

Health, Inclusion and Social Care Policy and Accountability Committee Agenda

Tuesday 30 March 2021 at 6.30 pm
Online - Virtual Meeting

MEMBERSHIP

Administration	Opposition
Councillor Lucy Richardson (Chair) Councillor Jonathan Caleb-Landy Councillor Bora Kwon Councillor Mercy Umeh	Councillor Amanda Lloyd-Harris
Co-optees	
Victoria Brignell - Action on Disability Jim Grealy - H&F Save Our NHS Keith Mallinson Roy Margolis	

A livestream of the meeting can be viewed here: [Watch live on YouTube](#)

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Date Issued: 22 March 2021

Health, Inclusion and Social Care Policy and Accountability Committee Agenda

30 March 2021

<u>Item</u>	<u>Pages</u>
1. MINUTES OF THE PREVIOUS MEETING	4 - 20
<p>(a) To approve as an accurate record and the Chair to sign the minutes of the meeting of the Health, Adult Social Care and Social Inclusion PAC held on:</p> <ul style="list-style-type: none">• 4 November 2020• 27 January 2021 (Joint Budget meeting with CEPAC) <p>(b) To note the outstanding actions.</p>	
2. APOLOGIES FOR ABSENCE	
3. ROLL CALL AND DECLARATION OF INTEREST	
<p>To confirm attendance, the Chair will perform a roll call. Members will also have the opportunity to declare any interests.</p> <p>If a Councillor has a disclosable pecuniary interest in a particular item, whether or not it is entered in the Authority's register of interests, or any other significant interest which they consider should be declared in the public interest, they should declare the existence and, unless it is a sensitive interest as defined in the Member Code of Conduct, the nature of the interest at the commencement of the consideration of that item or as soon as it becomes apparent.</p> <p>At meetings where members of the public are allowed to be in attendance and speak, any Councillor with a disclosable pecuniary interest or other significant interest may also make representations, give evidence or answer questions about the matter. The Councillor must then withdraw immediately from the meeting before the matter is discussed and any vote taken.</p> <p>Where Members of the public are not allowed to be in attendance and speak, then the Councillor with a disclosable pecuniary interest should withdraw from the meeting whilst the matter is under consideration. Councillors who have declared other significant interests should also withdraw from the meeting if they consider their continued participation in the matter would not be reasonable in the circumstances and may give rise to a perception of a conflict of interest.</p>	

Councillors are not obliged to withdraw from the meeting where a dispensation to that effect has been obtained from the Audit, Pensions and Standards Committee.

4. APPOINTMENT OF CO-OPTEE

For the Committee to agree the co-option and appointment of Lucia Boddington as a member of the Committee.

5. COVID-19 UPDATE - COVID VACCINE UPTAKE - HAMMERSMITH & FULHAM 21 - 28

This item provides a verbal update from the Directors of Covid 19 and Public Health on Covid-19. The update will also provide an analysis of data regarding the local vaccine uptake.

6. H&F COUNCIL'S DRAFT EQUALITIES PLAN FOR 2021-2025 29 - 54

This report alerts members to the recently launched draft Equalities Plan 2021-2025, currently open to public consultation for a 12-week period until the end of April.

7. COMMUNITY CHAMPIONS 55 - 59

This report sets out the Council's work with community champions and the depth of community experience to promote testing and vaccination, alongside their regular public health messaging.

8. WORK PROGRAMME 60 - 63

The Committee is asked to consider its work programme for the remainder of the municipal year.

9. DATES OF FUTURE MEETINGS

21 July 2021
10 November 2021
26 January 2022

Health, Inclusion and Social Care Policy and Accountability Committee Minutes

Wednesday 4 November 2020

PRESENT

Committee members: Councillors Lucy Richardson (Chair), Bora Kwon, Mercy Umeh and Amanda Lloyd-Harris

Co-opted members: Victoria Brignell - Action on Disability (Action On Disability), Jim Greal - H&F Save Our NHS (H&F Save Our NHS), Keith Mallinson and Roy Margolis

Other Councillors: Ben Coleman, Cabinet Member for Health and Social Care and Patricia Quigley

Officers: Jo Baty, Assistant director mental health, learning disability and provided services, Adult Social Care Department; Robert Craig, Director of Development and Partnerships, Royal Brompton & Harefield NHS Foundation Trust; Janet Cree, Managing Director, H&F CCG; Dr Richard Grocott-Mason, Managing Director, KHP-RBHT Partnership (King's Health Partners/Royal Brompton & Harefield Partnership); Dr Bob Klaber, Director of Strategy, Research & Innovation (and Consultant Paediatrician), Imperial College Healthcare NHS Trust; Dr Nicola Lang, Director of Public Health; Maisie McKenzie, Operations Manager, Healthwatch Your Voice H&F; Kamal Motalib, Head of Economic Development, The Economy Department; Lisa Redfern, Strategic Director of Social Care; and Jo Thomas, Director of Communications and Public Affairs, Royal Brompton & Harefield NHS Foundation Trust; Jaime Walsh, Healthwatch Your Voice, Director of Operations for Healthwatch and Engagement Services

Guests and observers: Cllr Marwan Elnaghi, Chair, Adult Social Care and Health Select Committee, Royal Borough of Kensington and Chelsea; Cllr Max Chauhan, Vice-Chair, Adult Social Care and Health Select Committee, Royal Borough of Kensington and Chelsea; and Jen Nightingale (former HISPAC co-optee)

1. APOLOGIES FOR ABSENCE

Apologies for absence were received from Councillor Jonathan Caleb-Landy. Councillor Bora Kwon gave apologies for her early departure from the meeting.

Councillor Richardson welcomed back Jen Nightingale who had stepped down from the Committee at the end of the summer due to work and family commitments. Councillor Richardson thanked her for generously contributing her time and expertise in supporting work of the Committee and wished her well in her future plans.

2. ROLL CALL AND DECLARATION OF INTEREST

Keith Mallinson declared an interest in Agenda Item 8, Healthwatch Your Voice (H&F), as he was a trustee of Central and North West Healthwatch, the previous provider of Healthwatch services in H&F.

3. PUBLIC PARTICIPATION

The Committee noted that ParentsActive had submitted questions and continued to provide ongoing input which has helped inform the ongoing work on inclusive employment.

4. MINUTES OF THE PREVIOUS MEETING

Councillor Richardson reported that it had been expected that the lack of a proper test & trace app and protocols was expected to be discussed at JHOSC in October, but this meeting was subsequently cancelled. It was noted that Dr Lang would provide further insight on this under Agenda Item 5 and her Covid-19 update. Janet Cree confirmed that the CCG would support and contribute to an item on immunisation take up to the next meeting of the Committee. Actions and outcomes on inclusive employment would be addressed under Agenda Item 6.

RESOLVED

That the minutes of the previous meeting held on 10 September 2020 be agreed as an accurate record.

5. COVID-19 - UPDATE

Councillor Richardson welcomed Dr Nicola Lang and Linda Jackson to the meeting to provide a verbal update. Dr Lang reported that there had been 211 new cases of Covid-19 identified through extensive testing undertaken in the borough although the overall rates was in decline. The rates were calculated on a rolling seven-day average, testing 579 of every 100,00 people (compared to the London average of 300 per 100,00). The borough had the highest rate of infections in London at this time, but the figures changed daily. It was also noted that the borough had administered the highest number of tests.

Dr Lang also reported that Doc Tap, a private GP in the borough had found to attributed 130 Covid-19 positive cases to the borough's public health numbers. Janet Cree confirmed that Doc Tap was a private contractor and that there was no contractual relationship, so they did not come under the

jurisdiction of the CCG. Any action would need to be taken through the CQC (Care Quality Commission).

On the eve of a four-week lockdown Dr Lang confirmed that the borough planned to undertake targeted local testing. Dr Lang thanked Charing Cross hospital for their support, particularly Dr Paul Randell.

Linda Jackson explained that they had prepared action plans in response to the second wave of the infection which also incorporated a flu action plan and formed a critical part of the winter response in terms of managing the wider pressures collectively within the NHS. Targeted, mobile testing was underway with all the logistics being finalised. There was no indication that the government intended to reintroduce shielding but the council planned to continue to support clinically vulnerable people. The successful work around contact tracing was highlighted in the media and commended. 536 people had been contacted by the contact tracing team since 16 September 2020 representing a success rate of 95%, a significantly higher rate than had previously been managed by the central Government.

Janet Cree outlined preparations being undertaken in delivering primary care services to ensure that people were able to have face to face contact throughout a second lockdown. It was essential that access to healthcare services such as immunisation continued. Escalated primary care clinics for those with Covid-19 symptoms have continued to operate and preparations were being made to deal with a potential increase in patient volume. Action plans would be implemented once the threshold for implementation was reached.

Dr Bob Klaber highlighted the theme of collective and joint working which he felt was key across the wider health system. The difficulty was to ensure the continued delivery of essential health services balanced with the competing priorities of responding to Covid-19. There were also combined issues of maintaining segregated space and limited resources to support collaboration across north west London. Elective care numbers were almost on par with the same period in 2019 and that since Covid-19 in March there was a significant backlog that they were working hard to address.

Dr Klaber explained that there were key differences in how a patient responded to the infection in this second surge with a higher proportion of patients that were significantly unwell although with smaller numbers requiring intensive care treatment. Dr Klaber outlined different courses of treatment and related outcomes were explained; and a research partnership between Imperial College London and Imperial College Healthcare NHS Trust was progressing. Much was being done to ensure that hospital sites were accessible with significant investment to support this.

