

LAMBETH TOGETHER CARE PARTNERSHIP BOARD MINUTES

Wednesday 8th March 2023 Suite 16, Lambeth Town Hall, Brixton Hill, SW2 1RW

Members Present:

Olla lias Diales se	Cabinet Member for Healthier Communities (job-share), Lambeth Together Care
Cllr Jim Dickson	Partnership Board Co-Chair – Lambeth Council.
Ruth Hutt	Director of Public Health – Lambeth Council.
D 4 1 2 11	GP, Living Well Network Alliance Clinical and Care Professional Lead – Southeast
Dr Adrian McLachlan	London Integrated Care Board.
Dr Raj Mitra	GP, Children and Young People's Alliance Clinical and Care Professional Lead – Southeast London Integrated Care Board.
Cllr Marcia Cameron	Cabinet Member for Healthier Communities (job-share) – Lambeth Council.
Cllr Ben Kind	Cabinet Member for Children and Young People – Lambeth Council.
Sue Gallagher	Lambeth Together Care Partnership Board Lay Member – Southeast London Integrated Care Board.
Sarah B Flanagan	Patient and Public Voice Member.
Richard Wiltshire	Patient and Public Voice Member.
Andrew Eyres	Strategic Director, Integrated Health and Care, Lambeth. Place Lead Executive, Lambeth – Southeast London Integrated Care Board.
Dr George Verghese	GP, Co-Chair of the Lambeth Primary Care Clinical Cabinet – Southeast London Integrated Care Board.
Dr Penelope Jarrett	Chair - Lambeth Local Medical Committee.
Mairead Healy	Chief Executive - Healthwatch Lambeth.
Dan Stoten	Director of Integrated Children's Commissioning and Youth Services – Lambeth Council, deputising for Andrew Carter, Strategic Director of Children's Services – Lambeth Council.
Paran Govender	Director of Operations and Partnerships, GSTT NHS Foundation Trust – Southeast London Integrated Care Board, deputising for Sarah Austin, Chief Executive Integrated and Specialist Medicine, GSTT NHS Foundation Trust – Southeast London Integrated Care Board.
Richard Outram	Acting Director of Adult Social Care – Lambeth Council, deputising for Fiona Connolly, Executive Director of Adult Social Care, Strategic Director of Children's Services – Lambeth Council.

Apologies:

Dr Di Aitken	GP, Lambeth Together Care Partnership Board Co-Chair. Neighbourhood and Wellbeing Delivery Alliance Clinical and Care Professional Lead – Southeast London Integrated Care Board.
Fiona Connolly	Executive Director of Adult Social Care, Strategic Director of Children's Services – Lambeth Council.
Paul Coles	CEO – Age UK, Lambeth.
Sarah Austin	Chief Executive Integrated and Specialist Medicine, GSTT NHS Foundation Trust – Southeast London Integrated Care Board.
Andrew Carter	Strategic Director of Children's Services – Lambeth Council.
Kirsten Timmins	Deputy Chief Operating Officer, South London, and the Maudsley NHS Foundation Trust – Southeast London Integrated Care Board.
Julie Lowe	Site Chief Executive, Kings College Hospital NHS Foundation Trust – Southeast London Integrated Care Board.
Therese Fletcher	Managing Director, Lambeth GP Federation – Southeast London Integrated Care Board.



Vacant	Black Thrive Director.

In Attendance:

Edward Odoi Warren Beresford	Associate Director, Finance, Lambeth – Southeast London Integrated Care Board. Associate Director, Health and Care, Planning, and Intelligence – Southeast London Integrated Care Board.
Gerry Evans	Lambeth Together Engagement Manager – Lambeth Council.
Juliet Amoa	Associate Director, Community Health, and Engagement – Lambeth Council.
Jane Bowie	Director of Integrated Commissioning (Adults) - Lambeth Council.
Sophie Taylor	Lambeth Together Programme Lead – Lambeth Council.
Oge Chesa	Director of Primary Care and Transformation – Southeast London Integrated Care Board.
Catherine Flynn	Head of Communications and Engagement – Southeast London Integrated Care Board.
Rebecca Manzi	Lambeth Together Project Officer – Lambeth Council.
Pamela Handy	LBSAT Business Support Manager – Southeast London Integrated Care Board.
Niymeti Ramadan	Lambeth Together Project Officer – Southeast London Integrated Care Board.
Cheryl Smith	Governance Lead – Southeast London Integrated Care Board.
Vida Cunningham	Public Health Specialist – Lambeth Council.
Bimpe Oki	Consultant in Public Health – Lambeth Council.
Jessica Engen	Speciality Registrar in Public Health – Lambeth Council.
Marcia Dillon	Sports Development Officer – Lambeth Resident.
Raks Patel	Healthwatch Lambeth.

