm pleased to report that the LWNA's 7 year contract has been extended by a further 3 years (until 31st March 2028) following formal sign off by each of the 5 Alliance organisations in March. The focus for the LWNA is to develop a new business plan to meet current challenges, continue to develop the Alliance model of mental health support and prepare to make the case for a new contract from 2028.

I am also pleased to announce the appointment of Dr Lorraine Gordon as the Interim Alliance Director. Lorraine is a Consultant Counselling Psychologist with over 25 years' experience in the NHS. Her most recent post was Head of Psychology and Psychotherapy for Southwark adult mental health. She was the

staff senior lead for the Patient and Carer Race Equality Framework (PCREF) in Southwark and Trust psychology and psychotherapy PCREF lead.

Finally, the LWNA co-hosted (with the South London and Maudsley Trust) a visit by Liz Kendall MP, the Shadow Secretary of State for Work and Pensions, on 21st March. After meeting with senior Trust staff at the Maudsley, the Secretary of State (SofS) spent well over an hour at Mosaic Clubhouse where she was briefed by respective colleagues on employment support for those with mental health issues. Specifically, she was briefed on: Transitional Employment Placements in Mosaic, Lambeth's Individual Placement Support scheme and the Employment Advisor service offered by Lambeth's Talking Therapies service. The SofS was very engaged with the presentations, asking lots of questions, and indicated that one of her priorities, should be in the position to do so, would be to ensure greater DWP support and engagement at a local level for such initiatives.

**Children and Young People Delivery Alliance (CYP):** The Children and Young People Alliance continued its dedicated efforts to enhance maternity services in Lambeth. The Alliance worked closely with the local maternity and neonatal system to develop a Lambeth Maternity Scorecard. This tool now monitors maternity performance, enabling effective collaboration with partners to deliver services that are both community-specific and exemplary.

In March, the Alliance, along with maternity system partners, reported on various provider-led initiatives in equality, diversity, and inclusion. Senior leaders from Evelina London Women's Services, King's College Hospital Maternity Services, and Lambeth Clinical Care Leads presented updates on current initiatives, future plans, and the anticipated benefits of the new electronic patient record system adopted by the trusts.

Additionally, the Alliance worked with the Lambeth Early Action Partnership to ensure that the services developed are sustainable. The partnership's unique data platform remains central to our strategic planning, providing deeper insights into maternity care and its impact on the early development of Lambeth's children.

Lastly, planning around children's emotional well-being and mental health services was advanced. In March, an update was provided along with a plan for the delivery of these services in 2024-2025. The Alliance also collaborated with integrated children's commissioning colleagues to develop a forward-thinking, robust plan for the innovation of children's mental health services.



*Gladys, a local patient, with Vicky, physiotherapist, and Rachael, Advanced Therapy Assistant*

**Neighbourhood and Wellbeing Delivery Alliance (NWDA):** On Friday 16 March 2024, Lambeth hosted its inaugural Musculoskeletal (MSK) Community Day at the Black Prince Trust's community hub in Kennington, drawing 250 people from local MSK physiotherapy waiting lists. The event, an initiative by Guy's and St Thomas' NHS Foundation Trust, and supported by the Lambeth Together Neighbourhood Wellbeing Delivery Alliance, offered participants a unique blend of clinical consultations and access to a range of services provided by charities and local organisations like Versus Arthritis, Age UK, Mind and Citizens Advice. Attendees started their experience at the 'Conversation Café', discussing their personal health concerns with clinicians before exploring the main hall's diverse service offerings. The day was praised for its comprehensive approach to addressing both physical and psychological aspects of musculoskeletal conditions. Gareth Jones, an Advanced

Practice Physiotherapist, highlighted the broader social challenges participants face, such as isolation and psychological distress. Josepha Reynolds from the Neighbourhood and Wellbeing Delivery Alliance emphasised the event's role in fostering community engagement and holistic support, aiming to empower individuals to manage their health with extensive community-based support. Feedback from participants underscored the event's success in broadening awareness and access to essential health services, showcasing effectiveness in enhancing patient care and community wellbeing.

## Lambeth HEART

The Lambeth HEART team recently hosted an Anti-Racism and Public Health talk by Dr Camara Jones at Brixton House Theatre. Dr Camara Jones is a family physician, epidemiologist, and was the President of the American Public Health Association whose work focuses on naming, measuring, and addressing the impacts of racism on the health and well-being of the United States and the world. This discussion shed light on the root causes of health inequalities in Lambeth, empowering us to address these issues proactively.

## Beacon Project on BBC One

Last month, Songs of Praise – Mind, Body and Soul, featured the Beacon Project which aired Sunday 7th April at 1.15pm on BBC One and is available to watch online on BBC iPlayer <https://www.bbc.co.uk/programmes/m001y4dr>. This was a great opportunity to highlight the outreach work Beacon Project undertakes to address health inequalities that we are all very familiar with.

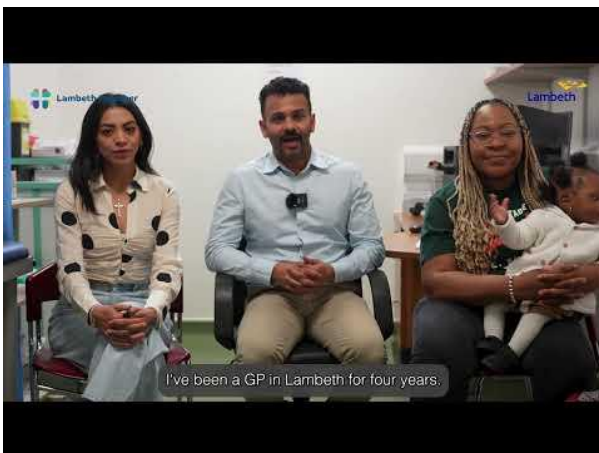
## South East London (SEL) Public Health

Last month, the Public Health teams across South East London came together in person for the first time since before the pandemic. We heard from colleagues at Kings College London and London Southbank University who are keen to foster stronger relationships with local teams to strengthen local research. Borough teams had the opportunity to share some of the innovation going on across SEL and enjoyed the opportunity to meet face to face. We will continue to keep you updated with our progress with these reestablished meetings.

## Health Improvement and Disparities

Last month we hosted a visit from the Office for Health Improvement and Disparities (OHID) who were interested in hearing from Lambeth about how we are supporting young people with substance misuse challenges. Dan Stoten and Ruth Hutt from Lambeth Council joined colleagues as they talked about the work to involve young people in the development of the local service offer, working closely with Youth Justice Service, Children and Adolescent Mental Health Services, the Well Centre, and the supported housing offer to young people. Our OHID visitors were incredibly impressed with our partnership approach and joint working on the ground. A big thanks to all those who came and presented and made the visit a success. Our inputs will help inform a national Service Delivery Framework for young people's substance misuse services which is being developed by OHID.

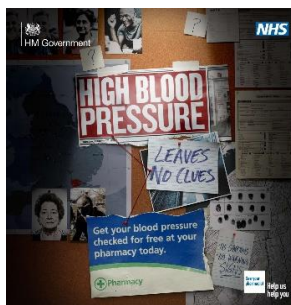
## Key Campaigns for Lambeth Together



Key campaigns activity for Lambeth Together has focused on raising awareness of the importance of immunisation against measles, especially for children and younger adults who have not received a first vaccination or who've missed their second dose. Measles is still circulating, and the risk remains a concern in Lambeth and across London. Prevention is a high priority for Lambeth partners, given that one in five children who contract measles requires a hospital visit. You can see our locally developed [MMR/Measles awareness video](#) and you are encouraged to share across your networks and organisations.

Throughout Bowel Cancer Awareness Month in April, we promoted the uptake of bowel cancer screening among eligible Lambeth groups. The local campaign particularly encourages Black men to take up the screening invitation, since uptake among this group is low. We also used this as an opportunity to spread the word about prostate cancer using resources produced featuring local barber Isaac, who works alongside AT Beacon Project to share health advice with visitors to his shop in Streatham.

Booking opened for seasonal Covid vaccination in April for those aged 75 plus and people with a range of conditions that make them more vulnerable in regard to Covid-19. Promotional activity is targeted towards these groups. We continue to raise awareness about the risks of high blood pressure, highlighting the availability and convenience of testing in community pharmacies. This will continue throughout 'May Measurement Month', where we have an enhanced blood pressure checking service at the Lambeth Together Health and Wellbeing Bus.



## Lambeth Together Care Partnership Board

<b>Title</b>	Staying Healthy Deep Dive: NHS Health Checks
<b>Meeting Date</b>	May 09 2024
<b>Author</b>	Adrian Johnson (Acting Lead Commissioner, Health Improvement) Lambeth Council
<b>Lead</b>	Ruth Hutt (Director of Public Health)

**This item is for;**

<input checked="" type="checkbox"/>	<b>Information</b>	<input checked="" type="checkbox"/>	<b>Discussion</b>	<input type="checkbox"/>	<b>Decision</b>	<input type="checkbox"/>	<b>Ratification</b>
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**Recommendations;**

The Lambeth Together Care Partnership Board is asked to;

1. Note and discuss the deep dive into the NHS Health Checks programme
2. Provide feedback and questions to the team to support programme development and delivery going forward.

**What other groups or committees have considered this item to date?**

Public Health Senior Management Team

### Summary and Impact on Inequalities

The NHS Health Checks programme is a national prevention programme designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes or dementia. Risk of cardiovascular disease (CVD) morbidity and mortality is greater amongst males, minority ethnic groups, and those living in more deprived areas. Reviews of the NHS Health Check programme indicate men and those living in areas of higher deprivation are less likely to take up an NHS health check.

The Lambeth population that are eligible for an NHS Health Check includes around 80,000 people. Within this cohort, 45% are female, and 55% are male. More of the cohort falls into the younger age categories, with 51% between 40-49 years, 32% 50-59 years, 14% 60-69 years, and 2.7% 70-79 years. This presents more opportunity to pick up risk factors at an earlier stage and start prevention. The cohort is distributed across a range of ethnic groups, with the most from White 55% (26% White Other), Black 20% (10% Black African), and Asian 7%. 57% of the cohort live in areas which are in the 40% most deprived IMD deciles in England, with 27% living in the two most deprived deciles.

Public Health commissioners have been working with primary care leads over the last year to develop and improve the programme, particularly to target the groups at highest risk of cardiovascular disease and associated long-term conditions (LTCs) in order to improve uptake and outcomes, including referral to prevention services where appropriate.

# Staying Healthy Deep Dive

## NHS Health Checks



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# NHS Health Checks

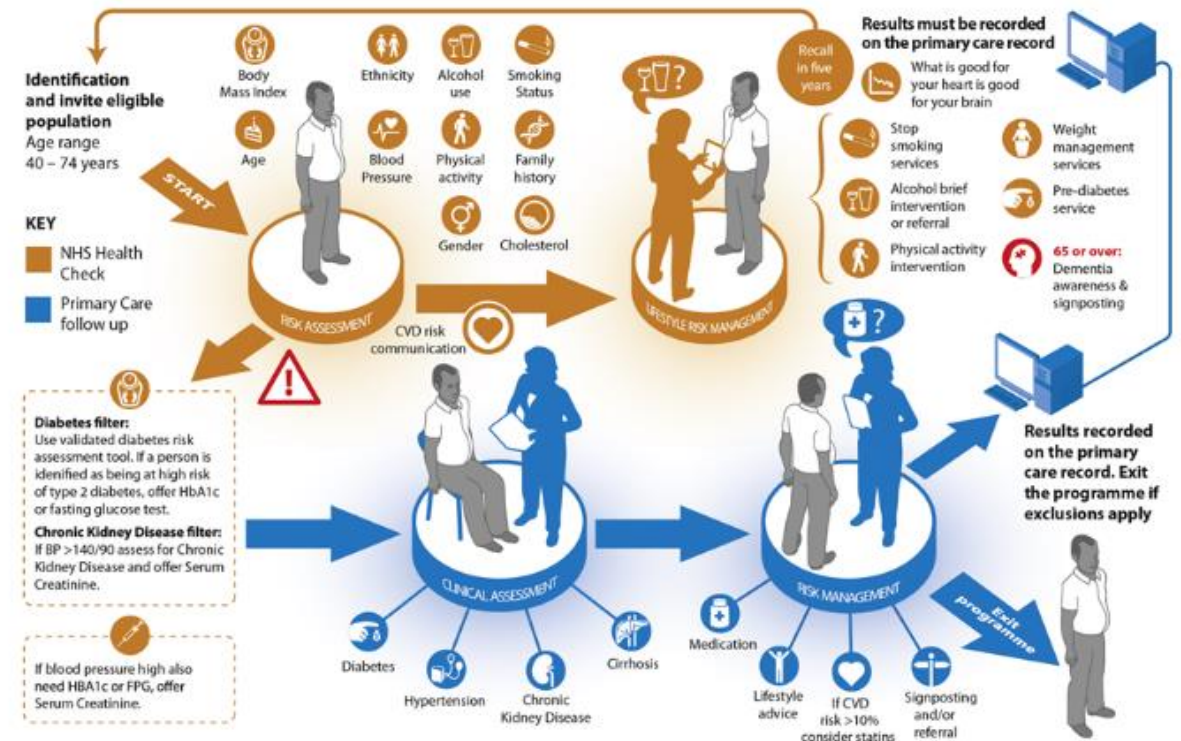


## Purpose

- Launched in 2009 as a national prevention programme to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes or dementia.
- Adults aged 40 to 74 who have not been diagnosed with certain pre-existing conditions\*.
- Since 2013 local authorities became responsible for NHS Health Checks and the Call and Recall.
- A check includes an assessment of:
  - smoking status
  - alcohol consumption
  - physical activity
  - weight
  - blood pressure
  - cholesterol
  - diabetes risk
  - 10-year cardiovascular disease risk (likelihood of stroke or heart attack in the next 10 years)

Early identification of risk and disease;  
opportunity to promote health & wellbeing

## NHS Health Check



# Health Checks aims and outcomes



- National targets:
  - Invite 100% of eligible population once every 5 years
  - Work towards achieving 75% uptake of eligible population every 5 years, demonstrating continuous improvement
- Improve identification and better management for those living with undiagnosed long-term conditions (LTCs).
- Reduction in prevalence of LTCs through better prevention and improved health behaviours.
- Referral to prevention services where appropriate e.g. smoking cessation and weight management.
- Effective prescribing for people with early signs of cardiovascular disease (CVD) and diabetes.





# Lambeth Together Health and Care Plan

## Outcome: People receive early diagnosis and support for physical health conditions

### Activity:

- Redesign the NHS Health Checks programme to ensure a focus on improving uptake for those at most risk, by focusing on outreach and delivery in community settings.
- Target health inequalities by increasing uptake of NHS Health Checks and improving referral/diagnosis rates for those with highest risk.
- Align to the Vital 5 prevention work in community settings.

## Outcome: People maintain positive behaviours that keep them healthy

### Activity

- Use NHS Health Check to improve routine identification of smokers and those at greatest risk of obesity, providing brief advice and referral to relevant services.
- Work with local communities, voluntary sector, Primary Care Networks (PCNs) and other partners to ensure residents have access to advice and support in community settings to stay well.



# 2019-20 programme evaluation



## Findings

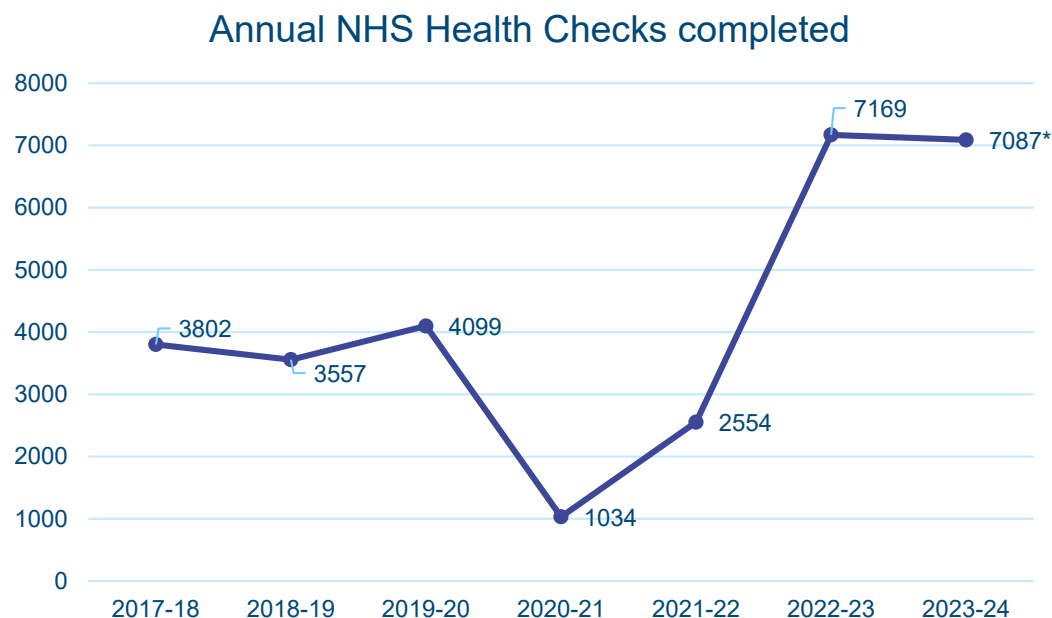
- Uptake largely in line with population demographics.
- Poor uptake and declining rate of invitations.
- Cohorts with significant risk factors identified but referral pathways and follow up not maximised.
- Difficult to understand equity and impact without robust dataset

## Recommendations

- Greater focus on risk stratification and targeting of invites as well as outreach and engagement activity
- Performance data dashboard for practices/networks to benchmark against each other and Local Authority maintains oversight
- Recruit clinical/service champions to oversee and improve service quality



# Lambeth Health Check activity



\*2023-24 includes pre-validated Q4 data subject to final contract monitoring

## Health Checks by Qrisk (risk of having a stroke or heart attack in next 10 years):

- 81% Low risk - less than one in ten chance
- 15% Moderate risk – between one to two in ten chance
- 4% High risk – at least two in ten chance

## Health Check Outcomes:

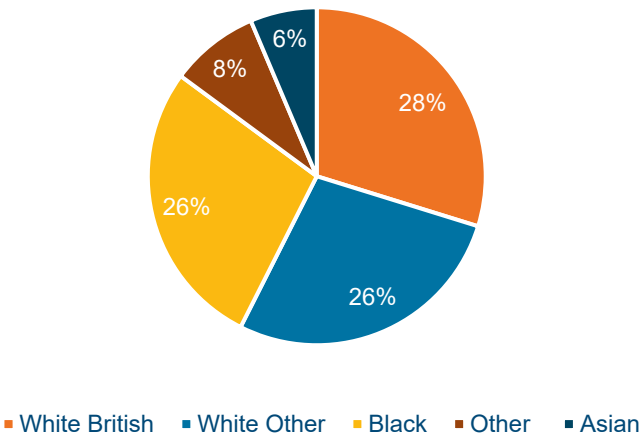
- ~15% referred to lifestyle services or prescribed medication.
- ~4% diagnosed with hypertension, diabetes or chronic kidney disease.