In response to a question from Keith Mallinson about lack of enforcement on public transport Linda Jackson confirmed that the council continued to negotiate with Transport for London (TfL), but this was limited in the absence of local government powers. Councillor Coleman stated that people were concerned about the lack clear signage, communication and engagement on

this issue. Whilst TfL had offered assurance but there had been little progress and that improvements to enforcement would be welcomed.

Councillor Lloyd-Harris commended the work on test and trace but was concerned about the borough having the largest number of cases in London and asked if this was attributable to whether more could have been done or if the response could have been better.

Dr Lang emphasised that the testing rate within the borough was phenomenal, at twice the rate of the rest of London and so more likely to identify positive cases. The approach to testing in the borough was highly robust and targeted making excellent use of communications tools, business intelligence and the tactical positioning of mobile testing units. Councillor Coleman described how the council's innovative and creative approach had garnered significant results. The data provided by the NHS contained details of individuals that had been unreachable and the council's tracing team had exceeded expectations in contacting this cohort. Out of every 100 people tested, 6% return a positive result, a slightly lower rate compared to 7.7% across London. It was critical to look at the proportion of the number of cases being tested.

On a related point, clarification was sought about the eligibility for the flu jab for over 50's and possible mixed messaging about this. Janet Cree clarified that the eligibility criteria prioritised vulnerable groups first although over 50's were being encouraged to have the flu jab. There was an issue of poor uptake in the borough which historically had never exceeded 75% of take up.

Roy Margolis enquired about the current figures for cases in the borough. Dr Klaber explained that current ICU capacity was at 20% being treated for Covid-19%, with 80% following other treatment pathways. This was relatively low compared to April 2020, where 97% of those in ICU were being treated for Covid-19. In terms of the current modelling the number of Covid-19 cases was likely to increase but there was no expectation that it would reach similar levels again.

Jim Grealy commended the work on test and trace with Imperial but asked about what the local response was to address increasing mental health pressures. Linda Jackson explained that there was a big mental health impact on those that were shielding with a significant number suffering from depression. There were also those that were concerned about losing work and redundancies. People were offered proactive support through H&F Can and those needing additional support were being assisted by NHS colleagues. Councillor Coleman confirmed that the council had written to all those who had been shielding to offer support and information through H&F Can and the mutual aid groups (MAGs). Recognising that lots of families were falling into poverty the council had agreed early on to pay for eligible children to receive free school meals during school holiday periods.

RESOLVED

That the verbal report be noted.

6. INCLUSIVE EMPLOYMENT - UPDATE

The Committee received a verbal update from the Jo Baty following up on outcomes arising from the previous meeting on inclusive employment, support residents on pathways to employment. A key issue was to ensure a holistic, whole council approach, which had been championed by the Chair of the Committee, Councillor Richardson. The Economy Department was a key partner within this process to ensure a direct interface with businesses and employers, equipped with suitable knowledge of the language, data and infrastructure to make this successful. Jo Baty described some of the structures already in place which included the programme of internships within the council. The intention was to work with the CCG and other stakeholders to take the work forward through collaboratively with a more joined up approach.

Kamal Motalib reported that they had recently secured and agreed a programme of work as part of the Kick Start programme for which H&F would act as an intermediary. 62 places had been secured and officers planned to submit a second application to secure the next wave of placements. It was confirmed that Action On Disability were involved in this work and that officers were keen to strategically engage with community providers such as Parents Active to also help develop the work.

RESOLVED

That the verbal update be noted.

7. UPDATE - ROYAL BROMPTON HOSPITAL

Councillor Richardson welcomed guests and speakers for this item which was to receive an update regarding the Royal Brompton. Dr Richard Grocott-Mason echoed earlier comments about the benefits and power of collaborative work which strengthened and supported the healthcare system. The work of NHS staff in treating Covid-19 patients at the Brompton was commended with high survival rates for patients on ECMO (extracorporeal membrane oxygenation). The Brompton was one of only two hospitals which had continued to provide cardiac treatment throughout the pandemic.

Dr Grocott-Mason outlined why the Trust supported the proposal to relocate services to Guys and St Thomas hospital. The time taken to invest in, build and develop specialist services such as paediatric congenital heart disease was considerable and invaluable. It was confirmed that Brompton and Harefield hospitals would not be closed and that the intention was to ensure the continuation of clinical outcomes. Consultation about Evalina London Children's Hospital as the new site for services was planned for June 2021 but a new facility was unlikely to be available until 2025 or 2026. In terms of collaboration the consolidation of services would not affect academic ties with Imperial, but this was an exciting opportunity for two hospitals to come together for the benefit of patients.

Dr Bob Klaber outlined the views of Imperial College Healthcare NHS Trust. The clinical needs of the population and access to high quality health services were key factors. Dr Klaber welcomed the increased collaboration around care pathways and the assurance around academics working together.

Roy Margolis enquired about the benefits of the proposal. Dr Grocott-Mason reiterated that this would be the unification of services based at Guys and St Thomas's. Myocardial infarction services at Brompton would remain and there were currently no plans to downsize the provision.

Councillor Quigley outlined her personal association with the Brompton and expressed her concern about the potential long-term and adverse impact of residents in north west London travelling to Guys and St Thomas. The age of the estate was also an issue, despite the many excellent services offered. Councillor Quigley referred to page 4 of the report and enquired about how consultation and engagement would be undertaken. Dr Grocott-Mason clarified that where two hospitals trusts joined services this was not required. There was no plan to move adult services and if this was the case there would be a consultation and equalities impact assessment. It was confirmed that services would be continued to be provided from Brompton for the next ten years.

Jim Grealy asked about the value of the real estate and sought clarification about what services would remain at Brompton. In terms of the estate, Dr Grocott-Mason confirmed that the current pandemic had highlighted the difficulties designing segregated space and managing infection control areas. Robert Craig explained that the first service that would transfer would be children's, subject to consultation. NHS England had already decided that paediatric services should only be provided by a specialist children's hospital and that linking up services with either Evelina or Ormand Street was at least six years off, and that until then services would remain as they are. Conversations regarding the estate and value were questions to be considered in the future.

Councillor Richardson sought clarification regarding the Imperial proposal which could see services delivered from Hammersmith and St Marys hospitals and so remain in west London. Dr Klaber responded that this not a "bid" but that Imperial had been asked by NHS England to provide a response. The key stage of the process was the expected clinical transition board that would emerge and identify the clinical needs of the north west London area.

Councillor Coleman sought clarification about the parameters for consultation and engagement and questioned the delay in the consideration of estate valuation until services were about to be removed. Dr Grocott-Mason confirmed that where services needed to be moved, then they would be subject to consultation (a legal process run by NHS England) by Public Health England and that the clinical senate board would also be consulted. There was a rigorous process in place to ensure that there was evidence based clinical reasons for changes in service provision. In terms of engagement,

there would be equalities impact assessment and services would be codesigned through patient engagement.

RESOLVED

That the report be noted.

8. HEALTHWATCH - YOUR VOICES H&F

Councillor Richardson welcomed Maisie McKenzie to the meeting. Maisie McKenzie outlined work priorities for Healthwatch Your Voice H&F which had been awarded the provider contract which had commenced on 1 April 2021. A key area of work that organisation was focused on was patient access to digital services. A survey had been prepared with input from the Executive Committee of Healthwatch your Voices H&F, Parents Active, the Carers Network and HAFSON to help draft questions, produce an easi-read, large print and braille text formats, available online and in print. Five focus groups were planned to help glean experiences about accessing digital services. There were emerging themes around education, technology, motivation and cost. It was becoming clear that online access needed to be complemented by face to face provision.

Councillor Richardson enquired about the social responsibility to engage locally. Maisie McKenzie explained that they would strategically link with and inform the north west London Collaborative digital strategy and that there was strategic interest in the outcomes of the survey and how digital services might meet the needs of residents on a local level. The work had been commissioned by the H&F Health and Wellbeing Board (HWB) and highlighted the collaborative and strategic approach being undertaken. Councillor Coleman confirmed that HWB had tasked Healthwatch Your Voice H&F to draft a set of service standards that could be used as a framework of reference for the delivery of accessible digital services and which would be disseminated to GP practices. Roy Margolis expressed his support for the survey work and offered to assist with the development of service standards.

Keith Mallinson queried the progress to date on formally establishing a shadow executive committee for Healthwatch Your Voice H&F. Maisie McKenzie confirmed that work on interviewing and recruiting to the shadow committee was currently in progress and would be made up of local volunteers.

RESOLVED

That the verbal update be noted.

9. WORK PROGRAMME

The Committee noted elements of the work programme for the next meeting which could include the following areas:

- Update on the NWL CCG Collaborative merger

- Immunisation take up
- Black and minority ethnic groups and immunisation take up
- Covid-19 – plans to roll out COVID vaccination

10. **DATES OF FUTURE MEETINGS**

The date of the next meeting was noted as Tuesday, 26 January 2020.