1 Introductions

Cllr Jim Dickson welcomed members to the meeting and noted the topics discussed during the public forum that included:

- Care for neuro-diverse residents.
- Warm spaces and the impact of their opening times.
- The Board meeting being held in-person only and not virtually/hybrid.
- Indoor air quality in public spaces, especially transport and schools and the plans to address this.

The responses to the above questions will be published on the Lambeth Together Website

The following discussions were also had:

- Industrial action and a reminder of the current position. The Royal College of Nursing and London Ambulance Service union strikes were called-off. The Junior Doctors' strike is going ahead next week, and our sites are working on plans to mitigate impact.
- Minnie Kidd House this was the subject of discussion during Board meetings last year as it
 ceased its role as a care home. It is now being used as a community eye clinic and has been
 open since the end of Autumn last year. Congratulations and thanks to all were given for making
 that transition.
- Social Prescribing Day on 9th March was highlighted Cllr Dickson thanked the Patient and Public Voice Member, Rich Wiltshire, for sharing his thoughts and starting a discussion on social prescribing.

Those present introduced themselves and apologies were noted from Dr Di Aitken, Fiona Connolly, Paul Coles, Sarah Austin, Andrew Carter, Kirsten Timmins, and Julie Lowe.



Cllr Dickson mentioned that it was International Women's Day and wanted to note the huge amount of work being carried out in celebration within Lambeth Together and that across partners.

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 11 January 2023 Meeting

The minutes of the meeting of Wednesday 11 January 2023 were agreed as an accurate record of the meeting.

4 Decisions for Ratification – Recommissioning Lambeth Community Diabetes Service

Cllr Dickson explained that in the January Board meeting, members discussed the community diabetes services where it was agreed that option 1 would be considered. Cllr Dickson asked members to look at the paper and agree the recommendation to move forward with option 1.

APPROVED

1. To note the Chairs' Action, which was approved.

To view the Chair's Action accompanying this item, refer to page 11 of the agenda pack.

5 Lambeth Together Care Partnership – Place Executive Lead Update

Andrew Eyres provided an overview of key developments since the last Board meeting. The following was mentioned:

- We now have our full complement of Clinical and Care Professional Leads, and we are one of only two South-East London boroughs to do so. The network meets quarterly, and they first met in January.
- The Lambeth Health and Wellbeing Strategy was published after the January Lambeth Health and Wellbeing Board and Andrew noted that we will respond to this strategy through our Lambeth Together Strategic Health and Care Plan, which we will hear about later today.
- Fantastic news for the borough that Crowndale Medical Centre has now been reopened and Minnie Kidd House is being utilised.
- The Combatting Drugs Partnership is underway, chaired by Ruth Hutt. Resources have been applied for and the plan of action will be coming out soon. Andrew explained this is an important partnership and sits alongside Lambeth Together.

RESOLVED

1. To note the update.

To view the report accompanying this item, refer to pages 13 to 18 of the agenda pack.

6 Lambeth Together Strategic Health and Care Plan

Sophie Taylor presented an update on the Health and Care Plan and explained that the Board was being asked to agree the initial activities and impact measures within the Plan.



Sophie gave a brief reminder of the development of the Plan to date, which included:

- The Lambeth Together Strategic Health and Care Plan framework has been created to deliver
 the work and approaches we should take as a health and care partnership over the next 5
 years, aligning the principles and priorities to the Lambeth Health and Wellbeing Strategy, the
 Integrated Care Strategy and Lambeth Borough Plan.
- The plan includes aspirations for residents, what we want to improve upon (outcomes), principles of how we will work, how we will measure impact and commitment to keeping the document live.
- Aspirations were agreed by the Board in the October Board Seminar and the model for impact measures was agreed in the December Board Seminar.
- Between January and February, the five delivery programmes and three Alliances have been working hard to develop and compose the proposed initial impact measures and delivery activities.
- In the February Board Seminar, Board members reviewed and contributed to the development of six key outcomes that cross over key programmes and Sophie assured members that all comments have been taken away, reviewed, and reflected on.
- Some of the key themes that came out of the Seminar included the need for us to strengthen data by ethnicity and capturing patient feedback.
- Following today's meeting, the Plan will be reviewed in full at the April Board Seminar, with a view to final sign-off at the next public Board meeting in May.