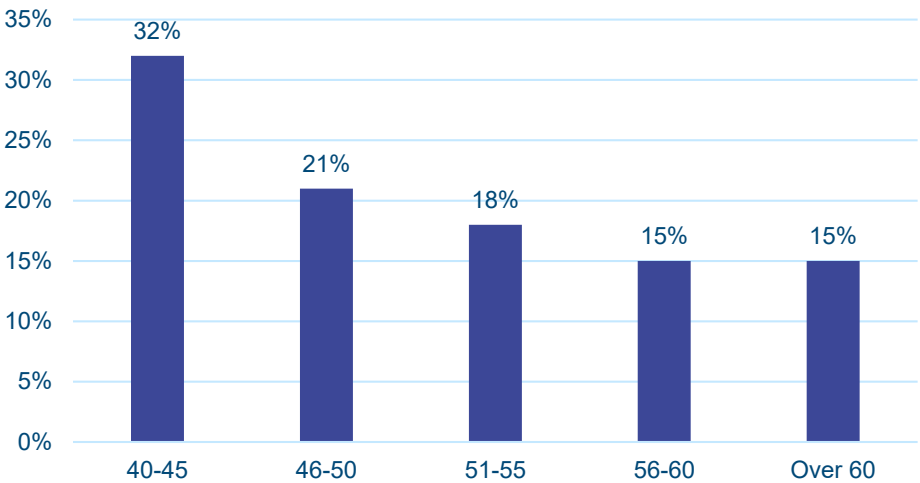
# 2023/24 Health Check demographics



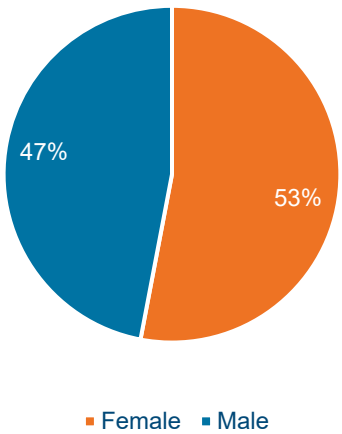
NHS Health Checks by ethnicity



NHS Health Checks by age



NHS Health Checks by gender



# Patient engagement



- Carried out in August and September 2023.
- To understand patient experiences of the NHS Health Check:
  - ease of booking, accessibility and invites
  - understanding the purpose, process and outcomes of a Health Check
  - preferences around delivery (GP practice, pharmacy, online, community setting)
  - motivations to have a HC / why someone didn't attend
- For both those who have and haven't had a Health Check.
- Promoted through Lambeth Council, Lambeth Together and other key stakeholder comms channels.
- 208 survey responses received.



# Patient engagement



- Despite more people not receiving invites, those who were invited generally attended.
- High levels of interest in having a Health Check (92%).
- Strong preference to have the Health Check at their GP Practice (88%).
- Attendees generally found the process and purpose clear and easy.
- Important considerations are receiving an invite and being able to book an appointment at a convenient time and nearby location.
- Reasons why people didn't take up an invite included not wanting to be 'told off' about their health and seeing the check as box ticking.
- Aligns with broader research and engagement findings on barriers to access e.g. AT Beacon Hubs, Health & Wellbeing Bus.



# Service delivery model re-design



- April 2024 implemented a new model led by 9 Primary Care Networks (PCNs).
- Updated service specification including clearer referral pathways & nominated PCN leads.
- Co-development of an at-scale PCN offer during 2024-26:
  - strengthen primary care capacity
  - improve consistency across the borough
  - reach more underserved groups
- Improved data monitoring dashboard on EZ Analytics (May 2024).



# Next steps



- Training Needs Assessment and training programme rollout for Health Care Assistants
- Quality assurance to embed and maximise referral pathways
- Public Health led programme evaluation and individual practice level audit of cases
- Opportunities for outreach and community delivery to improve access
- Explore inclusion of additional testing e.g. Hepatitis B, Hepatitis C and HIV



# Questions?



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# Appendix: National Review of NHS Health Checks

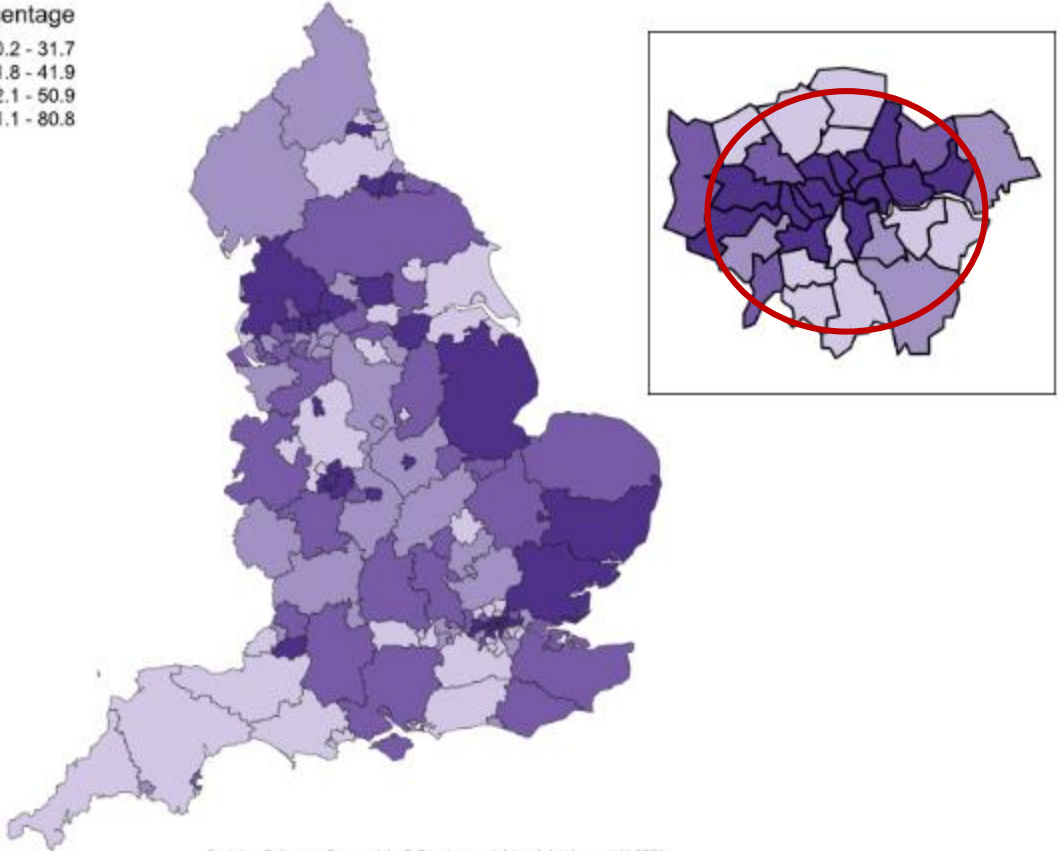
Preventing illness and improving health for all: a review of the NHS Health Check programme and recommendations - GOV.UK ([www.gov.uk](http://www.gov.uk))



## Low uptake

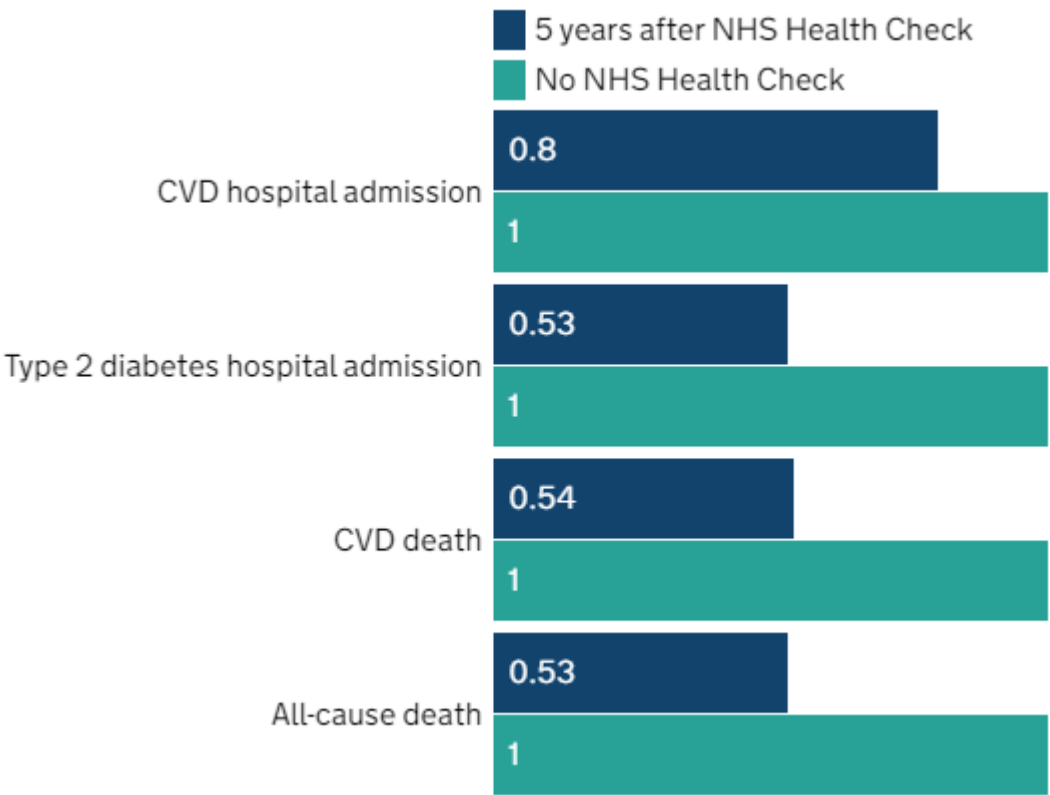
Percentage

- 10.2 - 31.7
- 31.8 - 41.9
- 42.1 - 50.9
- 51.1 - 80.8



Contains Ordnance Survey data © Crown copyright and database right 2021.

## Adjusted odds ratio for hospital admissions and death among NHS Health Check attendees compared to non-attendees, 2012 to 2018



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# Appendix: Hypertension as a case study



## Key Facts

- 3<sup>rd</sup> biggest risk factor for premature death and disability, after smoking and diet
- Over half the cases of IHD and stroke are caused by HTN
- Increasing national prevalence
- 5 million cases undetected in England

## Risk Factors

- Non-modifiable: age, gender(m>w up to 65y), ethnicity, family history
- Modifiable: Excess weight, excess dietary salt intake, lack of physical activity, excessive alcohol intake, stress, deprivation



# Appendix: Ranked risk factor prevalence among attendees, by ethnic group, 2012 to 2017

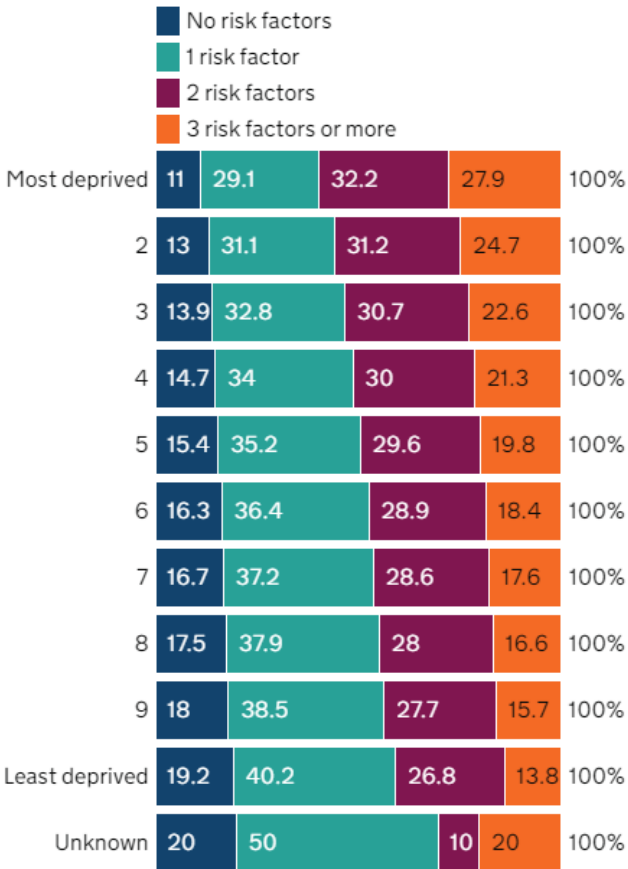
Rank	White	Bangladeshi	Indian	Pakistani	Chinese	Other Asian	Black African	Black Caribbean	Other/mixed
1 most common	High TC	Low PA	Low PA	Low PA	Low PA	Low PA	High BMI	High BMI	Low PA
2	High BMI	High BMI	High BMI	High BMI	High TC	High BMI	Low PA	Low PA	High BMI
3	Low PA	High TC	High TC	High BP	High BP	High TC	High BP	High BP	High TC
4	High BP	High BP	High BP	High TC	High BMI	High BP	High TC	High TC	High BP
5	Smoker	Diabetes	Diabetes	Diabetes	Diabetes	Diabetes	Diabetes	Diabetes	Diabetes
6	Diabetes	Smoker	Smoker	Smoker	Smoker	Smoker	Smoker	Smoker	Smoker
7	Alcohol	Fam hist CVD	Fam hist CVD	Fam hist CVD	Fam hist CVD	Fam hist CVD	Fam hist CVD	Alcohol	Fam hist CVD
8 least common	Fam hist CVD	Alcohol	Alcohol	Alcohol	Alcohol	Alcohol	Alcohol	Fam hist CVD	Alcohol

# Appendix: National Review of NHS Health Checks

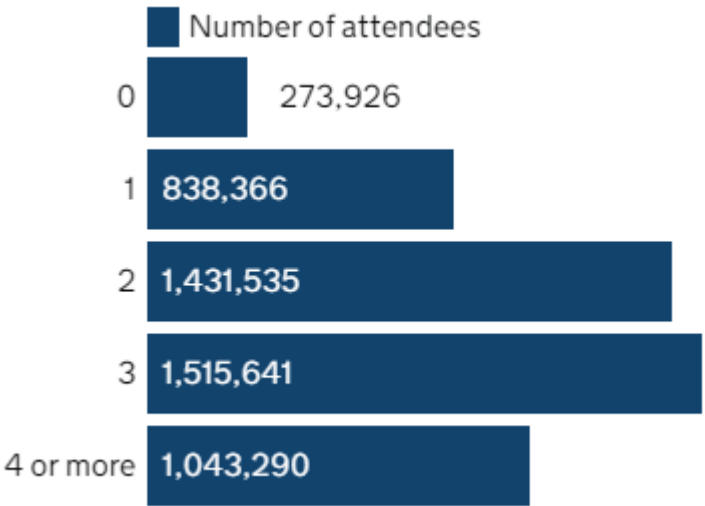
Preventing illness and improving health for all: a review of the NHS Health Check programme and recommendations - GOV.UK ([www.gov.uk](http://www.gov.uk))



## Number of risk factors by deprivation



## Number of modifiable risk factors among NHS Health Check attendees, 2012 to 2017



## Lambeth Together Care Partnership Board

<b>Title</b>	<b>HIV Testing in Primary Care and National HIV Testing Week</b>
<b>Meeting Date</b>	09 May 2024
<b>Author</b>	Alex Wicking, Senior Commissioning Officer
<b>Lead</b>	Nancy Padwick, Lead Commissioner Jess Engen, Consultant in Public Health

**This item is for;**

<input checked="" type="checkbox"/>	<b>Information</b>	<input checked="" type="checkbox"/>	<b>Discussion</b>	<input type="checkbox"/>	<b>Decision</b>	<input type="checkbox"/>	<b>Ratification</b>
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**Recommendations;**

The Lambeth Together Care Partnership Board is asked to;

1. Note the work carried out during National HIV Testing Week and the key findings
2. Consider the recommendations made

**What other groups or committees have considered this item to date?**

This item has not yet been considered by other groups or committees. A similar item was presented at the South London HIV Network to showcase Lambeth's achievements during National HIV Testing Week.

**Summary and Impact on Inequalities**

Lambeth has the highest prevalence of HIV in England and a high rate of new HIV diagnoses. Lambeth has a lower percentage of late diagnoses of HIV compared to England. As is the trend nationally, there was a higher percentage of late diagnosis in heterosexual men and heterosexual women compared to gay and bisexual and other men who have sex with men (GBMSM) in Lambeth.

This presentation highlights the activities carried out during National HIV Testing Week (NHTW) with the aim to increase HIV testing in primary care. This involved engaging with the public to understand their knowledge and perception of HIV; promoting testing and working with GP practices to add HIV test to routine blood tests.

Engagement revealed several areas where HIV literacy and awareness can be improved, especially around testing and prevention. Testing during NHTW increased and the impact of different methods to increase testing are discussed throughout the presentation.

The presentation highlights the importance of HIV testing in primary care and recommends that colleagues consider implementing models of opt-out HIV testing with routine blood tests in primary care



**Lambeth  
together**



# **HIV Testing in Primary Care and National HIV Testing Week**

Lambeth Together Care Partnership Board

9 May 2024

# Contents

1. HIV Landscape
2. National HIV Testing Week
3. Wider HIV Testing initiatives
4. Key Learnings

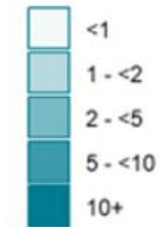


# HIV Landscape in Lambeth

- In 2022, there were 2,819 Lambeth residents aged 15 to 59 years and 3,367 residents aged 15 years and over who were seen at HIV services (the prevalence of diagnosed HIV).
- The diagnosed prevalence per 1,000 residents aged 15 to 59 was 12.2, compared to 2.3 per 1,000 in England. Lambeth had the highest rank.
- The rate of new diagnoses per 100,000 residents was 28.3, worse than the rate of 4.3 per 100,000 in England. The rank of Lambeth for the rate of new HIV diagnoses was 2nd highest.
- In Lambeth, the percentage of HIV diagnoses made at a late stage of infection in the three-year period between 2020 - 22 was 34.8%, better than 43.3% in England.



Diagnosed HIV prevalence per 1,000 residents



**HIV prevalence in Lambeth by MSOA in 2020**

Source: UKHSA SPLASH report 2024



# Commitment in Lambeth

- **Lambeth 2030 and manifesto commitment**

- We will continue to play a leading roll in reducing new transmissions of HIV in Lambeth, end the stigma around those living with HIV and support the roll out of PrEP medication

- **Lambeth Together Health and Care Plan: Our Health, Our Lambeth (2023-2028)**

- People have healthy and fulfilling sexual relationships and good reproductive health
- Specific activities outlined under the following areas:
  - Preventing STIs
  - Abortion and Reproductive Health Services
  - Increased access to contraception and LARC
  - Other sexual and reproductive health and HIV work (including PrEP)

- **LSL Sexual and Reproductive Health Strategy (2019-2024)**

- Healthy and fulfilling sexual relationships
- Good reproductive health across the life course
- High quality STI testing and treatment
- Living well with HIV

# National HIV Testing Week





**Lambeth  
together**

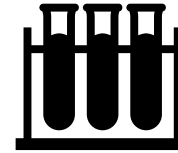
# National HIV Testing Week 2019



Patient attends  
and bloods  
requested via  
primary and  
secondary care



Patient attends  
for blood test at  
phlebotomy  
sites



Blood tests  
processed in  
the laboratory



Results

## Data Activity

1050 tests compared to 198 patients  
the year before in primary care

2 known positives

↑530%

1909 HIV tests in GP and Outpatients  
compared to average 542

11 known positives

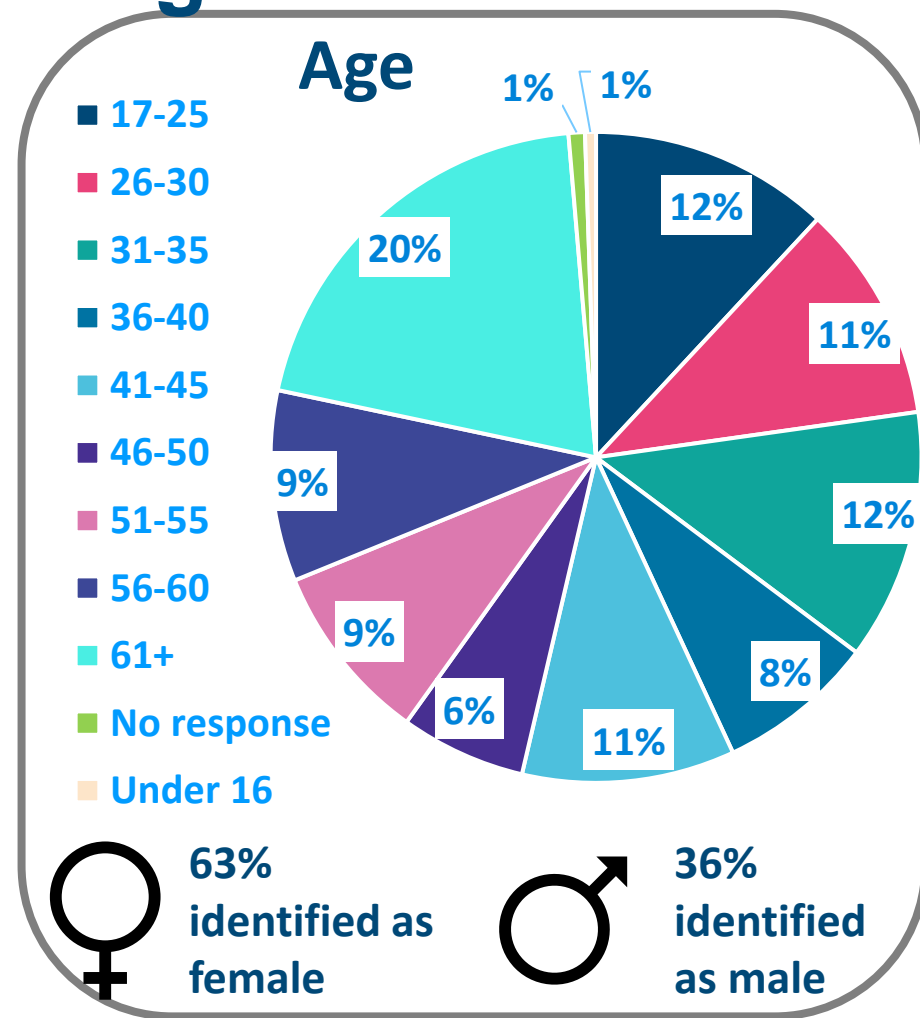
↑352%



# HIV Engagement during NHTW

Staff and volunteers visited the eight main phlebotomy sites in LSL to opportunistically engage with the public on perception and knowledge of HIV.