Meeting started: 6:30pm
Meeting ended: 8:46pm

Chair

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London Borough of Hammersmith & Fulham

Joint Policy and Accountability Committee Budget Meeting



Minutes

Wednesday 27 January 2021

PRESENT

Children's and Education Policy and Accountability Committee

Councillors: Sharon Holder (Co-Chair), Lucy Richardson, Alexandra Sanderson, Asif Siddique and Mark Loveday

Co-opted members: Eleanor Allen (London Diocesan Board for Schools), Nandini Ganesh (Parentsactive Representative), Matt Jenkins (Teacher Representative) and Nadia Taylor (Parent Governor Representative)

Health, Inclusion and Social Care Policy and Accountability Committee

Councillors: Lucy Richardson (Chair), Jonathan Caleb-Landy, Bora Kwon, Amanda Lloyd-Harris and Mercy Umeh

Co-opted members: Victoria Brignell - Action on Disability (Action On Disability), Jim Grealy - H&F Save Our NHS (H&F Save Our NHS), Keith Mallinson and Roy Margolis

Other members in attendance: Councillor Ben Coleman (Cabinet Member for Health and Adult Social Care), Stephen Cowan (Leader of the Council), Larry Culhane (Cabinet Member for Children and Education), Sue Fennimore (Deputy Leader) and Patricia Quigley (Cabinet Assistant)

Officers and guests:

Kim Smith (Chief Executive Officer)

Jo Baty (Assistant Director Mental Health, Learning Disability And Provided Services)

Sarah Bright (Assistant Director - Children's Commissioning)

Tony Burton (Head of Finance, Children and Education)

Prakash Daryanani (Head of Finance, Social Care)

Karen Galey (Assistant Director for the Economy)

Emily Hill (Director of Finance)

Linda Jackson (Director of Covid-19 Response & Recovery)

Dr Nicola Lang (Director of Public Health)

Mandy Lawson (Assistant Director Education and Disability)

Andrew Lord (Head of strategic planning and monitoring)

Kamal Motalib (Head of Economic Development)

Jacqui McShannon (Director of Children's Services)
Jan Parnell (Director of Education)
Jo Pymont (Assistant Director, Performance and Improvement)
Lisa Redfern (Strategic Director of Social Care)
Bev Sharpe (Director of Family Services)
Nick Skoric (Communications Officer)
Bathsheba Mall (Committee Coordinator)
Merril Hammer (H&F Save Our NHS)

1. APOLOGIES FOR ABSENCE

None.

2. ROLL CALL AND DECLARATIONS OF INTEREST

There were no declarations of interest.

3. COVID-19 - UPDATE

Linda Jackson provided a verbal update outlining the council's on-going response to Covid-19. The three key areas were the borough's infection rate; testing strategy and the implementation of mass testing for people who were asymptomatic; and the vaccination strategy currently being led by the NHS. In the past seven days 506 infectious cases had been recorded and the most recent figure of 439.1 indicated a reduction per hundred thousand of the population. At the peak of the second wave, this figure was closer to 1000 per hundred thousand of population. The positivity rate was 15.8%, so that for every one hundred people, 15.8% had tested positive. Linda Jackson outlined the council's activities which included support for local business throughout the pandemic, remarkable work around social isolation, free school meal vouchers and work with community and voluntary sector mutual aid groups, and the Community Aid Network and referrals to the foodbank had increased significantly.

Linda Jackson highlighted three key elements which combined to form a Covid defence. First, the community needed to continue to social isolate, going out only when necessary. There were three, mass test sites and five pop-up sites located across the borough for asymptomatic tests. Additional test options included free home testing kits and lateral flow test. A third element was the NHS delivery of the vaccination through primary care networks across the borough at key sites in White City, Shepherds Bush and Parsons Green according to the eligibility criteria.

The target figure for completing vaccination for these groups was 14 February 2021 and which incorporated the impact of lower than expected vaccine take up. There was significant work being undertaken locally to address this and strong encouragement to accept vaccine appointments as and when these were offered. H&F clinical commissioning group was allocating supplies of the vaccines locally.

Victoria Brignell commended Linda Jackson and H&F colleagues for their commitment to protecting residents and to ensure continuity in services. Clarification was sought regarding vaccination arrangements for carers and personal assistants

employed by disabled people under the direct payment programme. It was confirmed that all personal assistants had received a letter this week and those who were direct payment recipients would be asked to confirm the number and details of people they employed.

ACTION: For the Director of Covid-19 to provide further detail about the council's response to Covid-19 at the next meeting of the Committee.

Echoing earlier comments, Councillor Lloyd-Harris commended the strength of the council's response and thanked senior officers for their work, undertaken in challenging and difficult circumstances. Clarification was sought about the hesitancy about testing in care homes. Linda Jackson confirmed that testing was required if a care home wanted to remain open but clarified that vaccine "hesitancy" was an issue nationally. Lisa Redfern confirmed that approximately 94 people had received the vaccine at H&F care homes but there were also smaller, supported living units to include within this. Staff take up had been encouraged and generally this had been positive. A whole community engagement plan had been agreed, working with a range of groups and resources about the vaccine had been distributed in several languages and formats to ensure an effective dissemination of information.

Councillor Jonathan Caleb-Landy thanked Lisa Redfern, Linda Jackson and their teams for all their work and echoed earlier comments, recognising how fortunate the borough had been to have their support. Councillor Caleb-Landy asked if there were communities that were harder to reach and the areas where there was low vaccine uptake. Linda Jackson explained that she was expecting to receive local data from the CCG with a demographic profile of those refusing the vaccine. It had been acknowledged that there were higher rates of hesitancy amongst black Afro-Caribbean's with about 50% refusing the vaccine but a more detailed breakdown of the demographic and data within this was needed. The issue of some minority ethnic groups not having the vaccine was a concern. Having trusted community voices to answer questions about the vaccines helped to counter the misinformation that was currently being disseminated was critical. Linda Jackson confirmed that the council's communications team were working to challenge misinformation as a part of a wider strategy to improve vaccine take up and to ease anxiety about the vaccine.

Councillor Ben Coleman confirmed that a programme of engagement events about vaccine hesitancy was being planned to initiate and support local conversations about vaccine confidence. The council had raised the issue with NHS and CCG colleagues and requested focused data about "why" the offer of a vaccine was declined. Councillor Coleman expressed concern that an opportunity to address the historically low vaccine uptake had been missed. There was a shocking correlation between low uptake and some minority ethnic communities which were recognised as having experienced health inequalities correlated poor housing, low income and deprivation. This was a worrying administrative failure by the CCG to not address this earlier in the pandemic and a serious concern.

In response to a question from Councillor Bora Kwon, Linda Jackson explained that the council was not eligible for additional funding recently made available to tackle

vaccine engagement, but it may receive any surplus if available. The London boroughs of Brent and Harrow had been allocated funding and had agreed to share any learning obtained as a result. Linda Jackson encouraged members of the committee and others in the meeting to help champion the benefits of vaccination.

In response to a further question from Councillor Caleb-Landy about the provision of mental health support provided to staff Linda Jackson confirmed that there were several staff assistance initiatives in place, in addition to a regular programme of staff wellbeing online engagement events and webinars.

Co-optee Nadia Taylor sought clarification around which eligibility group recipients of a carers allowance had been placed in and the possible dates that carers might receive the vaccine. Linda Jackson confirmed that locally, where a person was known to have a carer an appointment was likely to be offered to that carer.

Co-optee Jim Grealy commended the excellent work that had been undertaken by the council and was impressed by the amount of information that had been provided across the borough utilising multiple media channels. Given this, the absence of similar guidance and information on vaccine uptake was queried. He also raised additional concerns about those who were housebound, struggled with travel and those who could not be contacted by GPs as they did not have mobile telephones. Linda Jackson explained that the council was working with healthcare providers to support the vaccination of the over 80s cohort. Of this group, there currently remained approximately a 100 housebound people in H&F who wanted to be vaccinated. For the 75+ cohort, the NWL target was to have 75% vaccinated by 14 February 2021. Logistics around transporting and storing the Pfizer vaccine had resulted in some delays which had become more manageable as the AstraZeneca vaccine was made available. Linda Jackson confirmed that she would convey the points about messaging to GP practices with CCG colleagues.

ACTION: Director of Covid-19 to provide feedback to the local CCG regarding consistent messaging.

Councillor Asif Siddique enquired about what provision had been made to support vulnerable groups to access test sites and whether sites were fully accessible. It was confirmed that there were several accessible pop up sites available and similar provision had been made regarding vaccination centres. In addition, all staff who worked within these areas had received training in providing additional support where required with high standards of customer care.

RESOLVED

That the Committee noted the verbal report.

4. 2021 MEDIUM TERM FINANCIAL STRATEGY

Corporate Overview

Emily Hill provided a corporate overview of the council's Medium Term Financial Strategy (MTFS). It was clarified that Appendix 4 fees and charges was not relevant to the report as this referenced fees and charges determined outside of the council's

policy which was, for both adult social care and children's services, to freeze these without exception. Setting out the overall financial context it was explained that the Department for Communities and Local Government (DCLG) had for the past ten years advocated for austerity with a challenging reduction in revenue funding. Core spending power for revenue activities had seen a slight increase of 4.5% compared to 2010/11 but the current financial position was significantly worse in real terms.

The council needed to make significant savings whilst concurrently managing a growth in budget for demand led services in Social Care and Children's Services. This has been difficult and required a draw on reserves for funding unexpected levels of demand and a corresponding reduction in the level of reserves which also needed to be maintained as a safety buffer. It was noted that a fees and charges compensation scheme would partly fund council tax and business rate losses, with local authorities meeting the first 5% followed by 75p in the pound there after. The remainder would need to be met by the council.

The economic impact of Covid-19 highlighted a significant reduction in business rates currently expected in the future which represented a funding risk to the council. A Covid specific six-month contingency budget was in place to address the level of associated risk which had also been increased to reflect this.

Children's Services

Jacqui McShannon outlined how the council's ambitious plan for Children's Services (CHS) would be underpinned by high aspirations for the borough's children offering protection from harm, abuse and exploitation, and be supported in their learning with equitable access to education. CHS was a highly regulated, demand led service and Jacqui McShannon commended the work of community partners. The current uncertainty, historic and current budget pressures meant that the service was having to meet increased complexity of need with higher numbers of adolescents at risk. About 1300 children were supported through social care with a range of needs including 100-50 with complex high needs and who also required a protection plan.