Sophie handed over to the Board to discuss and to consider if the correct content has been included.

The following discussion took place:

- Dr Penelope Jarrett asked if Sophie had received her comments via email, which Sophie had. Dr Penelope Jarrett mentioned if we are signposting, where are we signposting to and explained that there is the issue of patients being able to access GP appointments quickly when there are a limited number available. Dr Penelope Jarrett also asked how we would adapt the plan in the future, as it is a five-year plan, context will be subject to change.
- Mairead Healy expressed the need to have an accessible version of the Plan open to everyone to read and understand. Mairead highlighted Outcome I and that she would like to see data collected across the whole referral pathway, not just when children and young people are accessing services. For Outcome G, Mairead mentioned it would be great to see how we ensure communities that have difficulty of access, for example, the Traveller/Refugee community, have their difficulties addressed within that outcome. Mairead explained that Healthwatch are aware of the issues with Ukrainian Refugees and thought it would be great if more of that detail around how these communities will meet the outcome of joined up care.
- Dr George Verghese explained that we will know if we are successful in this Plan if we end up delivering something better, and agreed with Dr Penelope Jarrett's point around how easy will we be able to adapt from the headings the plan sits in. Dr George Verghese explained we should build in reviews of the plan.
- Cllr Ben Kind would like to revisit Outcome C regarding the 50% target for the MMR vaccine. Cllr Kind explained that the World Health Organisation says the target should be 95% and that England is at 89% so thought it was odd that we would have 50% as the target and that we should aspire to 100% for all vaccinations. Ruth Hutt explained that the overall target is 90-95% and the focus is on those not being vaccinated at all and not responding so we wanted at least 50% of those people captured this has been clarified already in the updated version of the Plan.
- Sue Gallagher asked if we could use a similar diagram that is within the Plan to explain the before and
 after, when we review annual progress. Sue highlighted the need to highlight our dependencies, such
 as finances, workforce, and IT.
- Andrew Eyres explained we will stay flexible and be adaptable to changing context. The outcomes will
 be critical and as a Board, we need to give flexibility to our Alliances and programmes to adapt. We
 need to keep an eye on the data and dashboards, we need to adapt to difficulties and predict the
 changes, which will be our challenge.



- Raks Patel asked if there is a risk register. Andrew explained the Plan will tell us what our risks are, and the Lambeth Together Assurance group will oversee risk management.
- Ruth wanted to highlight the amount of work that had been done with the Plan and wanted to say well
 done to all those involved for bringing it together. Ruth wanted to encourage members to read the Plan
 in full as she wanted members to be mindful that as a system, we are contributing to every outcome.
- Cllr Dickson thanked everyone for their feedback and explained the feedback will be reflected in the next version, to be considered at the April Board Seminar.

RESOLVED

1. To note the presentation.

To view the presentation accompanying this item, refer to pages 19 to 48 of the agenda pack.

7 Lambeth Together Primary Care Commissioning Committee Update

Sue Gallagher and Oge Chesa updated on the first Lambeth Together Primary Care Commissioning Committee meeting. Sue and Oge read from the presentation slides and went on to explain that:

- The draft Terms of Reference were amended due to the South East London body requirements and a good discussion was had.
- Sue went on to explain that at the meeting, members received an update on workforce and the Lambeth Together Training Development Hub. They were also updated on digital first and performance data to see how Primary Care in Lambeth performs generally. The Lambeth Pharmacy First service pilot was discussed.
- Dr Penelope Jarrett expressed she has reservations about the Terms of Reference as it is
 difficult for us to put into words exactly what we are doing, and her reservations apply to the
 Terms of Reference ratified in September Oge explained they were mindful that things will
 need changing in the next 12 months and they will be flexible as developments do occur and
 will notify the Board as and when things are reviewed.
- Cllr Dickson thanked the team involved and noted the outputs of the Commissioning Committee
 and that the Board agreed to ratify the Terms of Reference to ensure the Board can exercise
 governance over the Committee.

RESOLVED

1. The Terms of Reference have been ratified.

To view the presentation and Terms of Reference accompanying this item, please refer to pages 49 to 64 of the agenda pack.