Of the 369 survey respondents, we engaged a diversity of age ranges. The highest representation was the 61+ category (20%) with the lowest among the 46-50 category (6%). Majority of respondents were white heterosexual women with the lowest turnout among men of Latin American and other ethnicity and gay/lesbian women (under 1%).



# HIV Engagement during NHTW

## Knowledge on HIV

**72%** knew the difference between HIV and AIDS whereas **25%** did not know HIV stood for 'human immunodeficiency virus'

## Knowledge on testing

**76%** knew how to get a HIV test online or via GP yet **38%** not know of the frequency of testing recommendations

## Knowledge on transmission

**69%** believed HIV could not be transferred by kissing, toilet or bathroom facilities, touching or sharing food

## Knowledge on prevention

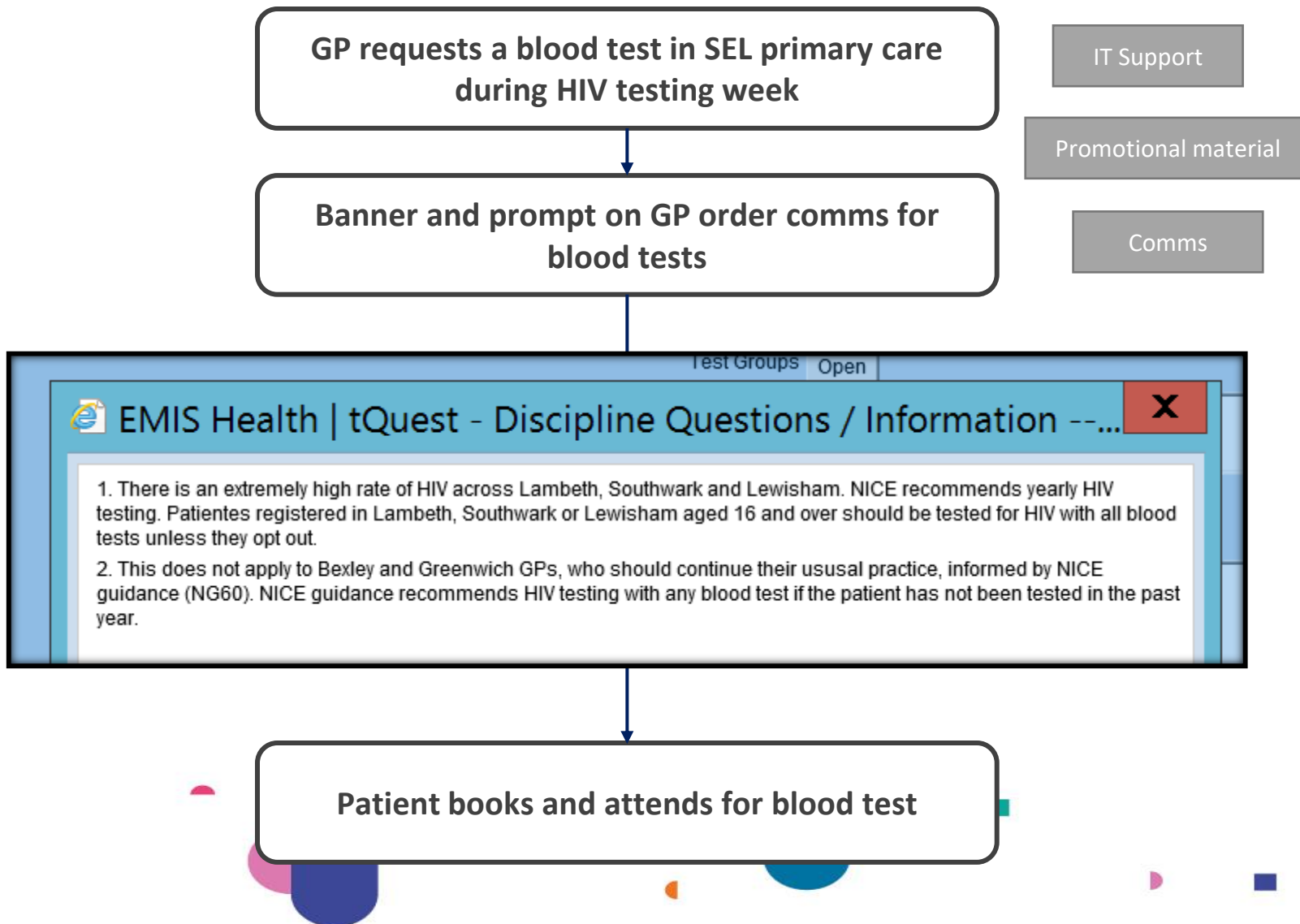
**63%** did not know about PEP

**53%** reported they did not know 'PrEP is a pill that can prevent people from passing on HIV', and **37%** of respondents were aware that PrEP could prevent people from transmitting HIV

**76%** of respondents were aware of condom usage preventing HIV transmission

On the statement 'someone on effective HIV medication with an undetectable viral load cannot pass on HIV' - **41%** reported as true, **27%** reported as false, **31%** did not know

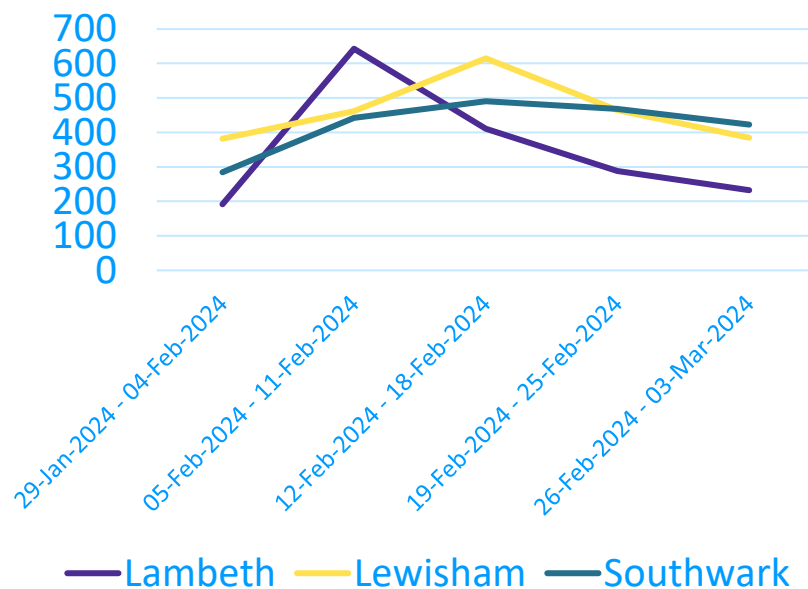
# Primary care testing during NHTW



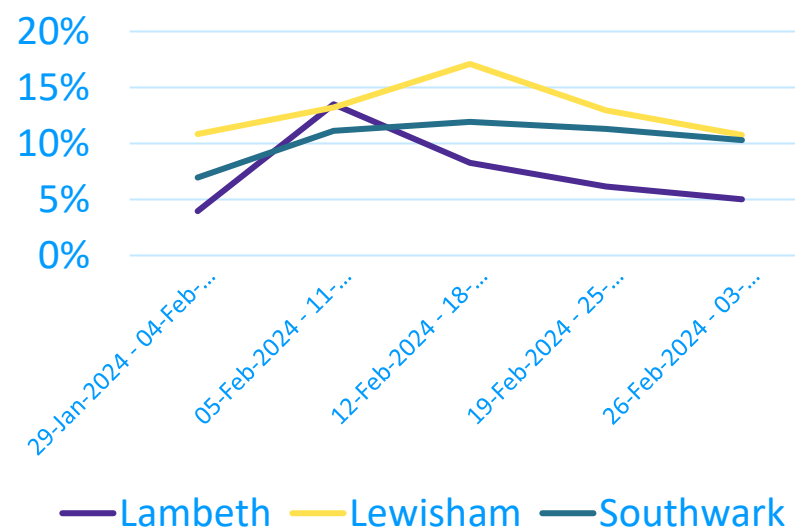


# Primary care testing during NHTW

Number of people aged 16  
who has an HIV test



Percentage of people aged 16  
or over who had a blood test  
including an HIV test

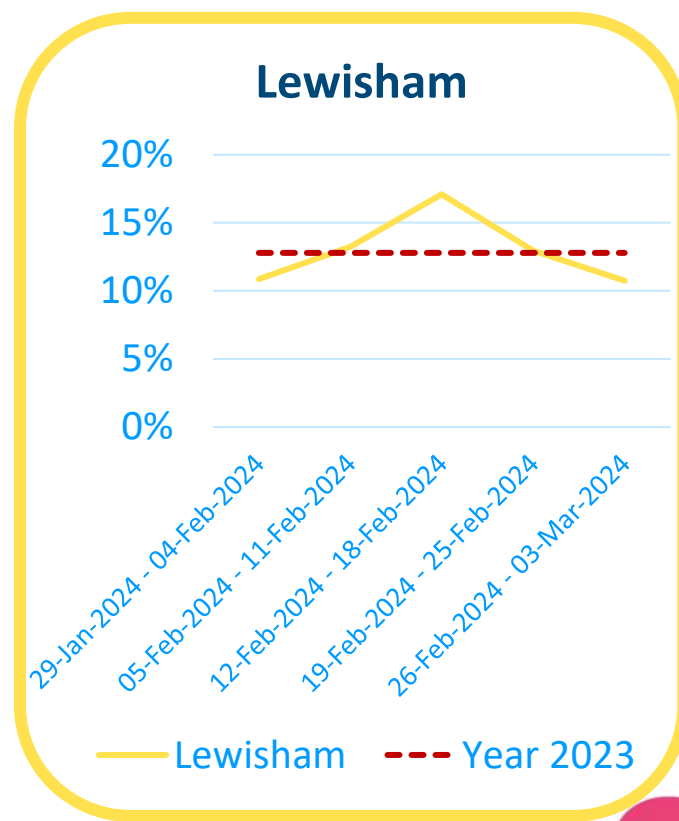
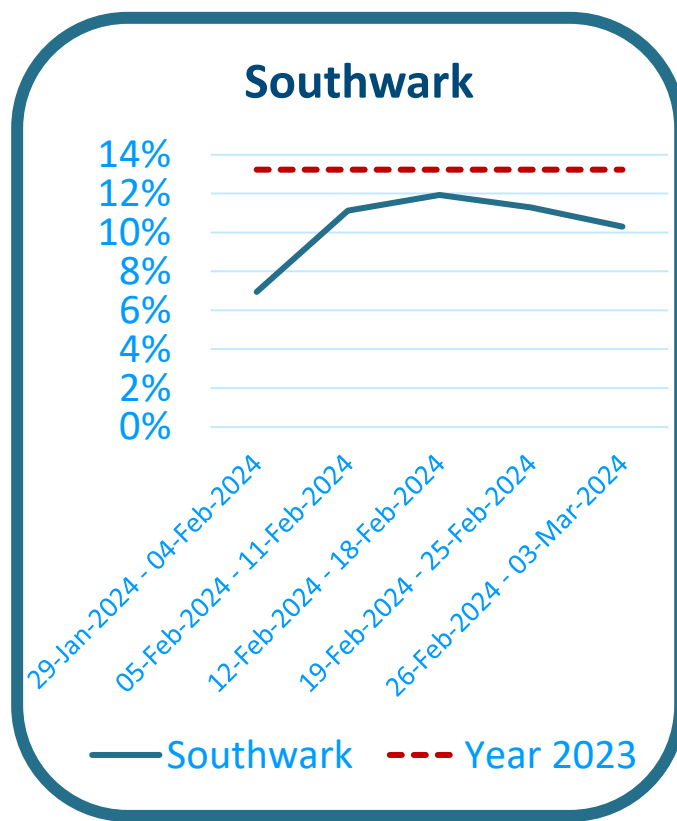
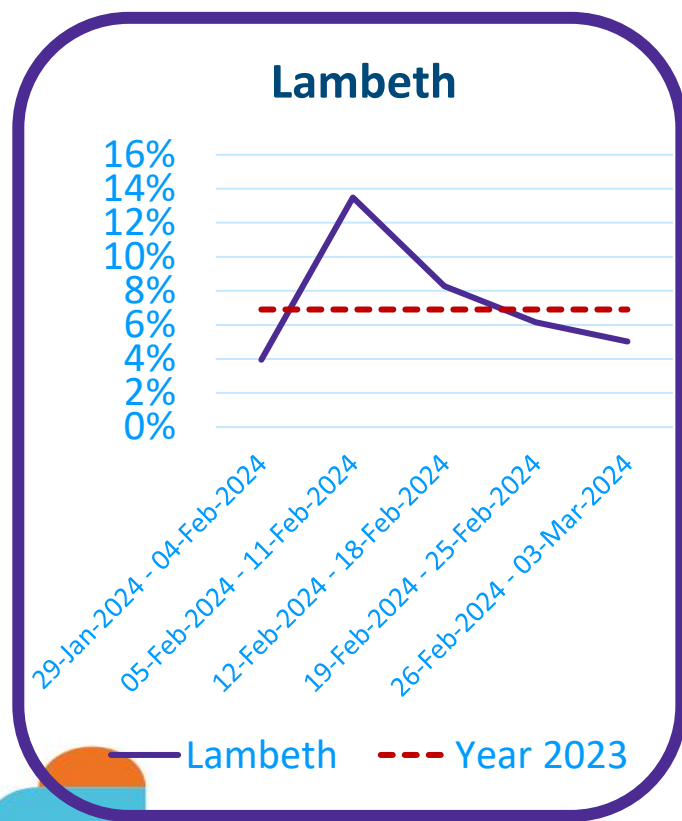


Note the lag in the time from blood test request to having blood test.



# Primary care testing during NHTW

Percentage of people aged 16 or over who had a blood test including an HIV test compared to the percentage of people in 2023



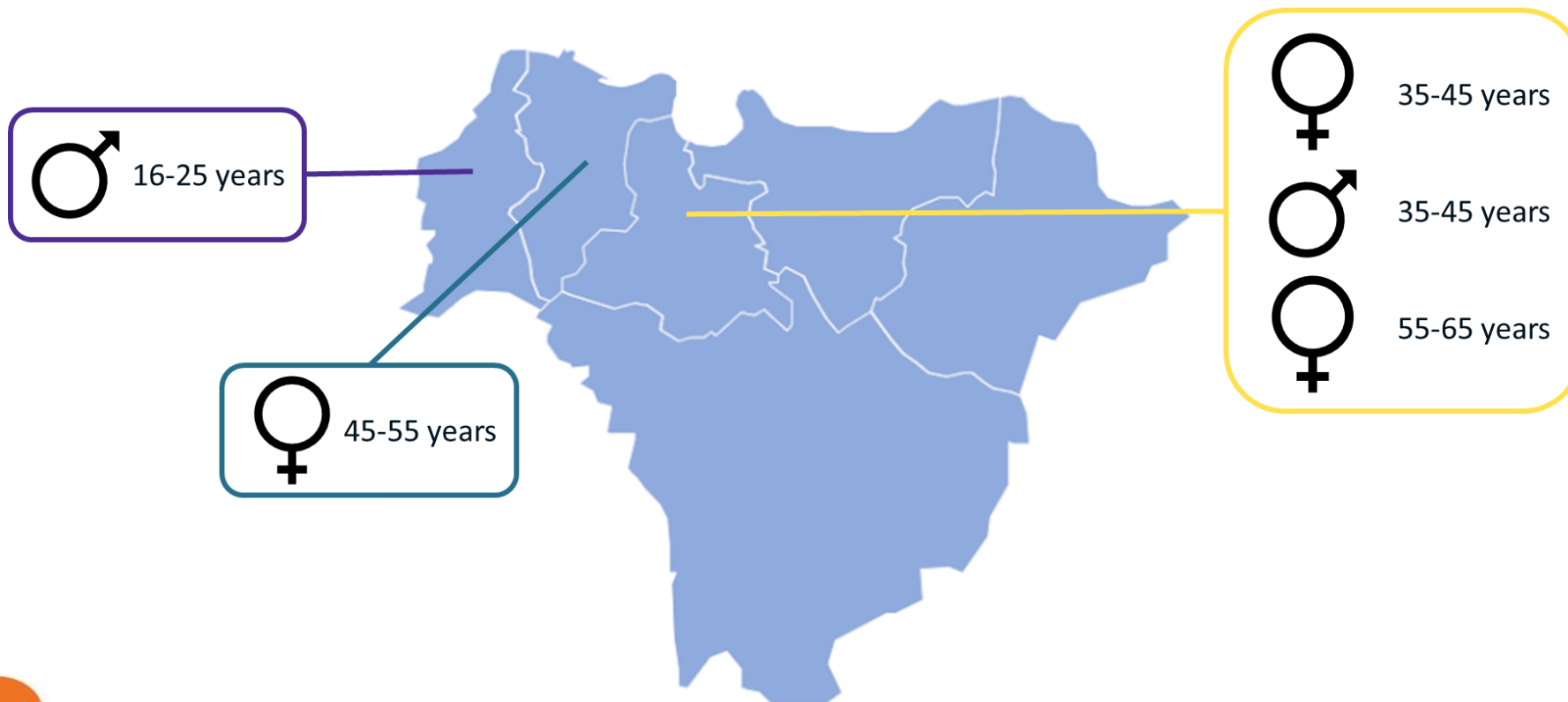
Note the lower average baseline in Lambeth but higher increase may be due to increased promotion in Lambeth



**Lambeth  
together**

# Primary care testing during NHTW

New diagnoses of HIV in people in primary care who had an HIV test within 4 weeks of the start of NHTW in LSL



# Other Lambeth, Southwark and Lewisham initiatives

- HIV Testing in Newly Registered Patients (Lambeth)
- HIV Testing Prompt (Lewisham)
- NHS Health Checks (Lewisham)