Tony Burton provided a breakdown of the allocations which included in excess of £46 million as the general fund budget within services for children (including children with disabilities) and young people and education. The overall income budget was just under £95 million which included £48 million of the delegated maintained and special school grant budget. Within this, the high needs special grant would be significantly increased at £26 million. There would be an allocation of £16 million for early years learning with a targeted offer funnelled through nurseries, schools and child minders. The key focus was to protect frontline services with cost reductions predicated on achieving high quality, value for money services. Cost pressures included non-placement expenditure and transport costs specifically linked to social care. There was also significant legal expenditure which was vital to protect vulnerable children through legal proceedings.

Councillor Alexandra Sanderson enquired if the borough would be fully compensated for financial loss linked to Covid and whether this had been paid by the government. Emily Hill explained that given the ongoing impact of Covid it was difficult to forecast the total of Covid related expenditure and how this might be met. A ringfenced

emergency grant had been received in four tranches and additional Covid grants would be tracked and monitored. In addition, a potential £4.5 million loss on council tax was expected but 75% of this would be covered centrally. The position would continue to be monitored but it was unlikely that incurred losses would be fully funded. In response to a follow up question it was explained that the impact of the levelling up policy on finance was unknown, but it was likely that funding would move away from inner London. Government spending had been significant and there would have to be some consideration of financial losses being recouped through any future funding mechanisms for local government.

Emily Hill clarified that 'increased net borrowing' referred to in the report was the cost of borrowing and separate from the financial return on investments which had been very low or almost negative. The expectation had been that more would be borrowed if the council undertook regeneration and development schemes and that the low interest rate would have an impact. It was confirmed that the cost of holiday and free school meals was being fully met through grants provided covering specific activities like this. Jacqui McShannon confirmed that the cost of meals provided during half term was also being fully covered. There had been significant half term and Easter holiday provision for approximately 4000 families and CHS had worked with schools to distribute food vouchers. Measures were in place to secure future and contingency vouchers should these be required.

Councillor Sanderson commented on the achievement of saving £400,000 on care leaver placements through in borough placements and sought further details. The initiative was led by Beverly Sharpe and co-ordinated with colleagues in housing to secure in-borough, refurbished accommodation for care leavers where they would also receive better quality support. Approximately 20 young people had been placed with a further 35 that could be offered placements in future. CHS was also working closely with colleagues from the Economy Department to transition young people when appropriate into their own tenancies which had also contributed to efficiencies. Most care leavers wanted to return to their home authority from out of borough spot purchased placements.

Councillor Loveday commented referenced historic and repeated overspends within the CHS budget however it was acknowledged the amount of overspend this year had been significantly reduced. Jacqui McShannon confirmed an overspend of approximately £750,000 on the high needs block which represented a considerable reduction. It was clarified that an agreement to address an overspend of £15 million from reserves over a five-year period was now in its third year. Emily Hill explained that there were currently ongoing national discussions about high needs block funding and recently introduced regulations which prevented such funding to be sourced from the general fund. The advice from auditors was to ensure that reserves were set aside as a contingency plan to fund the deficit to date and included within the financial forecast. Significant work had been undertaken to ensure that spending fell within the annual allocation which was close to being achieved within the next financial year.

Tony Burton outlined the overall strategy to control the historic deficit which had developed in the previous financial years to address budget pressures through commissioning and best practice reviews. Value for money spending combined with

growth around travel care and support of non-placement care expenditure were contributory factors. It was expected that next year's budget would be broadly balanced by considering demand management, early years intervention, appropriate contracts and timely needs assessment, together with workforce redesign to deploy services more efficiently to ensure a significantly reduced spend.

Councillor Loveday referred to the minutes in which the previous borough director of children and education services had reportedly outlined development plans to rebuild schools to help manage wider education finance proposals. Councillor Loveday noted that these were not contained within the current MTFS for CHS. Emily Hill acknowledged that there had been concern about the cumulative deficit from the high needs funding block and that some compensation might have been achievable through a schools rebuild programme and any capital receipts generated. As the policy had developed however, other more viable options were presented.

Councillor Holder invited a parent governor co-optee, Nandini Ganesh, to put her question to officers which highlighted the need for independent travel training support and why this was not proactively supported. Jacqui McShannon concurred with the known benefits of this approach and confirmed that this provision was in place with the recruitment of independent travel advisors, confirming the council's commitment to ensuring quality support services for vulnerable children with complex needs.

Social Care

Lisa Redfern outlined that the departments overall vision to support residents in remaining independent and to support people with disabilities through the independent living strategy. Significant achievements included no social care discharges however, the ongoing difficulties around how social care should be funded remained unresolved. The financial impact of Covid was considerable and had made it harder to achieve savings for a demand led service. This was expected to grow as the number of those discharged from hospital increased, combined with the accelerated cost of care and the council's commitment to pay the London living wage to contractors and sub-contractors.

Social care highlights achievements also included free home care, together with subsidised meals on wheels charged at £2, and no increase in careline charges, which were significant given the current economic climate. The department's response to Covid had been highly commended and recognised as an exemplar of good practice when the borough's care homes were closed to protect vulnerable residents. There had been innovative infection control led by Dr Nicola Lang, care home and home care staff were offered financial support to encourage wide ranging testing, and the council procured and freely distributed in excess of 2 million pieces of personal protective equipment to care workers and frontline staff. The quality of care was improved and there had been close working with providers, combined with early and rapid problem solving deploying high quality management tools such as dashboards and timely reviews.

Positive feedback from government, the former chief executive of Public Health England, Duncan Selbie and residents had increased fourfold since April 2020. An

integrated management approach had helped to deliver a balanced budget, despite significant and deeply challenging circumstances. Care home fluctuations had resulted in a steep downward trend attributable to Covid however, it was anticipated that this would increase following improved infection control. The service was continuing to see greater acuity of need with people being discharged with more complex care needs and there were increased costs concurrent with this. The level of complex care and support needed for those with long Covid was unknown but high acuity of need corresponded to high cost. Prakash Daryanani provided a brief trend analysis and highlighted areas of resilience, spend variation, and care home placement costs which had decreased between 2020 and 2021. Despite the impact of Covid there had been improved activity and systems management.

Councillor Lloyd-Harris commended the innovative approach led by senior officers and the way in which had protected the borough's most vulnerable residents. Despite the decision to sustain vulnerable residents through free home care, subsidised meals on wheels and careline, she asked whether the council had reached a point where this could no longer be considered sustainable. Lisa Redfern responded that considerable work had been undertaken to improve the quality of operational systems and how these were managed through the implementation of policy. The primary focus was to maintain targeted support for those who needed care and to undertake effective and timely reviews to sustain this focused delivery. Councillor Coleman observed that there were better ways to achieve a reduction in costs without a corresponding reduction in services and that there were currently no plans to increase services but to continue to deliver these through an innovative and creative approach to service design and delivery.

Victoria Brignell asked if the independent living fund was abolished and the funding passed to councils directly, would this be passported to recipients and sought an assurance that the council would not end this provision. It was acknowledged that this was currently unknown as there was no decision yet as to whether the fund would be extended beyond 2021/22. There was an assurance that the current political administration had no intention to end the fund as it enabled people to live independent and fulfilling lives.

Councillor Richardson thanked officers for the detailed presentations and overview of departmental budgets set within a corporate and national context. Policy and accountability members valued the work of officers and proposals designed to deliver a strong and resilient budget framework in uniquely challenging and difficult times.

RESOLVED

That the Committee noted the report.

Meeting started: 6.30pm
Meeting ended: 8.52pm

Chair

Contact officer Bathsheba Mall
 Committee Coordinator
 Governance and Scrutiny
 E-mail: Bathsheba.Mall@lbhf.gov.uk

London Borough of Hammersmith & Fulham

Report to: Health & Wellbeing board

Date: 30/03/2021

Subject: Covid Vaccine Uptake – Hammersmith & Fulham

Report of: Linda Jackson- Director Covid H&F Council

Responsible Director: Lisa Redfern – Strategic Director Social Care

Summary

This report is produced by H&F Business Intelligence Service and provides a detailed analysis based on collected data. The data offers insights into vaccine uptake as correlated to population demographics so there is a clear picture as to which groups have been vaccinated, according to gender, age and ethnicity.

Recommendations

1. That Committee notes and comments on the report.

Wards Affected: All

H&F Priorities

Our Priorities	Summary of how this report aligns to the H&F Priorities
<ul style="list-style-type: none">• Doing things with residents not to them	Through the pandemic we have our residents have remained the central focus to ensure we have services available, that are flexible and responsive to meet their needs. With that in mind the plan creates a range of opportunities available for people to access vaccines and seek information and advice.
<ul style="list-style-type: none">• Creating a compassionate Council	We continue to make our voices heard in order to ensure we gain the commitment to the vaccine capacity, to protect our residents.
<ul style="list-style-type: none">• Taking pride in Hammersmith and Fulham	We have led the way on several fronts through out the pandemic, we are proud to be able to offer high quality services, through such a devastating time.