8 Lambeth Together Assurance Update

Sue Gallagher and Warren Beresford updated the Board on the Lambeth Together Assurance group and explained:

- The latest Lambeth Together Assurance Group meeting in February focused on two key areas
 that contribute to the Lambeth Together Strategic Health and Care Plan, namely, promoting
 healthy lifestyles and the uptake of NHS health checks and the role of mental health support in
 supporting people back into employment.
- The Lambeth Together Assurance report was reviewed, and the following were noted as challenges: Alliances are having resourcing issues. The Children's Commissioning report highlighted more referrals of domestic abuse and repeat cases. Flu vaccine uptake is lower than expected. The Living Well Network Alliance highlighted extremely high pressures on mental health services.



- Warren also wanted to recognise the successes, namely: the Learning Disability and Autism
 health checks were well above the national ambition of 75%. In terms of Severe Mental Illness
 health checks, we were most improved in performance against other boroughs and were the
 second highest in South East London, behind Southwark. There has been an increase in
 referrals to Lambeth Talking Therapies.
- The Lambeth Together Assurance report and process will be developed alongside the Lambeth Together Strategic Health and Care Plan, so it is based around the outcomes and not programmes.

The following discussion was had:

- Mairead Healy expressed it was great to hear about the successes. Regarding the increase in referrals to Lambeth Talking Therapies and data, is it more about the communities who use the services less? Dr George Verghese explained the number of referrals into Lambeth Talking Therapies is going down – the success is we are giving the treatment but less referrals are happening.
- Andrew Eyres explained that when looking at measurements, Black communities don't always
 count against national targets and if we want to address that properly, we need to loosen up
 the definitions and bring in more community facing adaptations. It's not always targets driving
 this, it's about people's outcomes and experience.
- Dr Penelope Jarrett explained that with the referrals process, the website isn't user-friendly and isn't clear to everyone who accesses it we offer a variety of services, and we should have a website that is easier to navigate communications could be better.
- Dr Penelope Jarrett asked how risks are being calculated as the risks aren't mentioned. Warren explained there is a section on risk and Sue confirmed risk wasn't discussed at the previous meeting because the way in which the risks have been worded wasn't thought to be appropriate. Andrew explained the Integrated Care Board are reviewing the way it presents risks and that we need our own risk register and agrees that the Health and Care Plan and Lambeth Together Assurance meetings will address the risks.

RESOLVED

1. To note the presentation.

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

9 Staying Healthy – Deep Dive

Bimpe Oki, Jessica Engen, Vida Cunningham and Marcia Dillon updated the Board on the Staying Healthy Programme.

Cllr Marcia Cameron explained that we have an aging population in Lambeth and the paper today is about the first steps we are taking towards shaping an Age Friendly Borough to allow residents to live independent and healthier lives. Cllr Cameron explained that the paper had been presented at Cabinet and the Lambeth Health and Wellbeing Board, to focus on preventative measures and improving health outcomes for the older population.

Jessica Engen, Vida Cunningham, and Marcia Dillon went through the presentation with the Board and were joined by a resident from Lambeth who runs the Silverfit charity.

Silverfit is a charity where the average age is between 69-70 and at least 400 people come every week to a session where they complete an activity and have coffee. Silverfit would like to increase activities further in Lambeth and are keen to link internally for opportunities to work together. Maintaining the social link is very important and is what keeps people coming.

Cllr Dickson thanked presenters for presenting.

The following discussion was had:



- Sue Gallagher expressed the presentation was wonderful and explained she is interested in the fact that dementia wasn't mentioned in the survey. Sue worried about people in their 60s fearing dementia and asked what would happen if someone was living alone and how they would cope with it. Sue asked if there was a reason it wasn't mentioned? Jessica explained that Dementia Friendly is important to those working within the Age Friendly team and the team are looking to produce a health profile to look at data around the indicators that impact upon older people, with dementia being one of those. Although dementia is not mentioned within 1 of the 8 domains, there will be a steering group with multi-stakeholders involved. The team will want to work closely to see how we can support various groups in terms of dementia and the considerations we want to make. Part of the engagement work we will carry out will include a survey so we will include questions around support dementia. Cllr Cameron added that the team are working closely with Age UK and there is a dementia club at Knightsfield Group, with all different types of brain exercises on their website to complete.
- Sarah Corlett wanted to refer to the population change and was wondering, looking at the
 population of elderly residents who either privately rent or own their properties, if there was
 anything people wanted to do about the very large elderly population using health services –
 do we want to intervene and what about young people as well? Dr Mitra mentioned we have
 Dementia Friendly, Child Friendly and Age Friendly Lambeth.
- Mairead Healy expressed it was fantastic to hear about the residents' experiences and noted it was important to hear from residents. Mairead explained Age Friendly Lambeth is far ahead in terms of other areas and are really trying to take the holistic approach across all areas of the council. Regarding the eight domains, some will have an evidential based link but others, like design spaces or council house repairs, won't naturally link to health but will impact on health and Mairead was curious to hear about the measurement of that huge impact on housing and wondered if we need to do an analysis to think about how we may respond to this issue.
- Andrew Eyres mentioned that Lambeth is an aging population and the number of people around
 to support the population is decreasing. He explained we present these services as though they
 are nice things to do, when they are imperative. The system will grind to a halt so we need to
 invest in these services if we don't act now, we will be in a reactive place. We need to do an
 analysis to think about how to respond to elderly services and the impact on housing.
- Sue Gallagher agreed and wanted to link points from a previous meeting the Neighbourhood and Wellbeing Delivery Alliance reported on the Loneliness Project, which was devasting to see who were the loneliest in the borough – men were, mainly. Sue wondered if we could link information from that project to Silverfit and other free services to enable us to make the links.
- Jessica explained the domains around environment and social environment do not directly link
 to health, even though we know they are part of building good health. In terms of how we
 measure, stage 3 of the programme is about developing the Aging Well Strategy and within
 that, we will have an action plan and indicators to attach to the performance to understand how
 we can support the progress.
- Dr Raj Mitra asks what the action from this is. Andrew Eyres explains we need to make a
 business case and Cllr Dickson agrees we must come back on this point. Jessica explained
 there is a steering group mapping to understand what is already going on in the borough and
 bringing partners together so that we can build something together.
- Cllr Cameron mentioned the Befriending service Age UK have has a one year waiting list, so
 we need to build more capacity into this. Raks Patel mentioned Silverline a charity run by
 Esther Rantzen, where the elderly can call for a chat. Sue mentioned she had tried to become
 a Befriender three times, which proved difficult as she didn't have a response. Raks explained
 there are a lot of checks in place which may take time to process. Dr Mitra asked what
 happened to the volunteers we had during the pandemic. Cllr Dickson explained we have Team
 Lambeth, approximately 1,500 people are signed up to it and encouraged everyone to join to
 see what voluntary opportunities are out there. Cllr Dickson mentioned Befriending could be a
 good role.
- Dr George Verghese explained he gets the impression that the Council are pro anti-social isolation, and he believes those who are isolated are the highest service users in general practice is there a way we can link the various activities and groups to those most lonely in



the borough? We had an update at the Executive Group meeting from Child Friendly Lambeth and their theme is safety – loneliness and safety keep coming through. Connection to community is an essential core problem to solve and that is the principle we should be working towards.

- Jessica explained that along with Child Friendly Lambeth, the team are making links to help with generational activities and expresses this is a real benefit for approaching the problems mentioned.
- Paran Govender mentioned that she had been reflecting on the presentation and discussion and explained the picture she often has of older people is that they are frail so if Guys and St Thomas's was asked to organise something for the elderly, they would organise something different to a physical activity based on that perception. Paran wondered how we could become part of the solution and mentioned we should focus on staff education, for example, what is your picture of elderly people. It is also down to timing, you can offer services to people but until they need help, they will not reach out to these services so there is something about collaboration with people who first present issues to us as organisations and when is the right time to mention a service, such as Active Lambeth.
- Cllr Dickson wanted to give a shoutout to Public Health in the run up to Active Lambeth returning
 to leisure active concessions and people's ability to use gyms and pools at submarket cost, for
 example, under 11's being free. It's a great start and people suggested we link health with
 leisure and this just shows how much potential there is. Thanks so much to the team who
 presented.

Action: Age Friendly Lambeth programme to bring back discussions on the needs of older people in Lambeth.

RESOLVED

1. To note the presentation.

To view the presentation accompanying this item, refer to pages 65 to 98 of the agenda pack.

10 Questions from public attendees

None

11 AOB

Cllr Dickson reminded Board members that on the 27th April, there is a plain English virtual session for Board members running from 12:30pm to 2:30pm.

Cllr Dickson noted this was the last meeting in public occurring on Wednesdays and as of May, Public Board meetings are moving to Thursdays. However, the next Board Seminar in April is on Wednesday and Seminars will move to Thursdays from June.

The date of the next Lambeth Together Care Partnership Public Board meeting was confirmed as 18 May 2023.

Cllr Dickson thanked everyone for attending and for the brilliant discussions.

The meeting ended at 16:30.