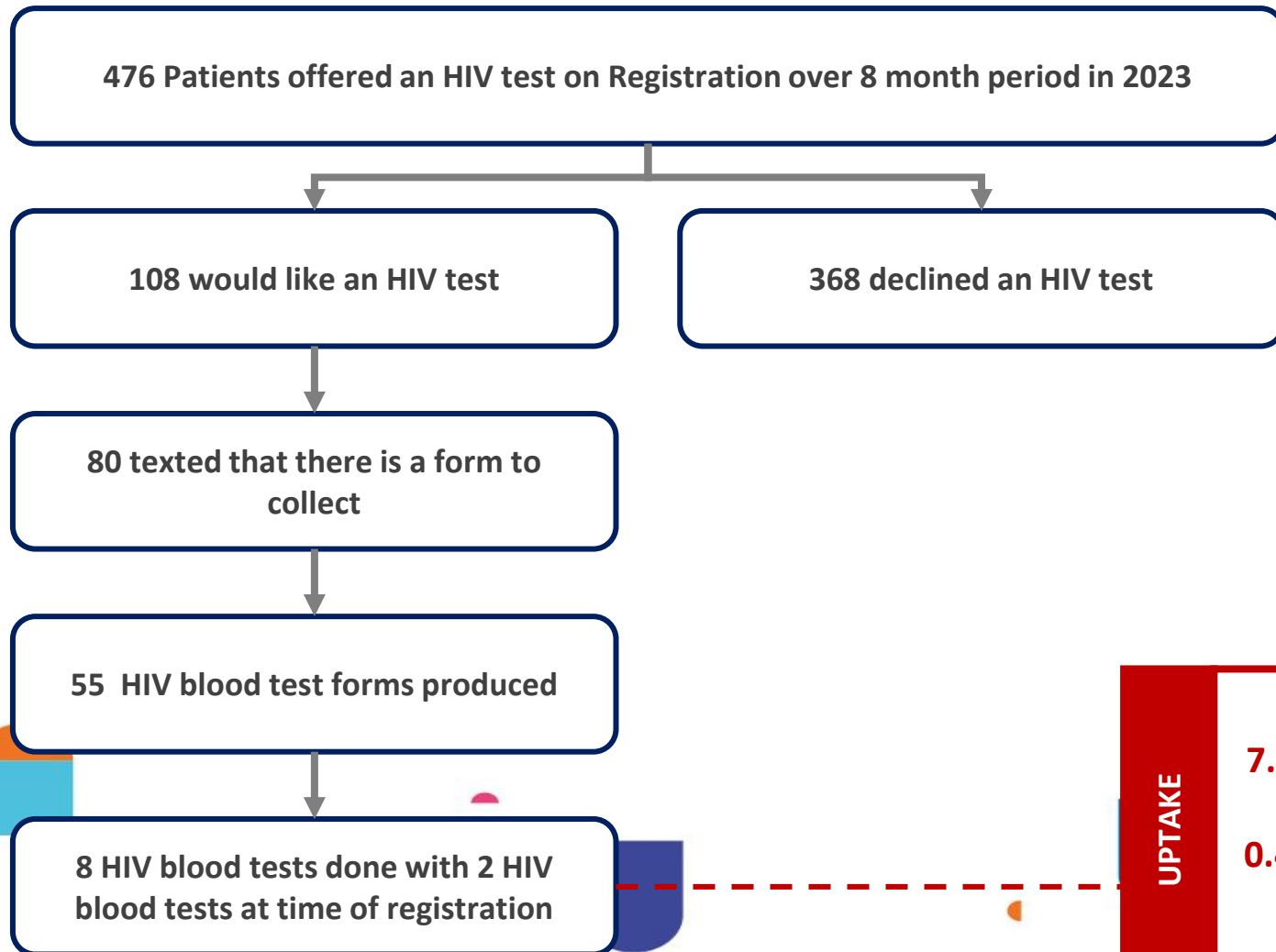




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together**

# HIV Testing in Newly Registered Patients

**Spec 23/24:** The Practice to ensure that all newly registered patients aged >16 years are offered an HIV test as part of their new patient registration. £0.50 per patient OFFERED from ICB



*SMS*

*Dear Mr/Ms XXX*

*Thank you for registering as a patient. Your registration is now complete.*

*Your named GP is Dr XXXX although you can consult with any of our doctors.*

***If you requested a routine HIV screening, please collect a blood test form from reception.***

*Welcome to the practice!*

**UPTAKE**

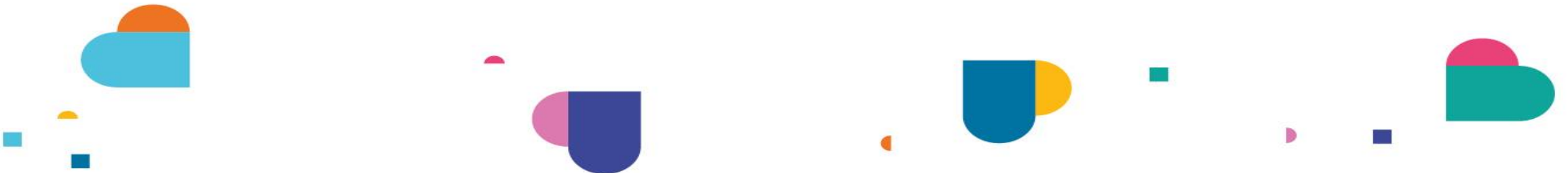
**7.4% of those who said YES to an HIV test had a test  
0.42% of those offered had an HIV test at registration**

# Key Learning



# Key Learning

- To enhance resident awareness of preventative HIV methods.
- To enhance resident awareness of appropriate frequency of HIV testing.
- To appropriately incorporate HIV testing into routine offers.
  - HIV testing through 'offer of a test' models have seen limited success.
  - **System to consider implementing models of opt-out HIV testing with routine blood tests in primary care.**



## Lambeth Together Care Partnership Board

<b>Title</b>	Lambeth Together Primary Care Commissioning Committee update
<b>Meeting Date</b>	09 May 2024
<b>Author</b>	Michelle Elston – Associate Director of Primary & Community Care
<b>Lead</b>	Sue Gallagher – Lambeth Together Board Lay Member

This item is for;

<input checked="" type="checkbox"/>	<b>Information</b>	<input type="checkbox"/>	<b>Discussion</b>	<input type="checkbox"/>	<b>Decision</b>	<input checked="" type="checkbox"/>	<b>Ratification</b>
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**Recommendations:**

The Lambeth Together Care Partnership Board is asked to:

1. Note the update on discussions held at the Primary Care Commissioning Committee on 06 March 2024
2. Ratify decisions made at the Primary Care Commissioning Committee on 06 March 2024

**What other groups or committees have considered this item to date?**

The Lambeth Together Primary Care Commissioning Committee update has been considered by the following groups and committees:

- Lambeth Together Primary Care Commissioning Committee
- Lambeth Local Medical Committee
- Lambeth Medicines Optimisation
- Lambeth, Southwark, and Lewisham Local Pharmaceutical Committee

**Summary and Impact on Inequalities**

The Primary Care Commissioning Committee (PCCC) is responsible for facilitating service users with accessible and equitable primary care services in our community. This includes services provided by General Practices, Dentists, Pharmacists, and Eye Care Specialists. The Committee's primary objective is to address and mitigate any healthcare inequalities within the community whilst improving access.

Key Functions:

- (i) Equity of Provision: The PCCC ensures that all proposals and items it receives prioritise equitable healthcare provision to the population. It actively works to

prevent the creation of unnecessary barriers that hinder people from receiving essential services.

- (ii) Impact Assessment: Before approving any major changes to the expected service delivery, the Committee conducts a comprehensive assessment of the proposed changes' impact. This assessment considers the potential effects on accessibility and ensures that funding is optimally allocated to guarantee inclusive and responsive service access for all.

This update to the Lambeth Together Care Partnership Board is to provide assurance on the delivery of delegated primary care functions, information on and ratification of decisions made at the Primary Care Commissioning Committee on 06 March 2024, and an opportunity to ask further questions and feed into the PCCC business.

# Lambeth Together Primary Care Commissioning Committee (LTPCCC)

Summary of Meeting held on  
Wednesday 06 March 2024



Working in partnership for a healthier borough

# LTPCCC Part Two Meeting



## **Approvals recommended to the Board:**

### **South East London (SEL) Special Allocation Service Contract**

The Committee received an update on the recommendation of the Special Allocation Service contract extension.

- The service is designed to rehabilitate patients back into routine GP practice, whilst ensuring their medical needs are addressed thereby achieving better health outcomes and addressing the needs of this cohort. The provider engages well with commissioners and there are no immediate concerns about their performance.

**The Committee noted the paper and approved the proposal to extend the SEL Special Allocation Service contract**

**The Board is asked to ratify this decision.**



# LTPCCC Part Two Meeting



## **Approvals recommended to the Board:**

### **Practice transition from Fiveways PCN to HBD PCN**

The Committee received an update on the recommendation to approve the request from Akerman Medical Practice to voluntarily transfer from Fiveways PCN to Hills, Brook and Dales (HBD) PCN

- The Lambeth Primary Care Team facilitated conversations with all parties involved in the practice transition
- Assurance has been provided that there will be no disruption to the ARR roles and responsibilities
- Patients will not experience any change or reduction in service

**The Committee noted the update and approved Akerman Medical Practice to transition from Fiveways PCN to HBD PCN**

**The Board is asked to ratify this decision.**



# LTPCCC Part Two Meeting



## **Approvals recommended to the Board:**

### **227 Clapham Road – Business Case**

The Committee received an update on the recommendation to approve the following:

- the Business Case for new Practice Premises for the Grantham Medical Practice at 277 Clapham Road, London SE9 9HB
- the recurrent revenue funding with the South East London Integrated Care Board (SEL ICB) for the period of the Lease from the central revaluation budget.



# LTPCCC Part Two Meeting cont.



## **Approvals recommended to the Board:**

### **227 Clapham Road – Business Case**

It is to be noted on 15 February 2023 LTPCC approved the Project Initiation Document (PID) to develop new Practice Premises for the Grantham Medical Practice (GMC) at 277 Clapham Road, London, SW9 9BH subject to the approval of a Full Business Case (FBC) and the securing of the revenue funding to support the development.

Succession plans are in the process of being discussed with Beckett House and will be the subject of a separate Project Initiation Document and Business Case, as there could be impacts upon the Beckett House Practice.

**The Committee noted the update and approved the business case for the new practice premises for the Grantham Medical Practice, with the Estates team returning to the Committee if any outstanding actions are unresolved.**

**The Board is asked to ratify this decision.**





# LTPCCC Part One Meeting

Updates on **standing items** were received on:

- **Risk Register**
- **Performance**
- **Workforce**
- **Primary Care Finance**
- **Quality**
- **Primary Care Transformation and Operational Delivery Group (PCTODG)**

The Primary Care Transformation and Operational Delivery Group meeting took place on 13 March 2023, and it reports to the LTPCCC.



# LTPCCC Part One Meeting



Updates on **other items** were received on:

## **Freedom to speak up in General Practice**

- An update was provided on the requirement of a trusted independent person who is available for General Practice staff members to talk to
- It has been discussed in the Primary Care Practice Manager's Meetings and work is being carried out collaboratively on how the Training Hub can offer support
- An update will be provided at a future LTPCCC



# LTPCCC Part One Meeting



Updates on **other items** were received on:

## **Strengthening General Practice**

An update was given to the Committee on the work plan for Strengthening General Practice, they include:

- Transformational Integrated Urgent Care (IUC)
- Prevention Agenda
- Integrated Neighbourhood Teams – Community-based services
- Supporting Service Mobilisations that support sustainability in general practice.
- Neighbourhood and Wellbeing Delivery Alliance (NWDA) Support
- Partnering with Guy's and St Thomas's to Achieve Closer Integration



# LTPCCC Part One Meeting



Updates on **other items** were received on:

## Care Quality Commission update

- A new CQC single assessment framework commenced on 09 January 2024
- The new system applies to providers, local authorities, and integrated care systems with the same ratings for the current five key questions (safe, effective, caring, responsive, and well-led) and the same overall ratings (outstanding, good, requires improvement, and inadequate)
- The CQC Operations Manager for London attended the Practice Manager's Meeting where it was discussed the new ways of working and the single assessment framework now that the portal is live



## Lambeth Together Care Partnership Board

<b>Title</b>	Our Health, Our Lambeth; Lambeth Together health and care plan 2023-28 - Year 1: Annual Review and Action Plan for 24/25
<b>Meeting Date</b>	09 May 2024
<b>Author</b>	Warren Beresford – Associate Director Health and Care Planning and Intelligence
<b>Lead</b>	Andrew Eyres - Corporate Director of Integrated Health and Care

### This item is for:

<input checked="" type="checkbox"/>	<b>Information</b>	<input type="checkbox"/>	<b>Discussion</b>	<input checked="" type="checkbox"/>	<b>Decision</b>	<input checked="" type="checkbox"/>	<b>Ratification</b>
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### Recommendations:

Board Members are asked to

1. Note contents of the document
2. Approve the Lambeth Together action plan for 2024/25 (contained within)
3. Approve for the document to be published on the Lambeth Together public website

### What other groups or committees have considered this item to date?

Lambeth Together Care Partnership Board have considered previous iterations of the annual review paper and action plan

### Summary and Impact on Inequalities

[‘Our Health Our Lambeth’](#), Lambeth Together Health and Care Plan 2023-2028 is our ambitious plan for addressing health inequalities in the Health and Care System within Lambeth. On May 18<sup>th</sup> 2023, the Lambeth Together Care Partnership (LTCP) Board approved this plan with our governance ensuring that updates were given on our progress at every Board meeting in public through our assurance reporting and annual review at the end of each year.

This update to the Board is the first of our annual reviews which charts the progress we have made in 2023/2024 and outlines our planned activities for 2024/2025. As part of the agenda item, we will also hear from those who have lived experience of how our collective efforts have impacted health and care services for them.

## **Our Health, Our Lambeth**

Lambeth Together health  
and care plan 2023-28

# **Year 1: Annual Review and Action Plan for 24/25**



[lambethtogether.net](https://lambethtogether.net)

# Foreword

**A year ago, as Lambeth Together Care Partnership, we embarked on an ambitious health and care plan ‘[Our Health, Our Lambeth 2023-2028](#)’ to outline and chart our commitment to improving the health and well-being of every individual living within our borough.**

As we now reflect on the first year, we are filled with a sense of both pride and determination. Lambeth stands as a beacon of immense diversity and resilience, yet it is also one marked by stark inequalities. The lasting impact of the COVID-19 pandemic and deepening living costs have exacerbated long-standing disparities in health outcomes; poverty, racism, and inequality continue to cast long shadows over the lives of many in our community.

However, we refuse to be defined solely by these challenges. Instead, we see them as catalysts for bold and transformative action. Our resolve to do things differently, to challenge the status quo and dismantle systemic barriers is unwavering. Through our innovative Delivery Alliances and strengthened partnerships with the voluntary sector, we are pioneering new approaches to address the diverse needs of our residents.

Central to our ambition is the commitment to tackling the unfair and avoidable differences in health outcomes that persist among different groups. We recognise the imperative of supporting healthier lifestyles, preventing illness, and delivering care that is responsive, respectful, and culturally competent.

Crucially, our plan transcends mere rhetoric - it is a living, breathing testament to the voices and aspirations of our community. Grounded in the priorities outlined in the [Lambeth Health and Wellbeing Strategy](#), [The Lambeth Borough Plan](#) and aligned with [The South East London Integrated Care System’s Strategic Priorities](#), it reflects the wisdom gleaned from our partners and the lived experiences of our residents.

One year on, we are delighted to share with you the journey of our progress to date and unveil our forthcoming plans for the year

## Lambeth Together Care Partnership Board Co-chairs



**Cllr Jim Dickson**

Cabinet Member for  
Healthier Communities,  
Lambeth Council



**Dr Dianne Aitken**

Lambeth GP

ahead. We acknowledge the ambitious nature of our aspiration and the need for adaptability in an everchanging landscape. Through ongoing research, evidence-based practice, and a commitment to continuous learning, we pledge to evolve our plans in the pursuit of health equity for all Lambeth residents.

Together, we strive towards a future where every individual, regardless of race, income, or background, can thrive. Our journey has only just begun, but with the steadfast support and collaboration of our community, we’re confident in enhancing outcomes for all.



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**About this document**

**Title:** Our Health, Our Lambeth - Lambeth Together health and care plan – year 1 annual review

**Purpose:** First of our annual reviews for ‘Our Health Our Lambeth 2023/2025. An outline of how health and care services in Lambeth have worked together to improve health and wellbeing outcomes in 2023/2024 and our action plan for 2024/2025

**Approved by:** Lambeth Together Care Partnership Board

**Date:** 09 May 2024



# Lambeth Together

## Why Lambeth Together?

**Established in 2017, Lambeth Together is a partnership of the voluntary and community sector, the NHS, Lambeth Council, and others, focused on improving health and wellbeing and reducing inequalities for people in Lambeth through an integrated health and care system.**

In the past, divisions between hospitals and family doctors, between physical and mental health and between NHS and Council services have meant that many experience disjointed care. Furthermore, these impacts are not felt equally - with poverty, racism and inequality contributing to worsened health outcomes for many.

Lambeth Together coordinate health and care across our borough to remove unhelpful divides, making services easier to access and better suited to people's needs. This helps people get the right care and support in the right place, as early as possible and will benefit our population in achieving better health in the decades to come.



# 'Our Health, Our Lambeth'

## Lambeth Together health and care plan 2023-28

**Informed by our partner organisations, our Delivery Alliances and Programmes, wider consultation and engagement with the public and a range of voluntary, community, faith and social enterprise organisations, our Lambeth Together Health and Care Plan was developed for the wellbeing of our patients, residents and those who care for them.**

In May 2023, the Lambeth Together Care Partnership Board formally agreed and committed to 'Our Health, Our Lambeth', a comprehensive and ambitious Health and Care plan for 2023-2028.

Our plan set out how health and care services in Lambeth will work together to improve outcomes and set out our aspirations including what we want to happen, the principles of how we will work, what we need to deliver the plan and how we will know if we are making a difference.

This is a five-year plan with a dynamic annual action plan.



## Our Priorities

We prioritised eight population groups and health issues where we will work together to improve health and wellbeing - we call these our 'Delivery Alliances' and our Programmes. They are responsible for bringing together our partners and people with lived experience to plan and manage initiatives that will join-up services, improve outcomes and address inequalities.

### Children and Young People Delivery Alliance

Supporting children and young people in Lambeth to grow up healthy and happy.



### Staying Healthy Programme

Promoting the health of the Lambeth population and supporting communities to maintain good health and wellbeing.

### Homeless Health Programme

Improving health outcomes for people who are homeless or at risk of becoming homeless, (including rough sleepers and refugees).

### Neighbourhood and Wellbeing Delivery Alliance

Improving the health and wellbeing of adults by working together in local neighbourhoods.



### Living Well Network Delivery Alliance

Supporting adults in Lambeth who are experiencing mental illness or distress.



### Learning Disabilities and Autism Programme

Improving outcomes and support for people who are autistic or have a learning disability.

### Sexual Health Programme

Improving people's sexual and reproductive health and enabling people with HIV to live and age well, across Lambeth, Southwark and Lewisham.

### Substance Misuse Programme

Reducing the harms caused by substance misuse and supporting those using substances to access the right help to meet their needs.

# Our Aspirations and Outcomes

Lambeth Together focuses on supporting people to lead healthy lives, improving prevention and early intervention, and making sure that people have access to and positive experiences of health and care services that they trust and meet their needs.

Supported by a positive and action-focused approach to equity for all protected characteristics including taking an anti-racist approach, to build trust and confidence with our communities.

## Aspiration

People lead healthy lives and have good physical and emotional health and wellbeing for as long as possible

## Outcomes

- People maintain positive **behaviours** that keep them healthy
- People are connected to **communities** that enable them to maintain good health
- People are **immunised** against vaccine preventable diseases
- People have **healthy mental and emotional wellbeing**
- People have healthy and fulfilling **sexual relationships** and good reproductive health



## Aspiration

Physical and mental health conditions are detected early and people are supported and empowered to manage these conditions and avoid complications

## Outcomes

- People receive **early diagnosis and support** for physical health conditions
- People who have developed **long term health conditions** have help to manage their condition and prevent complications
- When **emotional and mental health issues** are identified, the right help, support and diagnosis is offered early and in a timely way



## Aspiration

People have access to and positive experiences of health and care services that they trust and meet their needs

## Outcomes

- People have access to joined-up and holistic health and care delivered in their **neighbourhoods**
- People know where to go to get the **right help**, and are treated at the **right time**, in the **right place**, for their needs
- **Older adults** are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well
- Women have positive experiences of maternal healthcare and there are no disproportionate **maternal mortality rates** among women
- People with **learning disabilities and/or autism** achieve equal life chances, live as independently as possible and have the right support from health and care services
- People using **mental health** support services can **recover and stay well**, with the right support, and can participate on equal terms in daily life
- People who are **homeless**, or at risk of becoming homeless, (including rough sleepers and refugees) have improved health

## VITAL

5

The Vital 5 are five factors that have a major impact on health at an individual and population level. These are blood pressure, obesity, mental health, smoking status and alcohol intake.