Contact Officer(s):

Name: Linda Jackson
Position: Director of Covid
Telephone: 07776 673085
Email: Linda.jackson@lbhf.gov.uk

Background Papers Used in Preparing This Report

Not Applicable

COVID-19 Vaccine Uptake

Hammersmith & Fulham

9th December 2020 - to 15th March 2021

Helena Whitfield

Information about the Vaccine

- There are currently **two vaccines available**:
 - Pfizer-BioNTech – the large majority of people have been vaccinated with this vaccine
 - Oxford-AstraZeneca
- Previous to 15th February, only people in JCVI groups 1-4 were being offered the COVID vaccine. These included:
 - Care home residents & workers
 - Residents aged over 70 years
 - Frontline health and social care workers
 - Clinically extremely vulnerable residents
- Now the vaccination programme has been rolled out to JCVI groups 5-9 and 75% of people in these groups should be vaccinated before May. These groups include:
 - Residents aged over 50 years
 - Clinically vulnerable residents

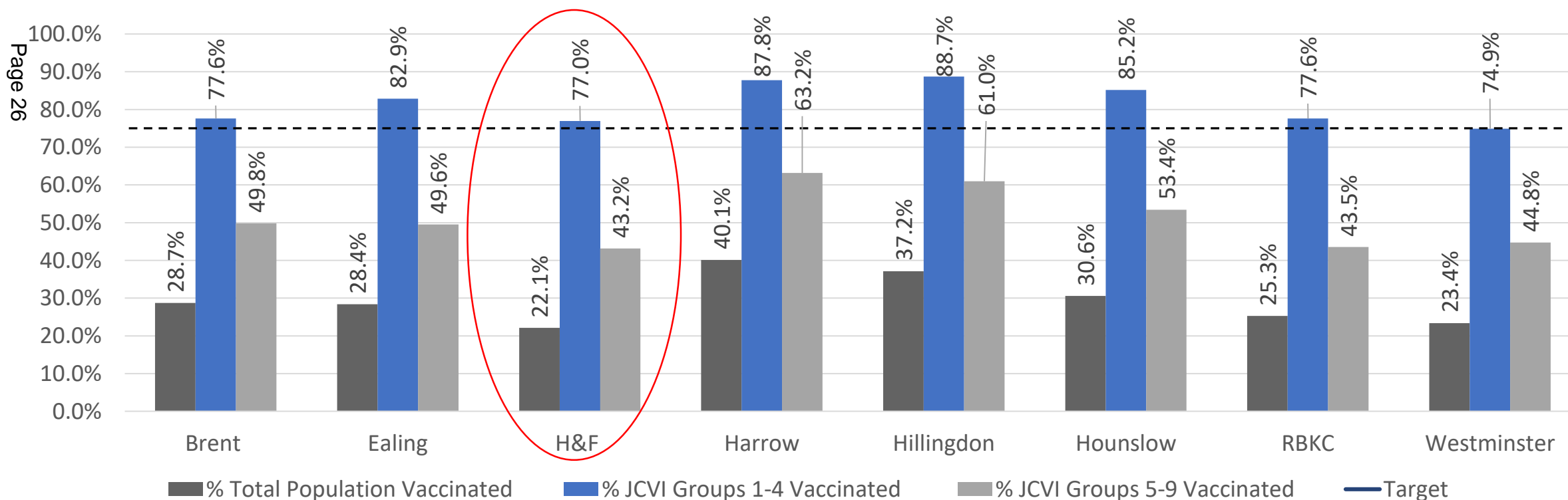
Vaccine Uptake among Cohorts

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Cohort	Patients Eligible	1 st Vaccine	2 nd Vaccine	% Vaccine Uptake	Number needed to meet 75% target
Care Home Resident	502	395	225	78.7%	Target Reached
Clinically Extremely Vulnerable	4,784	3,394	93	70.9%	194
At Risk	11,514	5,052	146	43.9%	3,584
QCOVID	3,564	1,989	50	55.8%	684
Aged 80+	4,922	3,933	960	79.9%	Target Reached
Aged 75-79	3,835	3,027	50	78.9%	Target Reached
Aged 70-74	5,438	4,255	53	78.2%	Target Reached
Aged 65-69	5,560	3,869	51	69.6%	301
Aged 60-64	5,791	3,351	65	57.9%	992
Aged 55-59	8,628	3,582	83	41.5%	2,889
Aged 50-54	11,217	2,137	129	19.1%	6,276
Aged 16-49	130,118	9,133	1,168	7.0%	88,456
Aged 16-17	3,669	21	1	0.6%	2,731
Total	199,542	44,138	3,074	22.1%	105,519

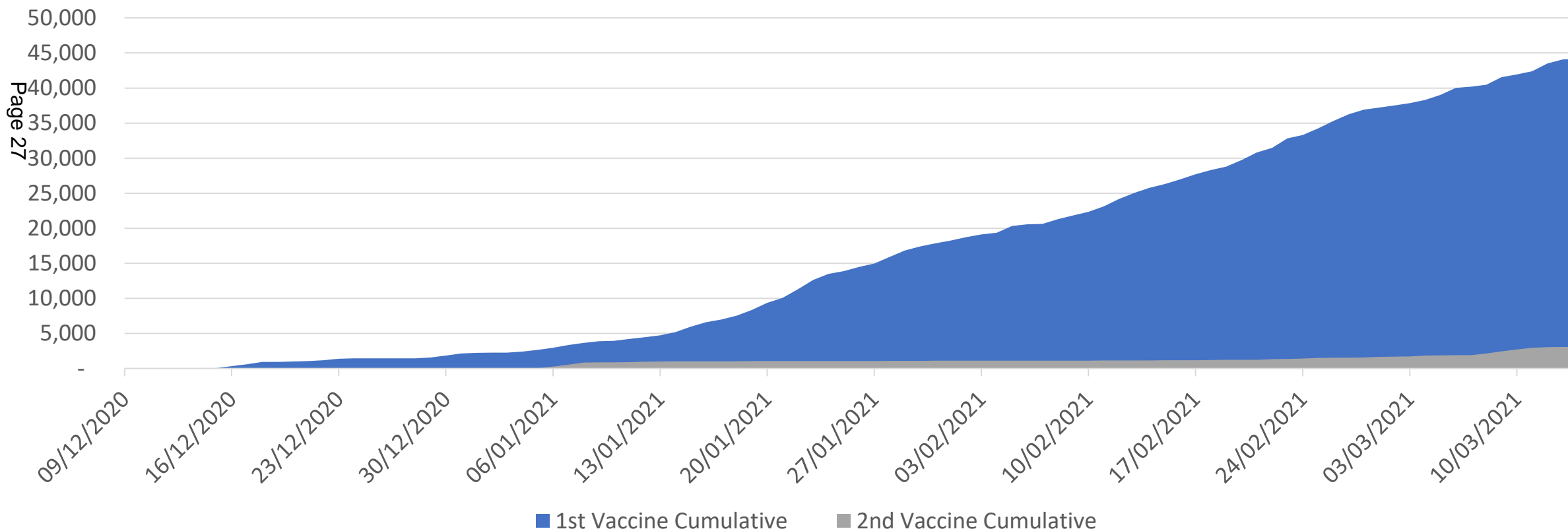
Vaccination by Borough

- Compared to other North-West London boroughs, Hammersmith & Fulham has vaccinated :
 - The **lowest** proportion of **all residents** (22.1%; 44,138/199,542)
 - The **second lowest** proportion of **residents in JCVI Groups 1-4** (Aged over 70, Care home residents, Clinically Extremely Vulnerable) (77.0%; 15,004/19,481)
 - The **lowest** proportion of **residents in JCVI Groups 5-9** (Aged between 50-69, At Risk, QCOVID) (43.2%; 19,980/46,274)