We know that focusing on prevention and early detection in these five areas is an effective way of improving outcomes for our population. Our plan has included the Vital 5 throughout as

we know that identifying, recording, and sharing the Vital 5 data between all health partners and our patients, and acting on the results across our population, would make the biggest difference to people's health and to the sustainability of health and social care.

(Credit King's Health Partners

<https://www.kingshealthpartners.org/our-work/value/vital-5>)



## THE SEVEN

Continuity of midwifery care for women from Black, Asian and minority ethnic communities and from the most deprived groups

1

Ensuring annual health checks for 60% of those living with severe mental illness

2

Driving up uptake of COVID, flu and pneumonia vaccines

3

Early cancer diagnosis

4

Identifying high-blood pressure

5

Chronic Pain

6

Diabetes

7

NHS England has set out five clinical areas that need rapid improvement, in order to tackle health inequalities. These are:

In Lambeth, we have identified two further clinical areas that need rapid improvement in order to tackle health inequalities, based on our local population. These are:

# A Commitment to Equality, Diversity, and Inclusion

**Recognising that certain groups experience disparities in health and care - Equality, Diversity, and Inclusion (EDI) are paramount principles upheld by Lambeth Together to ensure fairness, dignity, and respect for all.**

Our EDI agenda is dedicated to addressing concerns, dismantling barriers, and fostering a healthier borough where every individual has equitable access to health and care services. It also seeks to achieve fair treatment within these services, and equal opportunities for everyone to attain optimal health.

The EDI subgroup of the Lambeth Together Care Partnership plays a crucial role in overseeing projects and programs within Lambeth Together Alliances and Programme Areas. Through rigorous scrutiny, we ensure that our initiatives are inclusive and accountable, providing recommendations and feedback to continually improve support for our residents.

Within the EDI subgroup, there are further subgroups dedicated to specific areas of inequality, such as LGBTQ+ disparities, and a working group managing the South East London (SEL) Health Inequalities funding.





## Investing to reduce health inequalities

Since 2022, South East London Integrated Care Board (SEL ICB) have been awarding funding to address our cross-system priorities for improving health and care:

- 1 Prevention and wellbeing:** Avoiding ill health and helping people in South East London to live healthier lives
- 2 Early years:** Making sure that parents, children and families receive the most effective support before and during childbirth and in each child's early years
- 3 Children's and young people's mental health:** Making sure that children and young people receive early and effective support for common mental health challenges

Lambeth Together Delivery Alliances, and Primary Care Networks have used this funding to initiate nine projects or services, each with a different Health Inequality focus. Lambeth will use the funding in 2024/2025 to further address the health inequalities identified in our borough. We will continue to focus on groups known to experience health inequalities, including those impacted by some of the risk factors, such as food poverty and poor housing. The health inequalities investment presents an exciting opportunity to significantly contribute to our overarching aspirations outlined in 'Our Health, Our Lambeth'. Through our collaborative efforts and targeted interventions, we are creating a more inclusive and supportive environment where everyone can lead a healthy and fulfilling life.

# What will help us deliver our Plan

**In developing our plan, we have reflected on and agreed the ways we need to work and what our staff, Partners and residents need, to help us meet our outcomes.**

## Our principles

To deliver these outcomes, we need to operate differently. By working together and reflecting on our ongoing engagement with patients and service users, we have developed a set of principles which will guide our work in delivering this plan.

Without these principles being brought to life, it is unlikely we will be able to fulfil the ambition we have outlined. We will pay attention not only to what we want to achieve, but also to what we do and how we change to genuinely live these principles.

## We commit to

- a positive and action orientated approach to equity for all protected characteristics including taking an anti-racist approach, seeking to build trust and confidence with our communities
- an asset-based approach, building and amplifying what is already in the community, starting with the assumption of strengths and trust in Lambeth's communities
- a determined and dynamic approach to integration, which understands that no one organisation has the answers to these complex issues we are attempting to tackle, and that collaboration is essential
- an approach which enables and supports the concept of 'health and wellbeing in all policies', building on what has been achieved since 2016
- undertaking open and participative research, where local people are involved in collecting data and building evidence to inform our decisions.

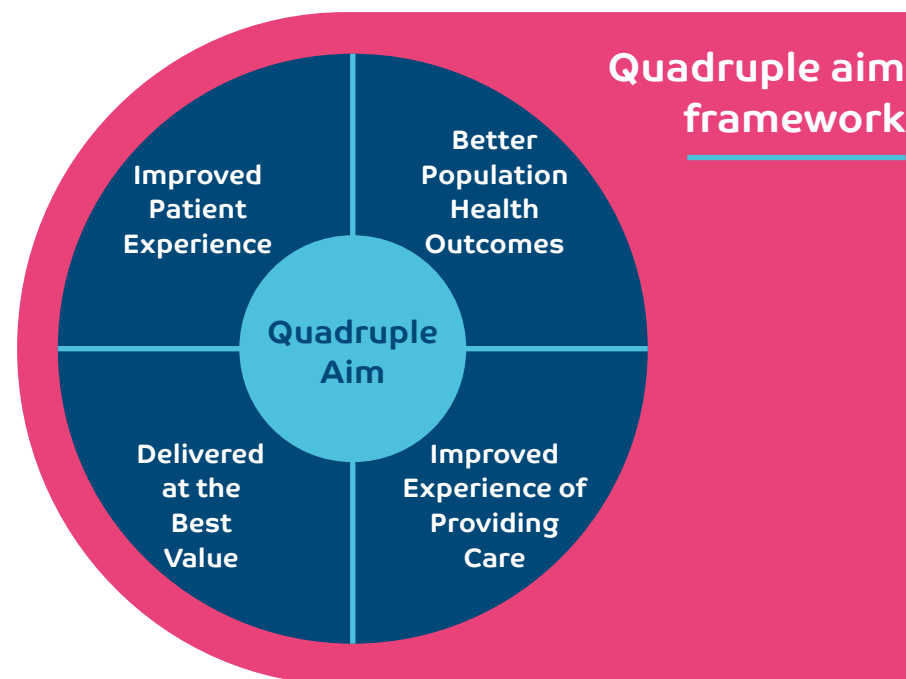


## Our ways of working

- Measure and understand the experience of people accessing our services and use this information to reduce inequalities.
- Commit to and embed equality, diversity and inclusion across all levels of our system with a focus on reducing health inequalities throughout all our work.
- Work together as an effective, well-governed, and transparent Local Care Partnership within an Integrated Care System and in collaboration with other Local Care Partnerships.
- Deliver through our Delivery Alliances and Programmes, with strategic oversight, effective assurance and risk management functions.
- Maintain a whole system approach to providing health and care by focusing on our quadruple aims: improved patient experience; better population health outcomes; improved experience of providing care; and care delivered at best value.

## Our workforce

- Have a workforce that, at all levels, can relate to people's lived experience, is representative of and supports our diverse and intersectional communities.
- Have a workforce that has capacity, is trusted and supported so communities receive a consistent and reliable service.
- Enable our workforce to work together, across organisational boundaries, in an integrated way, including through our Clinical and Care Professional Network.



## Digital

- Make sure residents have access to digitally enabled care across health and care settings that are easily accessed, consistent and ensures the right service for their needs.
- Make sure those residents who do not wish to use digital tools and/or are digitally excluded, can still access health and care services at the same level and standard.
- Work with partners across South East London Integrated Care System and beyond to enable sharing of information to support planning and care delivery.

## Our communities

- Communicate and engage with our patients and residents using a range of methods, ensuring information is accessible and easy to understand, and listen to patients, residents and community voices, ensuring those voices actively influence improvement.
- Work collaboratively to reduce health inequalities and support healthy neighbourhoods, recognising and supporting our assets in the community including residents, carers, grassroots organisations, volunteers, voluntary and community sector (VCS) organisations and community groups.
- Have ‘anchor institutions’ that serve the wellbeing of our population by strategically and intentionally managing their resources to help address local social, economic, and environmental priorities to reduce health inequalities.

## Buildings

- Encourage all health and care partners to work together in the same buildings to transform service delivery and improve access to care, delivered from high quality premises.

## Intelligence

- Develop a culture and infrastructure that prioritises data-driven decision-making and approaches to understanding the unique needs of Lambeth residents, especially those who are facing health inequalities. Our goal is to make a positive impact on specific populations within our community, such as those from different ethnic backgrounds, sexual orientations, and those living in deprived areas.
- Identify opportunities to improve services, provide proactive care, and understand the impact of what we do on our populations. This will involve improving how we collect and analyse information and learn from best practice, research, and quality reviews to continuously improve our efforts.

## Finances

- Provide a stable financial environment that supports continued improvement in health and care services and outcomes for people, to ensure a robust and effective delivery of core responsibilities, by using approaches that improve productivity, efficiency and value through making the best possible use of the money we have.



Two examples of our data-driven approach are **Lambeth HEART** and **Lambeth DataNet**.

**Lambeth HEART** is a research and evaluation network developed by Lambeth Council's Public Health Team in collaboration with local stakeholders, including Black Thrive, King's College London, and Applied Research Collaboration South London.

**Lambeth DataNet** is a data resource that links anonymised information to enable us to plan and provide better health care to everyone in the area.

To learn more, visit LINK <https://lambethtogether.net/our-ways-of-working/>.

# What we achieved together in 2023-24

Reflecting on the inaugural year of our health and care plan is a testament to our collective commitment to wellness and progress. Over the past twelve months, we have witnessed significant achievements that have reshaped the landscape of our healthcare initiatives. From implementing preventative measures to tackling chronic conditions with resilience, each milestone reached represents a triumph of dedication and collaboration. As we embark on this review, it is with pride and gratitude that we celebrate the strides made in enhancing the quality of care and fostering a culture of holistic well-being within our community.

## Supporting our residents to manage the rising cost of living

Our residents have expressed to us their growing concerns around the cost of living and in response, through strategic initiatives and partnerships, we have successfully implemented programmes aimed at providing financial relief and support to individuals and families facing economic challenges.

For example, the independent Good Food for All Londoners report, supported by Trust for London and the Mayor of London, reviews council action on food under two key themes:

- Tackling the root causes of food poverty; and
- Supporting residents to buy and eat affordable, healthy and climate-friendly food.

Pressing issues measured in the report include how London's councils are tackling household food insecurity, promoting healthy diets, supporting a flourishing local food economy, and addressing climate change through food. All of these affect the way we eat, our health and the communities we live in.

From the 28 councils who took part in this year's survey (out of a total of 33 councils in London), Lambeth council is delighted to have achieved recognition in the report for their Cross Cutting Leadership work on food poverty alliances, food

poverty action plans, cash-first responses to food security, food access for older and disabled people, food access for people from black and ethnic minority backgrounds, no recourse to public funds, Healthy Start, holiday activities and food as well as food growing, climate and nature emergency and food.

In addition, at the end of September 2023, 79.2% of low-income residents reported that they were coping financially. An increase of 3% compared to the percentage reported in March 2023. Since the last reporting period, the council has successfully implemented an approach to auto-awarding free school meals to eligible Lambeth households with children in Lambeth schools – this has resulted in 340 young people being awarded a free school meal, saving an individual an estimated £740 per year) and providing Lambeth schools with an additional £750,000 per year.


# Our Alliances - a selection of achievements

## Living Well Network Alliance

In November 2023, the Alliance held an open space engagement event alongside the Lambeth Collaborative. The free event at St Matthew's Church in Brixton was a great opportunity for people across diverse Lambeth communities to share and hear experiences and perspectives of mental health and services with an aim to see change, come together to find solutions to the question 'How can we work together to enable people who experience mental unwellness in Lambeth to live full lives?' The event saw more than 80 people in attendance, including Local MP Helen Hayes, previous colleagues who helped shape the Living Well Network Alliance, grassroots organisations and colleagues spanning across Lambeth. Importantly, lived experience was represented - an estimated 43% of attendees were carers or have used mental health services in Lambeth.

The Alliance also funded the Culturally Appropriate Peer Support and Advocacy Project (CAPSA), with Black Thrive, which won a Health Service Journal (HSJ) Award for 'Best Not for Profit Working in Partnership with the NHS' for their work. They have continued to develop the CAPSA service and the Staying Well approach with GPs and other 'primary care' colleagues, such as the new mental health practitioners and social prescribing link workers.

Through partnership working, the alliance managed to increase the number of people it supported by 9% (an additional 5,926 single point of access instructions more than the previous year). The Alliance also increased its inpatient support (having a 3% higher bed utilisation than the year before). In particular, 681 users of our Evening Sanctuary said that they would have gone to a local emergency department had the service not been in place. Finally, in the first 12 months of service (up to June 2023), the Individual Placement and Support (IPS) service has worked with 247 people with serious mental illness to seek employment. IPS has successfully supported 47 of these people into paid employment, in roles ranging from nursing, marketing, and engineering.



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**681**  
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department

**247**  
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## Neighbourhood and Wellbeing Delivery Alliance

### Health Inequalities work with Link Workers

Since April 2023, Social Prescribing Link Workers have run six health and wellbeing events, from North Lambeth to Streatham, engaging with hundreds of residents. There were general health and wellbeing events with a specific focus in mind. The Black Health and Wellbeing event held in May 2023 in Streatham (jointly organised by Streatham Primary Care Network (PCN) and Streatham AT Medics PCN), was attended by over 300 people. There were also events focusing on women's health, chronic pain, an LGBTQ+ lunch and a wellbeing event for the Latin community. These events were possible thanks to funding from the Alliance's Health Inequalities fund, allocated to each PCN and used by the Social Prescribing Link Workers to organise the events.

### Addressing High Blood Pressure

Focused work on hypertension prioritises those groups of patients whose high blood pressure is not well controlled and who are from Black and multi-ethnic populations. Promotion of the measure for reducing health inequality in hypertension was discussed and promoted to General Practice at the recent Long Term Conditions Clinical Update Webinar delivered by the Medicines Optimisation team.

Lambeth Together joined the national 'Know Your Numbers Week public campaign' where 117 staff took up the opportunity in Brixton Civic Centre to measure blood pressures.

Hypertension has been a priority of the newly appointed PCN Health Equity Champions – a number of initiatives have been run across the Borough including blood pressure clinics in surgery waiting rooms, outreach events and targeted call recall.

Community research to understand the experience of black communities in having their blood pressure checked and being diagnosed with high blood pressure.

The recommendations from this research have been fed back to Clinical Cabinet which will enable the Alliance to develop their 2024 hypertension priorities so that they can reach their target of 77% hypertension control in <79's.

Provision of support to non-clinical staff to raise the importance of hypertension, the pathways and raising the local initiatives.

## Managing Chronic Pain

The Chronic Pain Patient Advisory Group (PAG) has continued to run, and the insights and feedback from patients have continued to feed into the development of services.

In July the Alliance ran a Chronic Pain Study Day which was a well-attended event with representation of Clinicians across all 9 Lambeth PCN's – the Chair of the Chronic Pain PAG also attended and said: ***"The number of doctors and pharmacists who were in the packed room was phenomenal. Some really interesting research, too, on the predominance of chronic pain sufferers occupying a large portion of surgery facilities. It was an honour to be part of this event."***

### Access to General Practice

In January 2024, Lambeth GPs carried out over 170,000 appointments which equates to over 7,700 appointments per working day. Of those appointments, 56.2% were carried out on same day or the following day after the booking being made.

In the 2023 national GP survey, 62% of residents gave a positive response when being asked how easy it is to get through to someone at your GP practice on the phone. Whilst there is room for improvement, this percentage was the highest within all the South East London Boroughs. (Lambeth was 8% higher than the 2nd best performing borough and 20% higher than the lowest performing borough). Additionally, over 95% of residents stated that they were satisfied with the appointment which they were offered.

## Managing waiting times

This year, we have tried to work on waiting times for outpatient appointments. We have set up a waiting times website where clinicians can check how long waiting times are for specialties at different sites. We have also been working with local dermatology teams to ensure where possible referrals are seen in community clinics, which have shorter waiting times, and that GP practices are aware of how to contact dermatology teams using photographs for quicker answers, where appropriate. We have also enabled access to an online resource called “GetUBetter” which is available to all Lambeth GP practices and their patient population, for self-care with joint complaints, preventing unnecessary referrals and outpatient waits.

## Identifying cancer early

We are currently working to increase the uptake of the national cancer screening programmes while also focusing on reducing inequalities in cancer. A local initiative has been funded to contact those who have not responded to bowel cancer screening. We are currently focusing on those due breast cancer screening and are arranging training for local GP practice staff in conjunction with the Kings College Hospital breast cancer screening team. We have also been working closely with local community groups and Prostate Cancer UK to promote awareness of prostate cancer and encourage men at higher risk to contact their GPs to discuss this further. We have regular meetings

with representatives from local health and council teams along with community groups and the charity sector to encourage communication and a joined-up approach towards cancer in Lambeth.

In March 2023, Lambeth achieved the National standard of 60% of those eligible for bowel cancer screening receiving a screening test. The Catch 22 non-responder calling project will further support the increased uptake with the Catch 22 multi-lingual facilitations contacting many thousands of Lambeth patients who have not participated in bowel screening. The project has been extended to support all 41 Lambeth practices and should see the full impact of this with a further increase in uptake by Nov/Dec 2023.

## Supporting the independence of our residents with Virtual Wards

A Virtual Ward enables people who have an acute condition that would normally require hospital-level care, to receive this care in the place they call ‘home’. Each Integrated Care System (ICS) has been requested to develop and extend its virtual ward capacity in line with a national ambition of developing 40 – 50 virtual ward ‘beds’ per 100,000 population by December 2023, as outlined in the 2022/23 Priorities and Operational Planning Guidance. The target service users are adult patients, resident in the London Boroughs of Lambeth and Southwark, who require acute clinical care which includes components of hospital admissions avoidance and early supported discharge.

The intended impact is to improve patient experience and outcomes, as evidence shows that they recover better when staying in a familiar environment. Technology will also allow acute hospitals to dedicate their increasingly pressured capacity for patients in need of complex acute care whilst addressing inequalities and barriers of access by providing care closer to home. Since April 2023, the Alliance has delivered:

- Identification and recognition across Lambeth and Southwark Integrated Care System (ICS) of Virtual Wards already in place and expansion plans to deliver additional capacity by December 2023.
- A contract with Doccla using remote monitoring technology implemented in July 2023 to augment and support traditional community face to face services with a technological option providing safe monitoring and care for patients in their own homes.
- Working on new opportunities to develop a coordinated approach to extend virtual wards to support those with sickle cell), , patients in receipt of oncology care who need blood glucose monitoring and patients in need of post-surgical recovery.

## Children and Young People's Alliance

The new Alliance Lead for the Children & Young People (CYP) Alliance assumed their position in August 2023, bringing a strong background in NHS partnership and programme management. This appointment marks a significant step in our continuous commitment to enhancing the welfare and development of children and young people in Lambeth. One of the initial actions taken by our new director was to focus on the reestablishment and ongoing review of the CYP Alliance Board, ensuring that our governance structures are well-suited for effective collaboration and decision-making.

Following this, a thorough review of our operations was undertaken to ensure alignment with the community's evolving needs. This review has spurred the development of an alliance work plan designed to sustain current initiatives and introduce new ones that contribute to the Our Health, Our Lambeth Health and Care Plan.

Supported by funding targeted at reducing health inequalities, the alliance has successfully integrated two clinical roles with our provider partners. The first role, a clinical psychologist, supports unaccompanied asylum-seeking children and has significantly impacted and enriched the lives of some of our most vulnerable community members, reinforcing Lambeth's credentials as a sanctuary borough. The second role, a nurse who supports children and young people educated outside mainstream schools, has extended our support to these Lambeth children, enhancing their educational and social outcomes. Both roles highlight the effectiveness of system working, the strategic use of funding to address health inequalities, and the alliance's capacity to unite stakeholders and partners for a common cause.

There has also been a specific focus on Lambeth Maternity Services earlier this year, spearheaded by the Alliance. The alliance has collaborated with system partners on a detailed report focusing on governance and equality, diversity, and inclusion in maternity care, which was reviewed at the Lambeth Council Scrutiny. They have worked with data analysts to integrate various data platforms, providing a deeper understanding of the factors affecting maternity and early childhood development. The evolving landscape of maternity services was also examined at the Children and Young People's Alliance Board. Moreover, in partnership with the Local Maternity and Neonatal System, they have helped develop a borough-level data dashboard that tracks key performance metrics of maternity services. Lastly, the operational performance of maternity services has been reviewed by the Lambeth Together Executive Group to ensure ongoing support and improvement. These efforts aim to maintain innovative, inclusive, and comprehensive maternity care for Lambeth's diverse community.



# Our Programme Achievements

## Learning Disabilities and Autism

In early 2023, Lambeth launched its consultation for the new All Age Autism Strategy with autistic people, carers, community organisations and professionals across the system. The consultation programme included a survey with over 130 responses, four online engagement sessions, focused meetings with relevant teams across the council and statutory partners, several in-person consultation events in partnership with local organisations, and in-reach sessions at a range of locations.

The programme is expected to exceed the national target for uptake of Annual Health Checks by people with learning disabilities in 2023/24. In year 8 adults with learning disabilities and/or autism were discharged from specialist inpatient facilities, using one-system planning approach. Wide engagement has occurred to support the development of the all-age autism strategy with the final strategy due for approval in early 2024. The all-age autism strategy has been developed in partnership with key stakeholders.

The programme has taken steps to understand the local population of people with autism with data and mapping exercise undertaken in April 2023. Working with SEL ICB and health partners to ensure accurate capture of information for patients with learning disability and autism to ensure they get the right access to health provision; support performance and quality monitoring and underpin effective population health planning.

## Sexual Health

A refreshed HIV Care and Support Service was procured and relaunched in 2023/24 for residents in Lambeth, Southwark and Lewisham. This service was re-launched following engagement with residents and users of the previous services and other stakeholders. This was welcomed by service users who either hadn't previously had face-to-face contact with local government officers or hadn't since the pandemic. At the meetings, service users were encouraged to give their suggestions and feedback to the current provider, as well as provided with contact details for their local public health commissioners if they have grave concerns.

Throughout the whole process, an independent consultant with lived experience facilitated the workshops, reviewed papers and was a part of the moderation panel (including interviewing potential providers).

Sexual Health Commissioners procured Medical Foundation for AIDS & Sexual Health to deliver Sexual Health IN Practice (SHIP) training to nurses and clinicians across LSL. This is an interactive, peer-led training session in sexual health.

This year, 4 training sessions were delivered:

- **Practice Nurse 1:** STI update for practice nurses and physician associates
- **Key issues in Sexual Health for GPs**
- **Practice Nurse 2:** Talking to patients about sex
- **Blood borne virus update for primary care**

In November, Lambeth commissioners led a stakeholder engagement event for LSL (Lambeth, Southwark, and Lewisham) to unite local commissioners, clinicians, and VCSE organisations in the creation of a sexual health outreach model.

## Staying Healthy

The Age Friendly Festival happened in September at the Oval and in a week in which Age UK reported that just 13% of Londoners over the age of 60 believe the capital is “a place where older people are valued - see London’s over 60s feel undervalued, Age UK research finds, partners were delighted that we had over 325 residents and 70 volunteers from the Council and local organisations attend a really great event, despite the rail strikes on the day. The day featured 20 stalls across the eight Age Friendly domain areas and many different activities including crafts, memory cartography, spinach planting, dominoes, keep fit sessions, a choir, and a tea dance. The Health and Wellbeing bus delivered 35 flu and 25 covid jabs and had very many conversations on the health and wellbeing with those attending. Many people were keen to share their views and wanted to stay in contact after the event, including as part of an Older People Panel. The event even made the BBC London Tonight news.

Over the last year Lambeth has continued to deliver and develop our local stop smoking offer. The Specialist Stop Smoking service successfully piloted the use of nicotine vapes as a tool to support pregnant smokers and smokers with COPD to quit. Following the local pilot which engaged 36 smokers, Lambeth is now taking part in the national Swap to Stop scheme and is expanding this offer to any smoker seeking to quit. In the first 3 months of the scheme, 30 smokers have already taken up the offer with 12 having successfully quit and 8 others currently on their journey towards stopping smoking. By the end of Phase 1 Lambeth will provide vapes to 625 smokers to support them to quit. From May 2024, nicotine vapes will also be available in the community pharmacy stop smoking service. Incorporating this approach within Lambeth’s core service offer is helping to tackle misconceptions around vaping and provides a wider range of options for smokers who struggle to quit.



## Homeless Health

Lambeth was awarded Rough Sleeping Initiative funding of £6 million between 2022 –2025 from the Department for Levelling Up, Housing and Communities.

This funding, plus Lambeth’s commissioned rough sleeping outreach team, aims to support ALL rough sleepers away from the street and to ensure they do not return.

The Vulnerable Adults Pathway has accommodated 751 people between April 2019 and March 2023. 283 were referred via the rough sleeping outreach team. 468 were referred by the Lambeth Housing Options team. 483 people have moved on in a planned way between April 2019 and March 2023.



Lambeth set up an emergency rest centre in January 2024, during Severe Weather Emergency Planning (SWEP). The rest centre was provision above and beyond our normal SWEP offer due to high demand. It was set up in two days with help from colleagues across the Council, to support our efforts in ensuring people rough sleeping do not die on the streets of Lambeth in freezing temperatures. The model of rest centres and how we implemented ours in Lambeth will be shared London wide as best practice.

Lambeth were successfully awarded £2 million from the Single Homeless Accommodation Programme (SHAP) via the Greater London Authority (GLA), for a Housing First service for rough sleepers/single homeless people with support needs. This will involve 37 people being given social housing units and wrap around support to sustain their tenancies using the “housing first” approach.

As part of a comprehensive needs assessment, we have completed a series of service user engagement events, focus groups and stakeholder sessions. This feedback is now being used in conjunction with our data collection, benchmarking and knowledge/best practice across the sector to develop an options appraisal for re-commissioning the Vulnerable Adults Pathway.

## Substance Misuse

The establishment of an on-street engagement team operational across the borough that seeks to engage with people engaged in drug or alcohol misuse within our communities and then signpost them into treatment or other support services as appropriate.

Lambeth have led on pulling together a multi-agency forum to tackle the harms caused by using chemsex drugs – a piece of work carried out in partnership with Southwark, the Met Police and provider services.

Lambeth led on the establishment of a new project called Individual Placement Support – a project that enables people in recovery from drug and alcohol addiction to access gainful employment opportunities within their local community. This has been completed in partnership with colleagues in Lewisham and Southwark.

This year has been a journey of dedication, collaboration, and unwavering commitment to enhancing the well-being of the residents of Lambeth. In just twelve months, we’ve witnessed remarkable strides in improving access to quality healthcare, fostering a culture of compassion and understanding, and implementing innovative solutions to address the evolving needs of our community. The team are committed to continuing the work that has begun in many areas, addressing health inequalities amongst our treatment population and supporting people to enjoy sustained and meaningful recovery.

## Estates

The NHS and Lambeth Council teams have worked in partnership and agreed use of the former library site on Lower Marsh for the temporary relocation of Waterloo Health Centre. Planning permission has been granted and works are well underway to install a modular building which will be open to the public in the new year.

It is truly inspiring to witness the positive impact our collective efforts have had on the health and well-being of our population. Feedback, stories, and experiences serve as a testament to the tangible difference we've made together.

Through our health and care initiatives, we've strived to listen, understand, and respond to your needs with empathy and compassion. Whether it's been through improved access to healthcare services, enhanced support networks, or innovative wellness programs, our aim has always been to empower and uplift each member of our community.

From the heartwarming testimonials of individuals who have received life-changing treatments to the expressions of gratitude from families who have found solace in our support networks, your voices echo the profound impact of our collective endeavours.

Together, we've not only addressed immediate health concerns but also fostered a culture of proactive self-care and resilience. By working collaboratively, we've created a healthier, more vibrant community where every individual feels valued, supported, and empowered to lead fulfilling lives.



# How we know that we have made a difference

## Assurance of Our Progress

In our original [five-year plan](#), we stated our intention to continuously assess, learn from, reflect on, and refine our health and care plan as we progress. To facilitate this, starting in 2023/24, we improved how we run our Lambeth Together Assurance group (the group we used to monitor progress against our planned deliverables) by implementing the following changes:

We revamped our Integrated Assurance reporting to focus on the 15 delivery outcomes outlined in our plan. Each outcome is assessed based on:

- Progress indicated by data and intelligence
- Reduction of identified health inequalities
- Challenges impeding progress and potential actions to overcome them

We also established a rota of deep dives into each outcome where areas would be given greater focus and scrutiny.

Subsequently, the assurance group updates the Lambeth Together Partnership Board during public meetings.

This platform enables residents to review our progress and hold us accountable, especially in areas where improvements are needed.

The table on the next pages summarises some of the key findings documented within our Lambeth Together Integrated Assurance Report over the past year. You can find examples of the Lambeth Together Assurance Group updates and the assurance report in the [public board meeting papers](#).

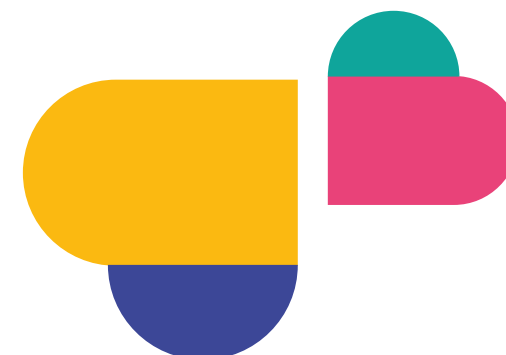


ID	Outcome	Highlights
A	<b>People maintain positive behaviours that keep them healthy</b>	The intelligence suggests year end local target (1,890) on the number of people accessing and engaging in structured treatment programmes in 23/24 with Substance Misuse services has been exceed.
B	<b>People are connected to communities which enable them to maintain good health</b>	We've increased the percentage of low-income residents coping financially from 76% in 22/23 Q4 to 79% as of Jan 2024, expecting reaching 80% by year end.
C	<b>People are immunised against vaccine preventable diseases</b>	Data from Q3 Cover reports suggest the local target of 90% for MMR vaccination uptake was not met, prioritizing this local goal is crucial for community protection.
D	<b>People have healthy mental and emotional wellbeing</b>	Talking Therapies data suggests we will meet national access and waiting times for treatment targets in 23/24.  We increased the number of community organisations and volunteers undertaking mental health awareness and suicide prevention training in 23/24.
E	<b>People have healthy and fulfilling sexual relationships and good reproductive health</b>	Despite not seeing a reduction in STI diagnoses in 23/24, Lambeth has a significantly higher diagnostic rate of STI's compared to London and England's average.
F	<b>People receive early diagnosis and support on physical health conditions</b>	We are on course to meet the national SMI and LD annual health checks standard. On cancer screening, Lambeth have achieved above the national standard of 60% for Bowel Cancer screening. For Breast and Cervical screening Lambeth is below national standard.
G	<b>People who have developed long term health conditions have help to manage their condition and prevent complications</b>	We are on course to meet the year end target on Type 2 Diabetes 8 Care Processes and Cardiovascular blood pressure targets for people on hypertension register. Both workstreams had a focus on reducing health inequalities.

ID	Outcome	Highlights
H	<b>When emotional and mental health issues are identified; the right help and support is offered early and in a timely way</b>	Access to Lambeth Talking Therapy for Black residents has historically been lower than expected given Lambeth demographics. The latest available data shows that IAPT has made significant progress in advancing access for Black services users, but recovery rates remain a challenge, with Black service users starting with more serious problems than the all-service average.
I	<b>People have access to joined-up and holistic health and care delivered in their neighbourhoods</b>	Social prescribing, or community referrals, allow health professionals like GPs to refer individuals to local non-clinical services. These referrals aim to address people's needs holistically and empower them to manage their health better. Over the 11 month period between April 2023 and February 2024 there have been nearly 5,500 social prescribing contacts for Lambeth residents.
J	<b>People know where to go to get the right help, and are treated at the right time, in the right place, for their needs</b>	In 23/24 data shows circa 90% of Lambeth registered patients can get an appointment in less than 2 weeks.  The Lambeth Pharmacy First Plus Service showed most interventions have taken place for most deprived people (IMD decile 1 to 3), which shows the service is accessed by the target population. In the absence of this service, 46% of patients would have gone without medication and 52% would have visited general practice to request the medication on prescription.
K	<b>Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well</b>	On care offer the number accepted referrals to Reablement increased since last year and the number of people who have a reduced need for care at the end of a period of Reablement has increased and this is positive.
L	<b>Women have positive experiences of maternal healthcare and do not experience a disproportionate maternal mortality rate</b>	Despite challenges with data reports mainly due to EPIC implementation and changes to national guidance the priorities for the alliance are to continue to work with SEL Local Maternity & Neonatal System (LMNS) to develop a borough-level dashboard, deliver recommendations via the LEAP Data-Advisory Group and continue conversations with Lambeth HEART around opportunities for research and data-linkage.

ID	Outcome	Highlights
M	<b>People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services</b>	<p>The waiting times for ASD diagnosis in children and young people remain lengthy.</p> <p>On discharges from specialist inpatient units, the proportion of those in most restrictive inpatient settings from BAME backgrounds has reduced from 54% in 2020/21 to 43% in 2023/24 showing a positive move away from using restrictive environments.</p>
N	<b>People using mental health support services can recover and stay well, with the right support, and can participate on an equal footing in daily life</b>	<p>Data on 30 days readmission on Q2 and Q3 of 23/24 evidence improvement in performance against Q1. LWNA referrals teams make for other support routes beyond mental health support show increased activity when compared with 22/23</p>
O	<b>People who are homeless, or at risk of becoming homeless, (including rough sleepers and refugees) have improved health</b>	<p>Since 22/23 demand for Homeless services has increased over 40%, supported housing in 23/24 is at full capacity and 70-80% of people living in supported housing are registered with a GP.</p>

For further detail on impact measures performance across Health and Care plan Outcomes, please refer to Lambeth Together (LT) Assurance update section included in LT Partnership Public meeting papers. Considering the activities in 24/25, we will be reviewing how we will measure success as part of LT Assurance group governance arrangements.



# What you have told us - Listening to and engaging with our residents

We have worked hard to make life better for residents within Lambeth. We've improved access to important services like healthcare and education. We've also made neighbourhoods nicer and given a voice to those who were overlooked before. People feel more included and connected now. Our efforts are making Lambeth a better place to live, and we're excited to keep working towards an even brighter future for everyone.

## Neighbourhood and Wellbeing Delivery Alliance

### Urgent and Emergency Care (Virtual Wards) Case Study

Robyn Heron, 36 benefited from our services at the beginning of January 2024 when she had an asthma attack just weeks after the birth of her baby.

*"I was told when I was a teenager I had asthma, but I've never had to use pumps or had an asthma attack."* Believing it was a common cold, Robyn tried treating the symptoms at home. After experiencing coughing episodes, wheezing, a tightening chest, and struggling to breathe she decided to go to A&E.

Robyn said: *"At A&E they said my peak flow was about 100, which meant only about a quarter of the lung capacity was working."* Peak flow is a measure of how quickly you can blow air out of your lungs.

After numerous tests, Robyn was prescribed a nebuliser for an asthma attack and her condition began to improve. *"Because of my baby they asked if I would be interested in being monitored at home. I was glad because I'd rather be at home and have everything, I need around me, especially during the midnight feed."*

Robyn took readings, including heart rate, respiratory rate and peak flow, 3 times a day at home and sent these through an app to analyse the results.

*"Most of the time my blood pressure was quite low, so I'd quickly get a call back from the team asking me to check my results or redo my blood pressure."*

A nurse or a doctor from the @home team visited Robyn once a day for 3 days to take blood tests and to carry out further checks.

*"I felt so incredibly well looked after. The @home team was absolutely wonderful – the nurses and the doctors. And every person who phoned to check on me was so kind and considerate, and aware of everything. It was such an amazing experience."*

*"The monitoring is so quick and easy to do. It puts you at ease seeing your results, and knowing you are getting better every day. It made me feel I was a little bit more in control of things."*



## Chronic Pain Patient Advisory Group Case Study

### Dianna, Black African female, 55-64 years

Diana's chronic pain journey started in the 1990s when she was diagnosed with Lupus. Although she didn't particularly find the pain clinic helpful, the supplementary treatments of acupuncture, physio, and hydrotherapy did help her pain management. She has a strong conviction and belief in God. This would seem to allow her to 'smile through her pain' and keep her strong.

At first Diana was uncertain about joining the Patient Advisory Group, being sceptical of what she might gain. However, she has found it helpful to understand other people's experiences of chronic pain, especially those who share similar health concerns. She felt that supporting each other with suggestions or just listening has helped her develop a deeper understanding and with her mental well-being. Diane expressed the importance of just giving it a go, as we could all learn from each other by having a safe space to talk in similar situations.

On whether she'd recommend the group to others, Diana says: *"I would say just to get involved. Let's go because, like me, they could learn a little, but they could learn a lot. They could also give others in the group the benefit of their experience."*

### Ben, male, 65-74 years

Ben fell from a ladder about seven years ago which has resulted in constant pain in his left shoulder, which limits certain everyday activities. This shoulder pain makes it difficult for him to perform simple tasks such as putting on a jacket or threading loops on his belt. He has sought support from his GP and tried physiotherapy, but unfortunately, he felt that it didn't help much.

The group provided a safe space for people to talk about their pain when they cannot discuss it with their families. The PAG's WhatsApp group also acts as a good support network and facilitates communication among the group members. This has helped Ben maintain a positive outlook by continuing to listen and broaden his awareness at a suitable pace for him.

Ben had an overall positive experience being a part of the Patient Advisory Group. He expressed that being in the group helped him gain knowledge and motivated his understanding through interacting with fellow chronic pain sufferers. As a result, he has now tried to follow up on his chronic pain issues further with his GP.

In his own words, Ben describes his feelings about what he learnt from the group: *"What I learned from it was that a collective sense of solidarity is a great comfort to many people, and I think that shows up in our WhatsApp group and the meetings; I think people do derive a great deal of comfort just from sharing with others who do understand where they're coming from. They're not alone, and that's a great help. I think it's an extraordinarily worthwhile project. I really do. I highly commend it."*



## Living Well Network Alliance

### Mental Health Carers Peer Support Group Case Study

Unpaid carers play an essential role in the lives of many people supported by the Living Well Network Alliance. An important link between the Alliance and local unpaid carers, is the monthly Mental Health Carers Peer Support Group, run by the Carers' Hub Lambeth.

The Mental Health Peer Support Group offers Lambeth based carers space to connect and share with fellow carers and to keep abreast of latest mental health developments. And during 2022-3 over 50 carers attended the group and benefitted from the support provided. Alongside valuable and insightful information from speakers, the peer support element of the group ensures that carers' own wellbeing is supported. The group creates a space to share experiences with others in similar positions and helps carers build new friendships and feel less isolated.

*"I feel less alone and more accepting of our situation. It's wonderful to be able to talk about mental illness without shame because the group understands"*

**Mo, Streatham**

*"Attending the group is helping enormously. Listening and sharing with other carers helps broaden insight and understanding"*

**Lara, Stockwell**

The Carers' Hub Lambeth also supports many carers who experience their own mental health difficulties, which can be exacerbated by the fallout from their caring role. They regularly connect carers to the support offered by the Single Point of Access, 24-hour crisis line, Solidarity in a Crisis and Lambeth Talking Therapies.