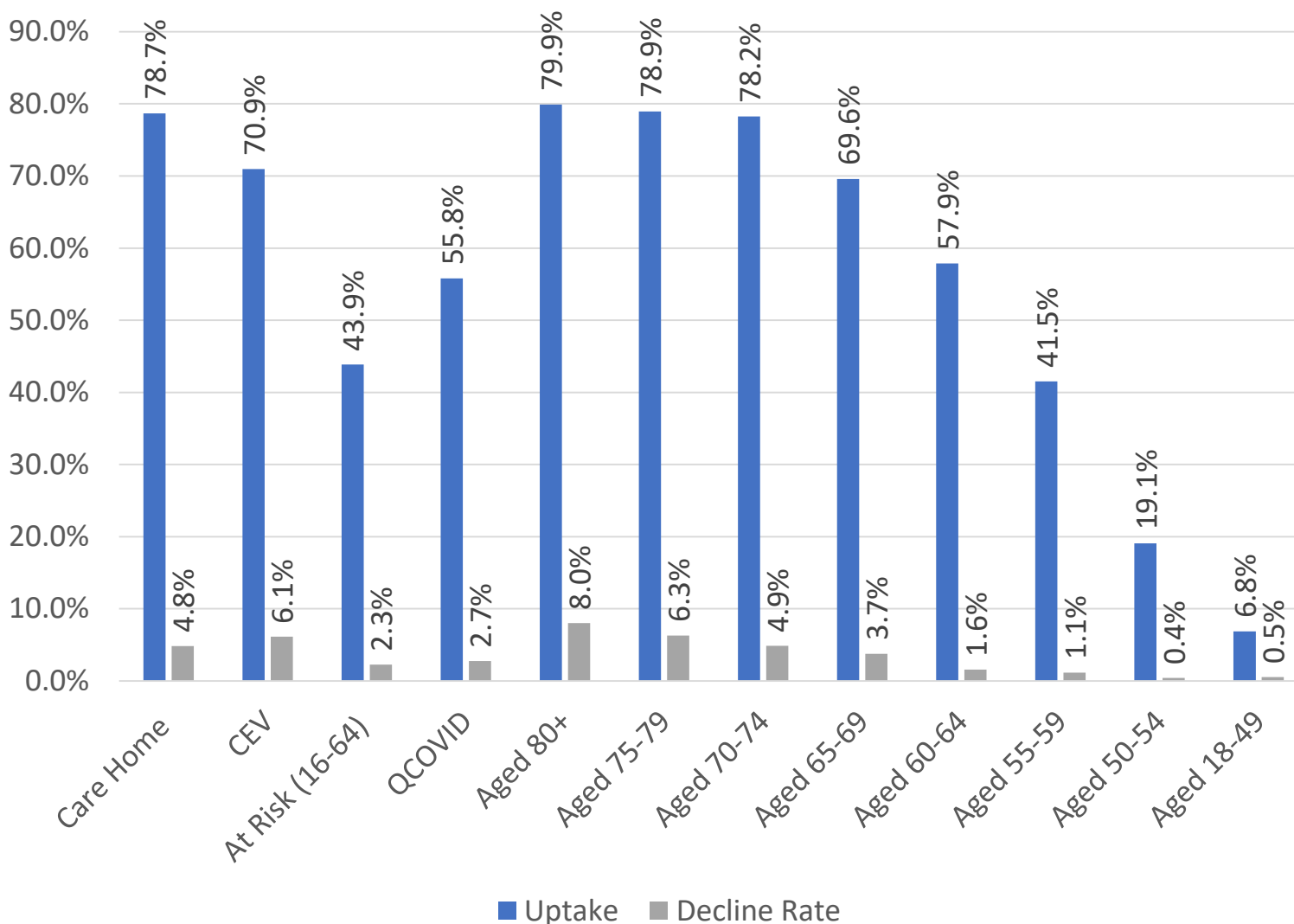
Vaccination by Date

- The **first vaccination** was given on the 9th December 2020
- The first **second vaccination/dose** was given on the 4th January 2021
- To date, **44,138** doses of the **first vaccination dose** have so far been given in H&F
- To date, **3,074** doses of the **second vaccination dose** have so far been given in H&F



Decline Rate by Population Group

- In total, **3.2%** (1,477/45,615) of residents who have been **offered** the COVID vaccine have **declined** it
- The **highest** decline rate was among residents **aged over 80 years**;
 - **8.0%** (342/4,275) residents offered the vaccine **declined** it
- The **lowest** decline rate was among residents **aged 50-54**; **0.4%** (9/2,146) residents offered the vaccine **declined** it



LONDON BOROUGH OF HAMMERSMITH & FULHAM

Report to: Health, Inclusion and Social Care Policy and Accountability Committee

Date: 30 March 2021

Subject: Opportunity to comment on the Council's draft Equalities Plan, setting the inclusion agenda for 2021-2025

Report Author: Dawn Aunger, Assistant Director of Transformation, Talent and Inclusion

Responsible Directors: Jacqui McShannon, Director of Children Services, Rhian Davies, Director of Resources

Summary

This report alerts members to the recently launched draft Equalities Plan 2021-2025, currently open to public consultation for a 12-week period until the end of April.

Recommendation

The Committee is asked to note and comment on the draft Equalities Plan, which will reframe and set the borough direction for progressing equality of opportunity over the next four years.

H&F Priorities	Summary of how this report aligns to the H&F Priorities
Creating a compassionate council	We are a council that acts with compassion. Our vision is to become the most inclusive borough in the country. We are committed to tackling unfairness and ensuring the most vulnerable among us are looked after, including as part of our response to Covid-19.
Doing things with residents, not to them	Residents are at the heart of our draft Equalities Plan for 2021-25. We are committed to residents developing and co-producing council policies and strategies that impact on their lives, so they are valued and we remove barriers to participation.
Building shared prosperity	Consideration of the needs of people who are disadvantaged or suffer inequality is central to the Public Sector Equalities Duty. Through considering equalities, diversity and inclusion implications at every stage of the decision-making process and creating targeted

	programmes where necessary, we seek to remove barriers and ensure that all can share in prosperity.
Taking pride in H&F	Our actions and policies for equalities, diversity and inclusion celebrate and protect the diversity of the borough, creating a place we can all be proud of.
Being ruthlessly financially efficient	Working with and valuing the contributions of residents leads to services which better meet the needs of our population in a financially efficient way.
Rising to the challenge of the climate and ecological emergency	Providing opportunities for training and employment are central to the Equalities Plan (particularly objectives 3 and 4). A green new deal will help recovery from the employment effects of Covid by creating new jobs and skills.

Introduction

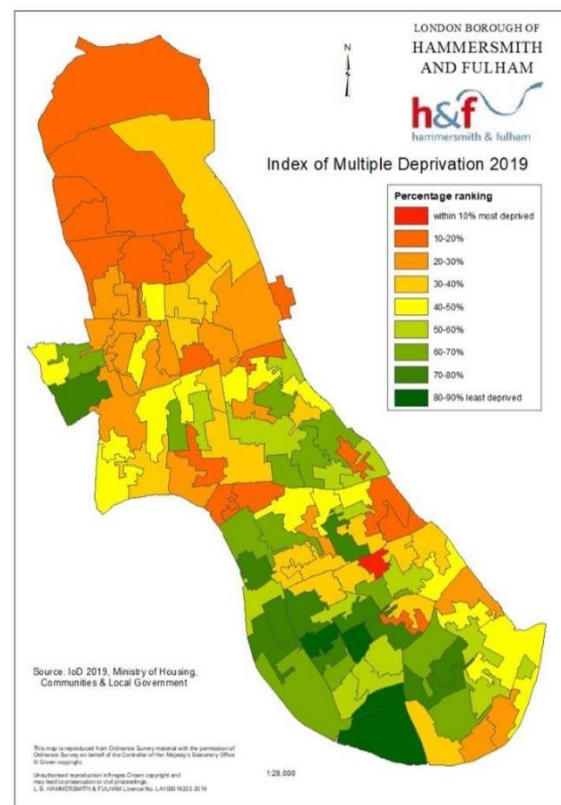
1. Equalities, diversity and inclusion is at the heart of what H&F is about, both as a place and a council. That's why we have a Cabinet Lead for Social Inclusion (the Deputy Leader), are the only local authority to have abolished home care charges for adult social care and we also provide free breakfasts to all school-age children.
2. Our vision is to become the most inclusive borough in the country, where residents feel valued, welcome and included, embracing the diversity of backgrounds, experiences and perspectives.
3. In 2020, the Covid-19 pandemic highlighted inequalities more than at any other time in a generation, making this work more important than ever and has dominated the inclusion agenda. Examples of this work, have included addressing language barriers to spread the stay at home message; supporting children and families to access education; tackling vaccine hesitancy; supporting residents whose incomes have been significantly impacted; and supporting vulnerable, particular older, residents, to shield. The launch of 'H&F Can' in March of 2020 underpinned and co-ordinated the support provided to and needed by residents during the pandemic and gave an in-depth and comprehensive understanding of the inequalities some residents face.
4. Following the success of the resident lead Disabled peoples' commission, we have been working in partnership with disabled residents on the new Civic campus project to ensure it becomes the most inclusive and accessible building possible. All senior staff and Cabinet Members have been provided with training on the social model of disability as recommended by the commission.
5. After the murder of George Floyd in America in May 2020, evidence of racial inequalities and ethnic disparities became further highlighted. The impact of the

pandemic raised clear health inequalities for many communities within the borough. These areas of work are a key focus.

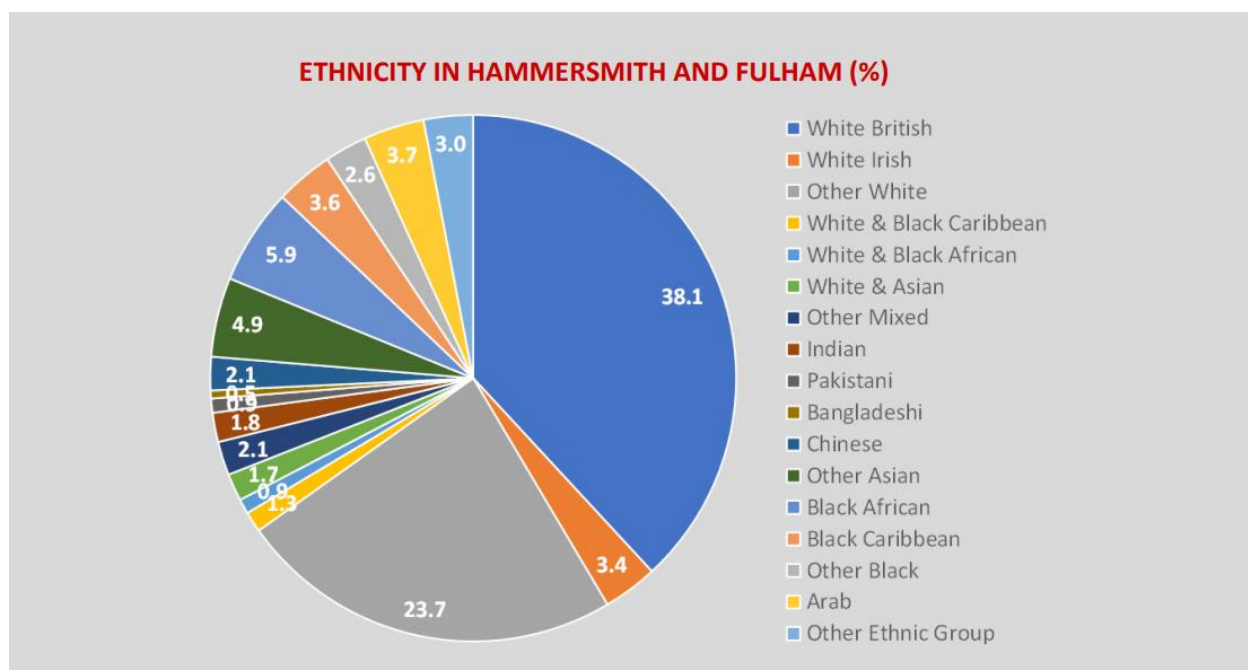
6. The Equalities Plan will provide focus and a framework for inclusion activities over the next four years.
7. Members should note that equalities work is well embedded in all departments, with equalities implications detailed in every policy and expenditure report as a key part of the decision-making process.