The Living Well Network Alliance are active participants in the Carers Collaborative and Carers Collaborative Strategy Group through their representatives Lee Roach and Nigel Boyd. We will continue to partner with Carers Hub Lambeth to support occupational therapy student placements, provide carer awareness training for professionals across the Borough and help Lambeth Carers to navigate the complex health and social care system.

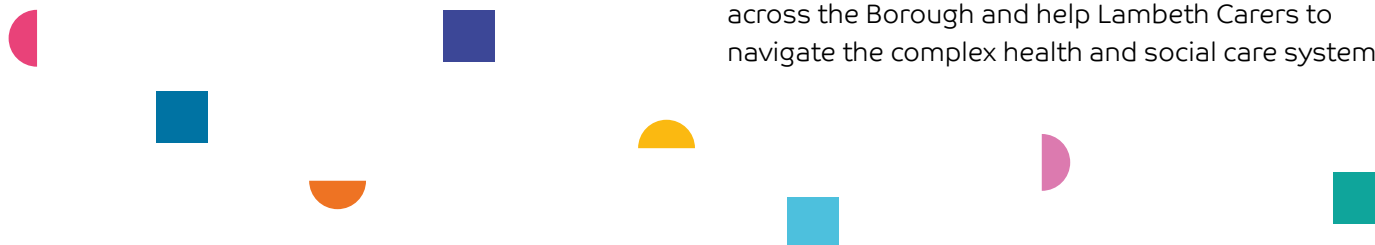
## Children and Young Person's Alliance

### The Educated Other Than at School (EOTAS) Service Case Study

Established in Lambeth since July 2019, ensures vulnerable children and young people not in mainstream education can access equitable school nurse services, addressing the gap in health outcomes compared to their peers.

Recent health inequalities funding from Lambeth Together has enabled the hiring of an additional nurse, enhancing the service by:

- Extending health service offers to children educated at home.
- Setting up a drop-in service for students at Lambeth College, initially targeting KS4 provision with potential for expansion.
- Increasing health support access for 16-19-year-olds, especially those not in education, employment, or training (NEET).



**Partner Testimonies:**

Youth services have highlighted the *“...EOTAS nurse’s role in reaching hard-to-reach young people, offering crucial health services and becoming a key part of the professional network for young people in Lambeth”*.

Education partners acknowledged the *“...positive relationship-building and comprehensive support for students’ health and well-being, noting the valuable communication and the critical role of the EOTAS nurse in supporting learners’ needs within the school environment”*.

### The Unaccompanied Asylum-Seeking Children (UASC) Service Case Study

Provides specialised care for vulnerable children arriving in the UK without guardians. Recognising their unique needs, this service delivers risk monitoring, diagnostic evaluation, joint assessment, and culturally sensitive interventions. Initially, UASC referrals were managed by the Child and Adolescent Mental Health Services (CLAMHS), but it became apparent that a more tailored approach was necessary, leading to the development of a dedicated UASC clinical specialist role.

Thanks to health inequalities funding from Lambeth Together, our support for these children has been significantly enhanced by the recruitment of a lead psychologist. This addition has markedly improved our service and led to the following:

- Significant increase in UASC mental health engagement, with a 75% rise in assessments and interventions.
- Diagnostic screenings are timely, with all referrals screened at the point of referral.
- Maximum wait time for assessment and intervention is 4-weeks.
- Reduction in wait times for UASC care by 66.7% over six months, compared to CLAMHS data.
- Cultural sensitivity reported by 100% of UASC and carers post-assessment.
- Timely and integrated management of comorbidities.
- Multi-agency collaboration led to significant risk reduction in UASC.
- 40% of referrals are around 17.7 years old, addressing critical transitional age for post-18 care.
- The service has provided consultations for non-allocated and out-of-borough cases.

**Partner Testimonies:**

*“The project has worked well in making mental health screenings and interventions available earlier, which young people have really welcomed. Getting involved early has been vital for getting past the hesitations young people have about using mental health services, hesitations often rooted in cultural and trauma-related issues.*

*“The service has played a key role in protecting and advancing Children’s Rights, and we’ve been particularly impressed by the stronger teamwork between social care and CLAMHS as a standout success”.*

*“The support we’ve been able to offer UASC has been incredibly important, especially when you consider the traumatic experiences these young people have been through. My colleagues and I emphasise how critical the project has been in helping these young individuals work through and heal from their past experiences”.*



## Learning Disabilities and Autism

Autistic people, families and their carers gave us rich and honest feedback about living with autism during the Autism Strategy engagement exercises.

They told us of struggles to access a diagnosis for both children and adults *“enhancing access to diagnosis is paramount” “and finding health and care services are not tailored to their needs “ask GPs to offer appointments during quieter times”*

We heard about a lack of understanding amongst professionals and the community *“efforts must be intensified to combat prejudice against autistic individuals”*, there is *“lack of understanding about the barriers”* faced by autistic individuals.

There is a need for *“improved training for health and social care professionals”* that respects the individuality of autistic people.

## Home Care Commissioning

In order to better meet the needs of residents who receive home care, Lambeth Council is recommissioning this service under a new neighbourhood model of care with eight individual geographically based contracts and one boroughwide reserve providers list. The new model of care is designed to bring home care workers into closer alignment with primary care and community health at a local level, to provide a more joined-up, consistent service to residents within eight neighbourhood areas. It will also allow better co-operation with housing neighbourhood teams. This approach will mean that carers can respond more quickly to an individual's changing needs and minimise time spent on travel. Lambeth Council recently signed UNISON's Ethical Care Charter, meaning that all home care workers will be paid the London Living Wage for both travel time and hours of care. This will provide an immediate sizeable pay increase to our excellent, predominantly female, minority ethnic and locally based contracted staff. We are confident that this alongside the new patch-based configuration for contracts will improve the care quality outcomes for residents.

As part of this arrangement, the Council has been working closely with NHS trusts to align the design of the home care neighbourhood model with the existing neighbourhood nursing locality teams. Regular meetings will be held with the neighbourhood nursing team, social care, and care providers to consider ways to further co-ordinate and collaborate. This will drive better relationships between front line workers across health and social care and will lead to improved outcomes for individuals. Neighbourhood teams will aim to use resources more creatively and effectively in a more preventative way.

The new system will be rolled out from April 2024. This is a significant change in how we commission home care, but we have robust governance arrangements and a dedicated mobilisation team to mitigate any risks and ensure that residents receive a safe and supportive transfer.



## Thriving Communities

In July, with funding from Lambeth Together and Lambeth Council's Community Connections Fund, Thriving Stockwell launched Community Living Room health and wellbeing activities.

The Living Rooms, in Stockwell Park Estate and at a community arts space, host health and wellbeing sessions designed and run by local people. Activities include yoga and tai-chi wellbeing groups, rumba classes, coffee and chat sessions for people living with chronic pain, a Safe Space group for women from multi-ethnic communities and a creative sewing club. Community leaders, local councillors, practitioners, partner organisations, and residents leading the sessions came together to officially launch the programme and celebrate the impact of thinking differently; of sharing 'power' with the local community through co-production and co-design as a tool to improve people's lives and health outcomes. This Community Living Room initiative is an example of how we are working to ensure people in Lambeth have access to tailored and culturally appropriate advice and support in community settings to help them stay independent and well.

## Refugee Week

Lambeth celebrated the first Refugee Week in June as a new Borough of Sanctuary and Lambeth Council co-hosted an event welcoming 22 London boroughs who have started the process to receive the Borough of Sanctuary award. Also attended by colleagues from the Lambeth Sanctuary Forum, alongside sanctuary-seeking residents who are part of our resettled refugees, guests from Ukraine, residents living in asylum-hotels and others affected by forced migration.



## Blood Pressure

AT Medics made the news in May with their work to address hypertension, and in particular that they have eliminated the inequalities in the control of hypertension between different communities in their practice population. High blood pressure is a key cause of strokes and heart attack and has a much higher prevalence in black, Asian and multiethnic populations and in deprived communities. The AT Medics Streatham Primary Care Networks' two Practices, Edith Cavell Surgery and Streatham High Practice, in total care for 45,000 patients of whom around 7% have been diagnosed with hypertension.

## Diagnostics

This year, we have been liaising closely with the hospital trusts to improve access to diagnostic tests in Lambeth, in particular facilitating the rollout of new, less invasive endoscopy technologies which can provide patients with a quicker route to diagnosis.

## Electronic Patient Records (EPIC)

On 5th October 2023, both Guy's and St Thomas' hospital and King's College Hospital implemented a new electronic patient record, EPIC. This has impacted how primary care request radiology and blood tests, and we have been closely working with practices to troubleshoot issues and ensure a smooth changeover, whilst maintaining diagnostic pathway access for Lambeth patients.



# Our Plan for the Year Ahead - 2024/2025

## Reviewing 'Our Health, Our Lambeth'

In developing our plan, we reflected on and agreed the ways we would work and what our staff, Partners and residents need, to help us deliver on our outcomes and the activities achieve this.

We recognised that over the course of this five-year plan things would change. National health and care directives would evolve, and the amount and quality of data, intelligence and insights would improve. To be able to adapt to these changes, we built a governance process to regularly review the measures we use to monitor success and to adjust, enhance, and refine them as necessary so that they continue to be fit for purpose. Where things are working well, we may increase our ambition and build upon the success. Where our work is not having the results we expected, we will learn from this and adjust our approach so that we get back on track.

Lambeth Together have collectively committed to 'Our Health, Our Lambeth' and have a transparent process for agreeing change through regular reporting to the Lambeth Together

Care Partnership Board in Public. We have also committed to publishing an annual review that will share our year-to-date progress and plans for the coming year - ensuring that this is accessible, easy to understand and contains lived experience.

The Lambeth Together Care Partnership Board will reflect on how well we are doing at meeting our outcomes and our plans for the year ahead.

The Board will consider:

- Is this working?
- Can we do more?
- Do we need to change course?
- Where we have delivered what we said we would, what's next?
- Where we have met our target, should we aim higher?
- Where we have different data, should we review this measure or target?
- What are patients and residents telling us?
- What lessons have we learned?
- What is research evidence telling us about the causes of health inequalities in Lambeth and how can we impact these?

Reflecting on the first year of the Lambeth Together 'Our Health, Our Lambeth' health and care plan we have begun the necessary strides to improving health and well-being across our community. Through the implementation of Our Health, Our Lambeth, we have diligently addressed health inequalities, fostered inclusivity and advocated for positive outcomes for all residents. Our efforts, guided by a commitment to equality, diversity, and inclusion, have reshaped service delivery and driven meaningful change in Lambeth.

As we conclude our annual review, we extend our deepest appreciation to all who have contributed to our collective progress. Your dedication, insights, and collaboration have been instrumental in shaping the transformative work of Lambeth Together. As we look ahead, let us remain steadfast in our commitment to building a healthier, more inclusive Lambeth. Together, we have laid the foundation for continued growth and success, and we are confident that by staying true to our values and principles, we will achieve our collective aspirations.

# Appendix 1 - 2024/2025 plan

## Our Plan for 2024/25

Looking ahead to the upcoming year, our Health and Care Plan is poised to embark on an exciting array of activities aimed at further enhancing the well-being of our community. In 2024/25, we are committed to expanding access to essential healthcare services and we will be focusing on preventative health measures, launching community-wide wellness campaigns aimed at promoting healthy lifestyles and disease prevention. Furthermore, we plan to strengthen our partnerships with local organisations and stakeholders to address social determinants of health, such as housing and food insecurity, to create a more holistic approach to care. Through these initiatives and more, we are dedicated to building a healthier, more resilient community for all.

Outcome	ID	Activity	Status
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>1</b>	Work with local communities, voluntary sector, Primary Care Networks (PCNs) and other partners to ensure residents have access to advice and support in community settings to stay well, which is tailored and culturally appropriate	Continuing activity from 2023/24
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>2</b>	Use a combination of 'Vital 5' and NHS Health Check approach to improve routine identification of smokers and those at greatest risk of obesity, providing brief advice and referral to the stop smoking service and to weight management support	Continuing activity from 2023/24
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>3</b>	Deliver stop smoking services and support including specialist services and community pharmacy provision and strengthen links with hospital and pharmacy stop smoking pathways	Continuing activity from 2023/24
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>4</b>	Set up a new weight management service with better links into communities that have the highest need and are likely to benefit most	Continuing activity from 2023/24

<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>5</b>	Work across the Council and ICB to support a holistic needs-led approach across the whole weight management care pathway to increase access to the most appropriate weight management support for residents	Continuing activity from 2023/24
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>6</b>	Enhanced outreach and engagement, (including outreach for people with disabilities and for new parents) including targeted street outreach for: people experiencing rough sleeping and homelessness (aligned with and complementing rough sleeping grant initiatives where relevant), targeted vulnerable/priority groups including sex workers, crack, heroin users and alcohol users who are not in contact with treatment, and young people not accessing services	Continuing activity from 2023/24
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>12</b>	Improve identification of those with high risk drinking through use of the 'Vital 5' tool and implementing brief intervention and onward referral	Continuing activity from 2023/24
<b>A. People maintain positive behaviours that keep them healthy:</b>	<b>14</b>	Strengthen referral pathways for risky and dependent alcohol drinkers from primary care and acute trust-embedded addiction care teams to treatment services	Activity due to commence in 2024/25
<b>B. People are connected to communities that enable them to maintain good health:</b>	<b>17</b>	Age UK Lambeth, Lambeth Training Hub and primary care to support recruitment and retention of social prescribing link workers	Continuing activity from 2023/24
<b>B. People are connected to communities that enable them to maintain good health:</b>	<b>18</b>	Developing stronger links between PCNs and local communities through PCN Equity Champions, the Thriving Communities programme and Health and Wellbeing Hubs	Continuing activity from 2023/24
<b>B. People are connected to communities that enable them to maintain good health:</b>	<b>20</b>	Providing capacity building support to community and voluntary organisations to further assist their promotion of health and wellbeing and to continue to develop in our Black and diverse communities, trust and confidence in the health and care system	Activity due to commence in 2024/25

<b>B. People are connected to communities that enable them to maintain good health:</b>	<b>22</b>	Support residents through targeted interventions to maximise their incomes, reduce costs and build financial resilience	Continuing activity from 2023/24
<b>B. People are connected to communities that enable them to maintain good health:</b>	<b>23</b>	Engage communities through Lambeth Health Determinants Research & Evaluation Network (HEART) to develop research priorities	Activity due to commence in 2024/25
<b>B. People are connected to communities that enable them to maintain good health:</b>	<b>26</b>	We will review cases of infant deaths and identify common wider determinants of infant mortality in Lambeth. We will use these findings to create a clear programme of work to address this, using community and neighbourhood resources.	Activity due to commence in 2024/25
<b>C. People are immunised against vaccine preventable diseases:</b>	<b>27</b>	Complete a Joint Strategic Needs Assessment Health Profile of Childhood Immunisations in Lambeth using different data sources to better understand our population, collaboratively working with partners and local communities to investigate and identify the current and future health and service needs of our population	Continuing activity from 2023/24
<b>C. People are immunised against vaccine preventable diseases:</b>	<b>28</b>	Review local incentivisation schemes for General Practices (GPs) and explore how they are routinely inviting residents for vaccinations, with the aim to improve vaccination uptake in specific cohorts (such as high-risk groups, over 65s, and children), focusing on those who have previously not responded or declined a vaccination appointment FLU ONLY	Continuing activity from 2023/24
<b>C. People are immunised against vaccine preventable diseases:</b>	<b>31</b>	Health Visitors to continue to actively check immunisation status of new-borns' and infants during routine health reviews and refer parents to GPs for vaccination where required	Continuing activity from 2023/24
<b>C. People are immunised against vaccine preventable diseases:</b>	<b>33</b>	Midwifery teams to promote the UK vaccination programme at antenatal appointments with expectant mothers to increase awareness of the programme and encourage uptake when baby is born	Continuing activity from 2023/24

<b>C. People are immunised against vaccine preventable diseases:</b>	<b>39</b>	Immunisation records of families with under 5-year-olds are routinely checked by health visiting with referrals made to GPs as required	Activity due to commence in 2024/25
<b>C. People are immunised against vaccine preventable diseases:</b>	<b>40</b>	Vaccinations are opportunistically discussed with all families of children who have missing immunisations.	Activity due to commence in 2024/25
<b>D. People have healthy mental and emotional wellbeing:</b>	<b>43</b>	Working as part of South London Listens, increase the number of Wellbeing Hubs and Community Mental Health Champions	Activity due to commence in 2024/25
<b>D. People have healthy mental and emotional wellbeing:</b>	<b>44</b>	SLAM mental health promotion team to develop and implement more needs-led mental health promotion initiatives	Activity due to commence in 2024/25
<b>D. People have healthy mental and emotional wellbeing:</b>	<b>46</b>	Develop and expand Living Well Network Alliance's Culturally Appropriate Peer Support and Advocacy (CAPSA) - this service employs people from Lambeth's Black communities with lived experience of mental health issues to work with and advocate (speak up) for those we support. They work and train with staff in our Living Well Centres and other Alliance teams to improve our support for people from Black communities. Improving our cultural awareness also helps to improve our support to all those from 'minority' communities	Continuing activity from 2023/24
<b>D. People have healthy mental and emotional wellbeing:</b>	<b>51</b>	Implement changes as part of the Patient and Carer Race Equality Framework (PCREF) programme to improve the access, experience and outcomes of the people we support from our Black, LGBTQ+ and other 'minority' communities - the South London and Maudsley NHS Trust, a core member of the Living Well Network Alliance, is one of four national pilots for PCREF which aims to eliminate differences in access, experience and outcomes in mental health for those from Black and Minority Ethnic communities	Continuing activity from 2023/24

<b>D. People have healthy mental and emotional wellbeing:</b>	<b>52</b>	In line with the Children and Young People's Mental Health and Emotional Wellbeing Plan, design and deliver a multi-agency Single Point of Access (SPA) to mental health support, drawing together a range of services seeking to support children and young people and their families	Activity due to commence in 2024/25
<b>D. People have healthy mental and emotional wellbeing:</b>	<b>53</b>	Offer varied emotional wellbeing provision for children and young people that is a cohesive and joined-up offer, that is well-communicated and enables improved access - develop a standardised approach to measuring outcomes across providers	Activity due to commence in 2024/25
<b>D. People have healthy mental and emotional wellbeing:</b>	<b>54</b>	As part of the Suicide Prevention Action Plan and feeding into the Autism strategy work with mental health services to improve the experience of people with autism - relevant recommendations from the evidence review on autism and suicide are considered and adopted	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>57</b>	Open access integrated STI and contraception clinical services will have a refreshed service offer	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>58</b>	We'll work with the London Sexual Health Programme to plan for the future of the London e-service which includes STI and Contraception pathways	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>59</b>	Increase accuracy of partner notification and reporting across all services that perform STI testing	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>60</b>	Increase and improve outreach and education to underserved groups on all aspects of sexual and reproductive health. Promote condom distribution services and benefits of condom use.	Activity due to commence in 2024/25

<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>61</b>	We'll work with pharmacies to consolidate a sexual and reproductive health service offer	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>63</b>	We'll work with the NHS and independent providers to refresh the abortion service offer across SEL and London	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>64</b>	We'll monitor and analyse what our services are delivering and who is accessing them across our clinical provision for abortion, integrated sexual and reproductive health services, GP and other service providers, educational and promotional services and peer support services both in clinic, online and out of clinic.	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>66</b>	Redesign Long-Acting Reversible Contraception (LARC) training and delivery across primary and secondary Care	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>68</b>	Continue to develop online booking across providers to support access and gain 'live' system oversight of capacity, of all service access	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>78</b>	Continue to develop online booking across providers to support access and gain 'live' system oversight of capacity, of all service access	Activity due to commence in 2024/25
<b>E. People have healthy and fulfilling sexual relationships and good reproductive health:</b>	<b>79</b>	Maximise opportunities to co-create improved HIV pathways.	Activity due to commence in 2024/25
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>80</b>	Re-design the NHS Health Checks programme in Lambeth to ensure a focus on improving uptake for those at most risk, by focusing on outreach and delivery in community settings	Activity due to commence in 2024/25

<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>81</b>	We will target health inequalities by increasing invites and uptake of NHS Health Checks and improving referral/diagnosis rates for those with highest risk	Continuing activity from 2023/24
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>82</b>	Embed population health management approaches making better use of data	Activity due to commence in 2024/25
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>83</b>	Align to the Vital 5 prevention work in community settings	Activity due to commence in 2024/25
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>84</b>	Evaluate and review new programme delivery.	Activity due to commence in 2024/25
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>85</b>	Primary care to implement a quality improvement plan with Living Well Network Alliance support to ensure delivery of SMI Health check in line with national targets and quality metrics	Continuing activity from 2023/24
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>88</b>	Personalised care-improve % of people with an agreed Health Action Plan following identified risk as result of AHC	Continuing activity from 2023/24
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>89</b>	Promotion of AHC amongst target population especially those from black minority groups i.e., Big Health week.	Continuing activity from 2023/24
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>90</b>	Increase the uptake of all cancer screening across our diverse communities particularly for those whom English is not their first language including local Portuguese and Spanish speaking community	Continuing activity from 2023/24

<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>91</b>	Deliver the Catch 22 Bowel Cancer Screening initiative, involving targeted work to increase the uptake of bowel cancer screening in Lambeth where 26 General Practices identified with the lowest uptake have been invited to take part in the bowel cancer screening calling initiative and non-responders will be contacted by Catch 22 multilingual facilitators and encouraged to complete the FIT kit on behalf of practices who opt-in	Continuing activity from 2023/24
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>94</b>	Development of data dashboard of HIV testing and diagnoses across the system including acute setting, primary care and community services	Activity due to commence in 2024/25
<b>F. People receive early diagnosis and support for physical health conditions:</b>	<b>98</b>	Sexual Health and HIV training commissioned for primary care staff	Activity due to commence in 2024/25
<b>G. People who have developed long term health conditions have help to manage their condition and prevent complications:</b>	<b>101</b>	The Lambeth Community Diabetes Service will work very closely in partnership with General Practices, Primary Care Networks, Guy's and St Thomas' Hospital (GSTT), King's College Hospital (KCH), The South London and Maudsley Hospital (SLAM), Community Pharmacies and other partners, to improve population health and reduce inequalities	Continuing activity from 2023/24
<b>G. People who have developed long term health conditions have help to manage their condition and prevent complications:</b>	<b>107</b>	Improve the information that the GP has to advise those with Chronic pain to access treatment	Continuing activity from 2023/24
<b>G. People who have developed long term health conditions have help to manage their condition and prevent complications:</b>	<b>108</b>	Work with a group of patients who have chronic pain to improve the provision & information to access pain services in the community and from their GP	Activity due to commence in 2024/25
<b>G. People who have developed long term health conditions have help to manage their condition and prevent complications:</b>	<b>109</b>	Hypertension workstream to coordinate all Lambeth hypertension activity with a focus on reducing health inequalities	Continuing activity from 2023/24

<b>G. People who have developed long term health conditions have help to manage their condition and prevent complications:</b>	<b>114</b>	We have implemented a community diagnostics service for cardiovascular disease, which helps us identify hypertension.	Continuing activity from 2023/24
<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>119</b>	Monitor and review Living Well Network Alliance Single Point of Access capacity and performance to agree service model	Continuing activity from 2023/24
<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>121</b>	Undertake regular outreach sessions at community events within Lambeth to promote the Lambeth Talking Therapies service, audit service user experience to feedback into service development and pilot model of culturally appropriate group therapy with Black Thrive	Activity due to commence in 2024/25
<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>128</b>	Develop specialist eating disorder and complex psychological and behavioural needs pathway to enable more people to be supported in the community and reduce unplanned admission due to crisis	Activity due to commence in 2024/25
<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>129</b>	Improve the diversity in ethnicity of children and young people accessing Mental Health School Teams - agree baseline from 22/23 annual report, set target for 23/24 with regular monitoring and establish task and finish group to consider how this can be improved	Continuing activity from 2023/24
<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>130</b>	We will continue to develop and deliver our Mental Health School Teams in Lambeth schools and improve the diversity in ethnicity of children and young people accessing this support - we will roll out of MHSTs to another 14 schools in early 2023/24, enabling us to ensure we have widespread cover across 28 schools	Continuing activity from 2023/24
<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>131</b>	Working with a voluntary sector provider to consult with children and young people in schools, to better understand emotional health and wellbeing needs relating to our LGBTQ+ community	Continuing activity from 2023/24

<b>H. When emotional and mental health issues are identified; the right help, support and diagnosis is offered early and in a timely way:</b>	<b>132</b>	Delivering a pilot with SLAM and community organisations (The Well Centre, Coram and Place 2 Be) to better understand how we can join up our response to CYP emotional health and wellbeing need, bringing services, data and statutory provision together.	Continuing activity from 2023/24
<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>133</b>	Lambeth Together Delivery Alliances support the development of equitable provision of integrated care in the borough - the Neighbourhood and Wellbeing Delivery Alliance (NWDA) supports the creation of health and care community networks (called Thriving communities) to inform neighbourhood service development with a particular focus on providing an equitable offer of health and social care and development of localised health solutions for all our residents	Activity due to commence in 2024/25
<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>135</b>	Primary Care Networks (PCN) and community-based partners will explore opportunities to evolve integrated neighbourhood provision and models using insight from residents and service users to inform localised provision such as neighbourhood teams for mental health and workforce development to support flexible multi-disciplinary teams	Activity due to commence in 2024/25
<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>136</b>	Use our wide range of existing estates for the delivery of integrated services from a range of partners including community groups	Activity due to commence in 2024/25
<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>137</b>	Each PCN to have a social prescribing team which is expanding and recruiting to specialist posts in recognition of local need, including dedicated children and young people posts and mental health	Activity due to commence in 2024/25
<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>140</b>	Refine and develop the approach to Population Health Management around the Core20	Activity due to commence in 2024/25
<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>143</b>	Development of the London Care Record that supports the delivery of holistic care to patients and can be used from across health and care services	Activity due to commence in 2024/25

<b>I. People have access to joined-up and holistic health and care delivered in their neighbourhoods:</b>	<b>144</b>	Ensure there are tailored ways to support groups who often find it difficult to access healthcare, such as asylum seekers and traveller communities.	Continuing activity from 2023/24
<b>J. People know where to go to get the right help, and are treated at the right time, in the right place, for their needs:</b>	<b>146</b>	Demand management including review of access routes and alternative appointment slots in community/primary care and access to these and the potential benefits of digital access in emergency departments to support direct appointment bookings	Activity due to commence in 2024/25
<b>J. People know where to go to get the right help, and are treated at the right time, in the right place, for their needs:</b>	<b>150</b>	Increase the use of digital tools including the NHS app so that patients may more easily be equipped to take greater control over their health and care and to access care at the right time and place	Continuing activity from 2023/24
<b>J. People know where to go to get the right help, and are treated at the right time, in the right place, for their needs:</b>	<b>152</b>	Use digital software (Apex) to support GP practices to understand their population needs and provide and redeploy workforce accordingly across Primary Care Networks	Continuing activity from 2023/24
<b>J. People know where to go to get the right help, and are treated at the right time, in the right place, for their needs:</b>	<b>154</b>	Development of the London Care Record that supports the delivery of holistic care to patients and can be used from across health and care services	Activity due to commence in 2024/25
<b>J. People know where to go to get the right help, and are treated at the right time, in the right place, for their needs:</b>	<b>160</b>	People with mental ill-health have the right support at the right time to avoid unnecessary periods in ED including by being discharged appropriately and in a timely way from ED and inpatient beds	Continuing activity from 2023/24
<b>J. People know where to go to get the right help, and are treated at the right time, in the right place, for their needs:</b>	<b>161</b>	Engage in the development and deployment of a London Care Record that supports Advanced Care Planning.	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>168</b>	Review delivery model of reablement across the partnership; integrating clinicians, ensuring access to the service is equitable in general and between the community pathway and the discharge pathway	Activity due to commence in 2024/25

<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>169</b>	Review of pilot on Adult Social Care 'front door' with Age UK Lambeth and design future model of delivery, ensuring an inclusive and equitable service, with an interface with community health and primary care	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>170</b>	Work collaboratively within SEL ICS to implement and embed a 'core offer' for community Specialist Palliative Care providers	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>171</b>	Prioritise integration of Palliative and End of Life Care into frailty pathways and 'virtual wards' models	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>172</b>	Work collaboratively with the Lambeth Carers Service to ensure carers are supported in their caring role, have access to the information and resources they need, and feel recognised locally for their contribution	Continuing activity from 2023/24
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>173</b>	Review, launch and implement new Carer's Strategy and review the support and information available for carers	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>174</b>	Carers to receive health and wellbeing interventions, including vaccinations, from the right workforce in their general practice Primary Care Network	Activity due to commence in 2024/25

<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>175</b>	Carers can access support through their practice Personalised Care team including Social Prescribing Link Workers	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>176</b>	Enable primary care providers to develop Advanced Care Planning in their practices and around them - linking with local system providers to share ideas and collaborate	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>177</b>	Falls are the largest cause of emergency hospital admissions for older people, and significantly impact on long term outcomes, e.g. being a major precipitant of people moving from their own home to long term nursing or residential care. To reduce emergency admissions due to falls in people aged 65 and over we will carry out a falls prevention campaign which will include Lambeth based falls prevention leaflets, e-training to non-health care staff and increased provision of strength and balancing classes	Activity due to commence in 2024/25
<b>K. Older adults are provided with the right health and care support at the right time, live healthy and active later lives and are supported to age well:</b>	<b>178</b>	We will make dementia friendly training available to help ensure that people with dementia feel understood, valued and able to contribute to their community	Activity due to commence in 2024/25
<b>L. Women have positive experiences of maternal healthcare and do not experience a disproportionate maternal mortality rate:</b>	<b>182</b>	Work with colleagues across the system to pull together a comprehensive dataset for Lambeth women using maternity services to counter significant inequalities in experience. This includes partnership working through Local Maternity and Neonatal Systems (LMNS) consolidating maternity metrics across providers and utilisation of analytic resources produced by SEL BI team, such as, Core20PLUS5. This will allow us to create a localised action plan to meet the specific needs of Lambeth women	Activity due to commence in 2024/25

<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>188</b>	Review crisis intervention/admission prevention services to agree improved borough offer	Activity due to commence in 2024/25
<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>191</b>	People with learning disabilities are less likely to be in employment than the overall population. We will monitor and report on how many people are with learning disabilities are in work and how many opportunities for supported employment we are able to create	Activity due to commence in 2024/25
<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>192</b>	Developing new supported employment and internship opportunities through our health and care partners.	Continuing activity from 2023/24
<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>193</b>	Develop the Lambeth All-Age Autism Strategy with users, carers and partners	Continuing activity from 2023/24
<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>198</b>	Contribute to the South East London Integrated Care Board Learning Disability and Autism Programme and support the development of integrated, workforce plans for the learning disability and autism workforce	Continuing activity from 2023/24
<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>201</b>	Extend capacity for Living Well Network Alliance Home Treatment Team to support more people experiencing mental health crisis in the community	Activity due to commence in 2024/25

<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>202</b>	Develop specialist eating disorder and complex psychological and behavioural needs pathway to enable more people to be supported in the community and reduce unplanned admission due to crisis	Activity due to commence in 2024/25
<b>M. People with learning disabilities and/or autism achieve equal life chances, live as independently as possible and have the right support from health and care services:</b>	<b>205</b>	Deliver on the reprovision of the Lambeth Hospital together with SLaM, including the mobilisation of a redesigned inpatient care model to provide better quality and more culturally appropriate clinical service	Activity due to commence in 2024/25
<b>N. People who are homeless, or at risk of becoming homeless, (including rough sleepers and refugees) have improved health:</b>	<b>207</b>	A specialist team will support single households in Temporary Accommodation to secure offers of long term settled accommodation	Continuing activity from 2023/24
<b>N. People who are homeless, or at risk of becoming homeless, (including rough sleepers and refugees) have improved health:</b>	<b>209</b>	The Lambeth Rough Sleeping Outreach Team will continue to target all rough sleepers found in Lambeth to ensure everyone is offered a route off the streets. Long term entrenched rough sleepers will continue being case worked by specialist roles within the team such as a Living On The Streets worker, and embedded roles such as a Public Protection Officer and an Approved Mental Health Professional.	Continuing activity from 2023/24
<b>N. People who are homeless, or at risk of becoming homeless, (including rough sleepers and refugees) have improved health:</b>	<b>211</b>	Develop model to allow cross referencing GP registration for those in supported housing, with engagement with GP	Activity due to commence in 2024/25
<b>N. People who are homeless, or at risk of becoming homeless, (including rough sleepers and refugees) have improved health:</b>	<b>212</b>	Develop intelligence to review how long rough sleepers brought into accommodation, have sustained tenancy.	Activity due to commence in 2024/25

# Appendix 2 - Managing risks

The matrix below represents the possible combined risk scores based on a measurement of both the likelihood (probability) and severity (impact) of risk issues. A combination of likelihood and severity score provides the combine risk score. Risk score is form 1-25 (1= rare and negligible severity and 25 = Almost certain and catastrophic).

Risk	Risk Description	Current Risk Rating	Target Risk Rating	Risk Mitigation
Data and intelligence	Insufficient or poor-quality data results in an inability to track the progress and evaluate our interventions and impact. Incomplete, outdated, or inaccurate data hinders the effectiveness of our decision-making and analysis.	8	6	<p>Continue to invest in how we collect and record data to improve the richness of our data, making information more timely, accurate and complete, building on existing relationships between the analytical teams across the partnership.</p> <p>Develop an assurance mechanism through the assurance group to review monitor and evaluate progress and to enable scrutiny of the validity of data and intelligence.</p> <p>Build into our governance process the mechanism to periodically review the plan and to adjust, improve, and refine how we monitor delivery and adjust performance indicators as data quality improves.</p>
Financial savings/ pressures	Lambeth Together partner organisations need to make financial savings and/or face significant budget pressures.	16	8	<p>Partner organisations continue to provide a stable financial environment that supports improvement and investment in healthcare and outcomes. The commitment to financial sustainability will be vital to ensuring a robust and effective delivering of core responsibilities, secured through approaches that demonstrably improve productivity, efficiency, and value through making the best possible use of funding available.</p>

Risk	Risk Description	Current Risk Rating	Target Risk Rating	Risk Mitigation
Wider economic impact on inequalities	We know that our focus as a health and care system must be on tackling unfair and avoidable differences in health between different groups of people, that were exacerbated through the Covid-19 pandemic. A national cost of living crisis, high inflation and rising costs, threatens to worsen living standards and increase poverty, which could lead to a widening of inequalities.	12	9	Work in partnership with Lambeth Council's Cost of Living programme to provide extra support for residents most impacted by the cost of living crisis, including ensuring offers of support for residents are communicated throughout the health and care system.
Rise of infectious disease(s)	Future pandemic or epidemic of an infectious disease such as flu or Covid-19. Managing a pandemic may inhibit our collective ability to deliver this plan.	12	6	Infectious disease prevention measures to remain in place and promoted to the public. Public Health pandemic planning to be in place.
Workforce	Reduced ability to recruit, retain and support staff.	9	6	Software ("Apex") rolled out to support General Practices to effectively plan their workforce requirements, based on healthcare needs in the borough.
				The Lambeth Together & Development Hub to develop Peer support groups for the workforce to encourage resilience and personal development.
				The Lambeth Together & Development Hub is working with practices to develop apprenticeships for healthcare workers in Lambeth.

Risk	Risk Description	Current Risk Rating	Target Risk Rating	Risk Mitigation
				<p>Lambeth will pilot the Automation of Patient Registration to facilitate administration function in General Practice, which will benefit both the patient and General Practice Workforce.</p> <p>Commit to supporting the workforce to relate to our communities' lived experience, is representative of and supports our diverse and intersectional communities.</p> <p>Support carers pay, as part of Lambeth's Ethical Care Charter.</p> <p>Engage with, and across, our workforce including through our Clinical and Care Professional Network.</p>
Immunisations Fatigue	Vaccine hesitancy, fatigue and reluctance in the population following the Covid-19 pandemic.	12	3	<p>As part of our childhood immunisation strategy for 2023-2025, regular engagement activities will be held at trusted community sites to develop a greater understanding of underserved and marginalised communities. These sessions will be held in person, and online, and provide a forum where residents can ask questions related to vaccine preventable diseases, along with other common childhood illnesses. In addition to this, a targeted communication strategy will be co-developed with key stakeholders and be carried out in community languages on various platforms. A robust training package is also being developed for clinical and non-clinical staff working with children and their families to strengthen Making Every Contact Count and ensure a consistent approach to building vaccine confidence within Lambeth.</p> <p>Each general practice will produce and implement their protocol and systems to promote uptake of vaccinations and immunisations including a robust process to invite people to be vaccinated in accordance with the national schedule. This should include routine monthly searches on the clinical system to identify outstanding eligible cohorts and look ahead reports where appropriate.</p>

Risk	Risk Description	Current Risk Rating	Target Risk Rating	Risk Mitigation
System-wide demand	Demand on the health and care system impacts Lambeth Together to the extent that it constrains partner ability to prioritise transformation.	16	12	Executive group to review system pressures regularly and consistently, alongside transformation work, and encourage operational information sharing and solution-focused partnership working.
Changes to national priorities	Legislative changes or changes in national priorities impacts upon local priorities.	8	4	Ensure <i>Our Health, Our Lambeth</i> remains flexible and adaptable by building into our governance a process to periodically review the plan and to adjust, improve, and refine as necessary so that the plan continues to be fit for purpose. Formally review the plan annually and propose changes to be agreed by the Lambeth Together Care Partnership Board.
Enablers are not present	In developing our plan, we have reflected on and agreed the ways we need to work and what conditions we need to succeed. If these enabling factors are not present, this will impact our ability to meet our outcomes.	12	6	Ensure existing working groups are aligned to and delivering on our Enablers Where our Enablers need dedicated improvement, we will bring together the right people to do this. We will pay attention to the Enablers in the same way we do our outcomes and build oversight of these enablers into our governance and ways of working.

# Appendix 3 - Financial Context

At the outset of our five year plan, we recognised that both the economy and public sector funding is expected to be constrained.

As we enter financial year 2024/25, South East London ICB continues to work in a significantly financially challenged environment, exacerbated by wider system operational pressures, South East London ICB requires each Place to achieve a minimum 4% cash releasing efficiency savings, plus manage further cost pressures and proposed investments.

Lambeth Council faces a similarly challenging environment. Over the past 6 months the Council has refreshed its 2024/25 financial planning assumptions, including savings proposals across its activities. The Council’s overall savings target for 2024/25 is £28.9m, of which £5.6m relates to Adult Social Care and Children’s Services.

NHS providers face a challenging financial context with the need to deliver significant savings to secure financial sustainability as well as address service recovery expectations.

Within the NHS, we will need to continue be realistic in our resource assumptions and combine the need to deliver improved effectiveness and outcomes through transformation and prevention. With our first year of our plan, and for the years ahead, we will seek to prioritise those interventions that address inequality in outcomes.

SouthEast London Integrated Care Board Budget - Lambeth	Total Budget £000
Hospital Services	375,072
Community Health Services	95,217
Mental Health Services	122,968
NHS Continuing Care Services	34,616
Prescribing	42,472
Other Primary Care Services	2,990
Primary Care Services delegated from NHS England	82,751
Corporate Cost	3,564
<b>Total</b>	<b>759,650</b>

2024/25 Council Revenue Budgets	£000
Integrated Commissioning / Integrated Health & Care	1,720
Public Health	£36,844*
Adult Social Care	107,355
Children’s Services	110,464
<b>Total</b>	<b>£256,383</b>

\*Public Health grant funding



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