Background

8. H&F is one of the most diverse local authorities in the country. It has a young, diverse and mobile population, with the sixth highest mobility rate in London.
9. While parts of the borough are among the least deprived and most affluent, there are pockets of deprivation. Overall, in 2019 H&F was ranked the 112th most deprived local authority in England according to the national deprivation index which looks at measures including living environment, housing, crime, income, employment, health and education.
10. The borough is split into 113 parts, each comprised of around 1,550 residents or 700 households. Only one of these (Clem Attlee estate) is ranked in the 10% most deprived nationally. Some 17% are ranked in the next band, 10-20% most deprived. These areas are mostly in the north of the borough including College Park & Old Oak and Wormholt & White City wards, but also in parts of Hammersmith and north Fulham.
11. This is an improvement from the previous two datasets in 2015 and 2010, where H&F was ranked 91st and 55th most deprived respectively.
12. The northern part of H&F is more ethnically diverse than the southern part, with diversity greatest in younger age groups. 43% of its residents were born outside of the UK, coming from over 100 different countries.



13. In mid-2020, 35% of the borough's residents were estimated to be from an ethnic group other than white (up from 32% in 2011). 12% of our population are from a Black background, 10% Asian, 7% Arab & Other, and 6% Mixed.



Launching the 2021-25 H&F Equalities Plan Consultation

14. Steered by the Deputy Leader, our equalities plan seeks to deliver measurable improvements.
15. There are nine 'protected characteristics' set out in the Equalities Act 2010: age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation. The Act sets out the public sector equality duty to ensure public authorities think about the needs of people who are disadvantaged or suffer inequality when making decisions about how they provide services and implement policies. Our plan seeks to promote equality of opportunity for all.
16. We've launched a [12-week public consultation](#)¹ of our [draft Equalities Plan 2021-25](#) which is open until the 30th of April on the council's consultation platform Citizenspace.
17. We're asking residents to comment on the draft five key objectives.

¹ For those not able to access the embedded hyperlink, the consultation can be found at <https://www.lbhf.gov.uk/equality>

I. Everyone in our borough must feel valued when the Covid-19 pandemic ends

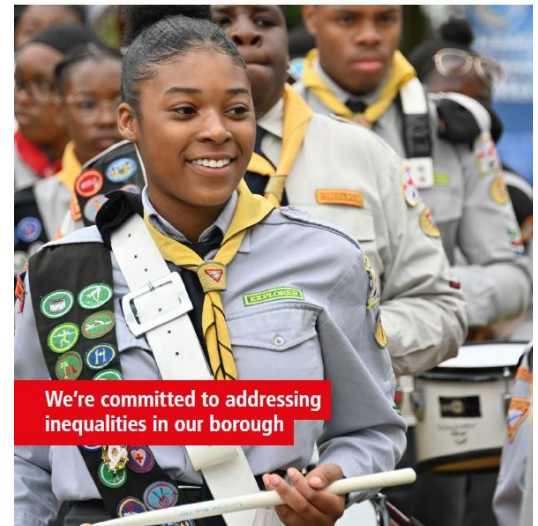
The Covid-19 pandemic has highlighted the importance and impact of community wellbeing and collaboration. Our goal is to keep this at the heart of our public health response and draw on it to strengthen wider community and social cohesion.

**Consultation on our
Draft Equalities Plan
2021-25**



II. Removing barriers to inclusion

Our objective is to establish H&F as the most accessible and inclusive borough in the country. Following the recommendation of our local Disabled People's Commission, led by local Disabled residents, our aim is for all residents to be involved in developing and co-producing all council policies and strategies that impact on their lives.



III. Ensuring that our services tackle the disproportionate impact on young people of the risks of street crime and exploitation by gangs

We want to make sure that all children and young people at risk of gangs and street crime receive the critical services and interventions available to better equip them to secure positive opportunities and bright futures.

IV. Improving opportunities for all

We want to create opportunities for residents and communities of all backgrounds to flourish, developing their skills and abilities in their chosen career paths.

V. Becoming an employer of choice and fostering greater inclusion

We want to recruit from all sections of our community to ensure that the council's workforce reflects the borough's diversity whilst creating an environment where all staff feel secure and confident in being themselves.

18. Everyone is encouraged to participate in the [survey](#). Equalities, Diversity and Inclusion is a corporate commitment and underpins all our priorities and practice and we want to ensure a high profile and active engagement across our borough. A full report is going to the Public Services Reform Policy and Accountability Committee on 7 April which reflects the range of work already in train across the council.

Appendices

Appendix 1 - Draft Equalities Plan 2021 - 2025

Consultation on our Draft Equalities Plan 2021-25



**We're committed to addressing
inequalities in our borough**



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Front cover: CommUnity Day marchers arrive in Ravenscourt Park for the celebration.

This page: Residents enjoy a Black History Month event, Hammersmith & Fulham Foodbank volunteers work to distribute parcels at Olympia London, and Free school lunches underway at Fulham Cross Academy.

H&F Draft Equalities Plan

Foreword from Councillor Sue Fennimore



We're committed to making Hammersmith & Fulham the most inclusive borough in the country; a place where everyone feels valued and residents have equal access to the opportunities our borough offers. I believe that local government should change people's lives for the better – it can and it does. Fundamental to achieving that is identifying and dismantling inequalities that hold us back.

The council has a major role to play, both in tackling inequality and in creating new opportunities. That's why we're working hard and have created an Industrial Strategy that responds to the needs of young people and provides access to future growth sector careers, such as digital media and STEM (Science, Technology, Engineering and Maths) industries amongst other projects and policies that create a strong and inclusive environment.

We want to hear your views as part of this consultation, we don't have all the answers but we're committed to doing things with residents not to them. We want to hear the barriers you or others may face and how you believe they can be tackled. We believe that if we work together we can develop new policies that really go to the heart of the barriers that our residents face and together, we can address them.

We've set out our vision for tackling inequality. It has five draft objectives:

1. Everyone in our borough must feel valued when the Covid-19 pandemic ends.
2. Removing barriers to inclusion.
3. Ensuring that our services tackle the disproportionate impact on young people of the risks of street crime and exploitation by gangs.
4. Improving opportunities for all.
5. Becoming an employer of choice and fostering greater inclusion.

But we want to know what you think. Are these the right objectives for H&F's Equalities Plan? What else should we include?

The council has already made great strides over the last seven years in addressing inequality by tackling issues ranging from food poverty, crime and discrimination to loneliness and homelessness. We've also supported and helped local businesses, generated employment and educational opportunities and we continuously promote social cohesion. We put compassion at the heart of everything we do.

But we can do more

The coronavirus pandemic has put into stark relief the inequalities that still persist within our communities – disproportionate numbers of people from our Black, Asian and Minority Ethnic communities have lost their lives and the most deprived communities have been the hardest hit, both economically and in terms of unemployment and worsening mental health. We also know that working women and female carers have borne a disproportionate impact and that our Disabled residents face new and specific challenges.

But this pandemic has also revealed the strength in our communities as illustrated by the army of volunteers who have provided food, company and support to those in our community who needed it most.

When we emerge from this pandemic, we have an opportunity to not only build back better, but to build back fairer. Please let us know how you think we can achieve that.

Councillor Sue Fennimore
Deputy Leader Hammersmith & Fulham Council



Fairness and Equality at the heart of what we do

Hammersmith & Fulham Council puts fairness, equality and compassion at the heart of everything we do. Here's a snapshot of some of our recent work:

In 2019, we started providing free school breakfasts for all our primary school children and pilots in two secondary schools, to help them reach their full potential. We already provide free home care for all our Disabled and older residents, and, in partnership with local charities, a free Christmas meal to the over 60s, which helps to tackle loneliness and isolation at a critical time. Supporting our residents always come first, but we're also proud that we were able to offer sanctuary to unaccompanied refugee children many of whom were stranded in terrible conditions in camps in mainland Europe.

This borough celebrates our residents' diversity, whether during Black History Month, Inter Faith Week or UK Disability History Month and throughout the year. Our International Women's Day celebrations are important to us and last year we promoted a full community programme marking 16 Days of Gender-Based Activism.

We proudly fly the EU flag over our Town Hall because we value our EU citizens and the contribution they have made to our communities over generations.

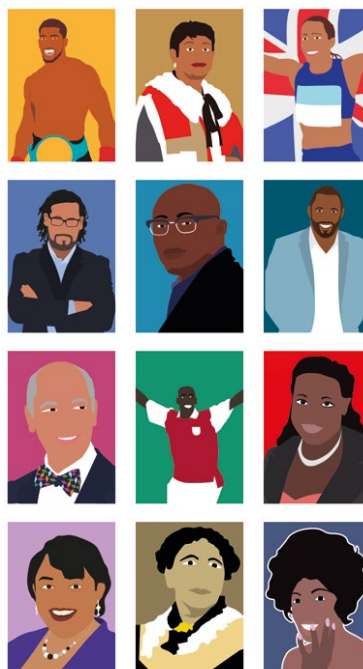
We work hard to tackle all forms of discrimination and prejudice and we launched CommUnity Day in response to the spike in hate crime we witnessed after the Brexit Referendum. It's our answer to efforts to divide our communities and provides an opportunity to come together in celebration of our borough's rich multicultural heritage.

These events are important symbols of our determination to tackle inequality, but they are not

only symbolic. Through our ambitious Industrial Strategy: 'Economic Growth for Everyone,' which will shape our post-Covid-19 recovery efforts, we're determined to provide educational and employment opportunities across our borough through apprenticeship incentives and employment support for local residents.

Our Town Hall redevelopment is being co-produced with a group of Disabled residents to make sure it is the most accessible and inclusive Civic Campus in Britain allowing everyone to share in the prosperity it will bring.

And we take our responsibilities as a large local employer seriously too, with a diverse workforce across all grades including senior management and a focus on inclusive and responsive services, solutions and opportunities that address the needs of people who are faced with disadvantage or inequalities.



Previous page: Our efforts to challenge violence against women and girls included 16 days of activism as part of an international campaign, Lord Alf Dubs and Vanessa Redgrave joined local refugees to celebrate Refugee Week, an International Women's Day event, our campaign to encourage EU citizens in H&F to apply for full settlement rights before Brexit. This page: Black History Month.



Who can participate in this consultation?

Everyone!

Hammersmith & Fulham is one of the most diverse places in the country, home to communities of people with different identities, cultures, languages and traditions including some of the poorest and some of the wealthiest in London.

We encourage participation from all sections of our diverse community, irrespective of age, disability, sex, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation, or because someone is married or in a civil partnership.

We believe our borough will be a better, more creative and innovative place to work, visit and live in if we can actively listen to lots of different perspectives, so please tell us what you think.

We'll produce an updated final plan once we've considered your views and ideas.

Take part in our survey

We've drafted five objectives for our H&F Equalities Plan 2021-25 in response to our public sector equalities duty. We're serious about achieving measurable and sustainable change.

We would welcome your feedback on the following questions:

- Are these the right objectives for H&F's Equalities Plan?
- What else should we include?

To take part and improve Hammersmith & Fulham Council, please visit:
www.lbhf.gov.uk/equality

This consultation will be open from
1 February 2021 until midnight on
30 April 2021.

Accessing the H&F website

We're committed to a website that is accessible to all users. We've taken on board international guidance and web accessibility legislation about how to do this.

Our accessibility statement provides details on the steps we've taken. We review the site and make updates to improve access regularly.

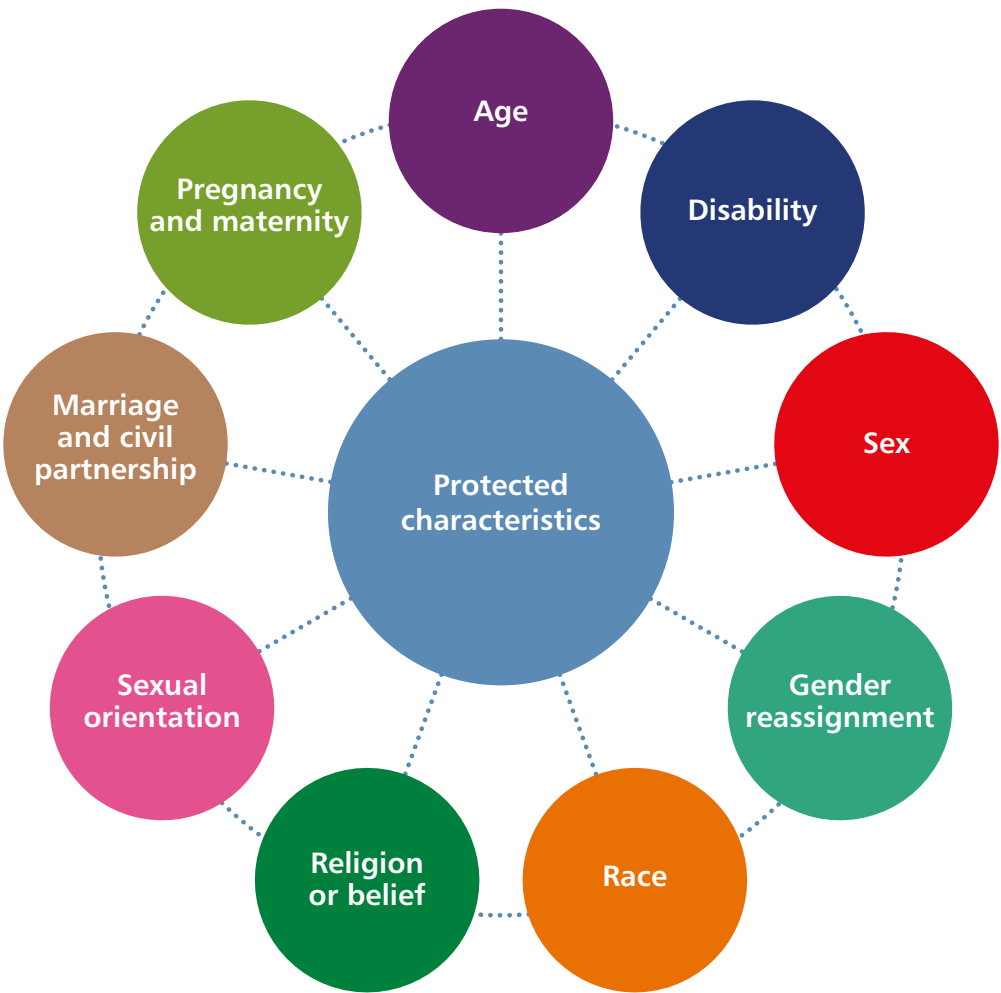
Need more help?

If you need more help accessing this consultation, or need the material in a different format, please email: **equalitiesconsultation@lbhf.gov.uk** or call 020 8753 1040.

Previous page: Residents join our annual CommUnity Day celebrations and our fight against racism, a Fulham Cross Academy pupil takes part in the annual H&F Chef of the Year competition, local business winners at our annual H&F Brilliant Business Awards ceremony, an Adult Education class at the Macbeth Centre in Hammersmith, and members of the independent, resident-led Women's Equality Commission get to work, Youth Takeover Challenge day at Chelsea FC, a same sex wedding ceremony.

Our Draft Equalities Plan – the protected characteristics

There are nine protected characteristics and in the following pages we outline five key draft objectives to focus on deliverable outcomes.



Our draft objectives

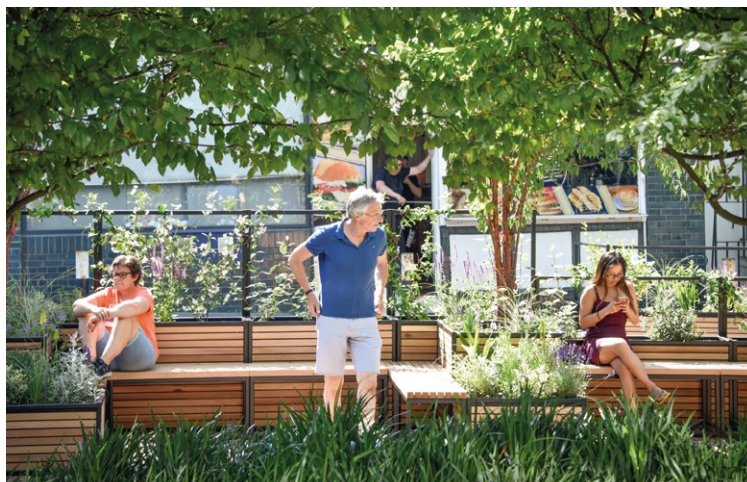
Objective 1 Everyone in our borough must feel valued when the Covid-19 pandemic ends

We aim to foster an environment in which all residents, workers and borough visitors feel valued, included, safe from discrimination and prejudice and that our public services are responsive to their needs.

The Covid-19 pandemic of 2020 has highlighted the importance and impact of community wellbeing and collaboration. Our goal is to keep this at the heart of our public health response and draw on it to strengthen wider community and social cohesion.

We want to ensure that everyone in Hammersmith & Fulham is free from the fear of attack or abuse on the basis of their age, disability, sex, gender reassignment, pregnancy and maternity, race, religion or belief and sexual orientation or any other factor that defines their unique identity, that they are not isolated from wider society and that they have access to a healthy environment.

As a local authority, we use our limited powers and resources to enable us to achieve these objectives as far as we can. We work in partnership with other agencies and look to central government to provide supportive legislation and enforcement to promote equality.



The council's workstreams already supporting this objective include:

- Tackling health inequalities and disproportionate impact.
- Tackling social isolation and loneliness.
- Supporting greater community participation, volunteering and involvement.
- Delivering environmental improvements, e.g. cycle paths and pocket-sized areas of seating and greenery called "parklets".
- Tackling poverty, homelessness and rough sleeping.
- Supporting local businesses and access to good quality jobs.

This page: One of four new community green spaces opened in Hammersmith Grove.



Objective 2

Removing barriers to inclusion

Our objective is to establish Hammersmith & Fulham as the most accessible and inclusive borough in the country. We're connecting with more and more residents to identify the challenges and barriers they face. Those connections have grown stronger during the pandemic.

Following the recommendations of our local Disabled People's Commission, led by local Disabled residents, our aim is for all residents to be involved in developing and co-producing all council policies and strategies that impact on their lives.

We recognise that as well as facing discrimination on individual grounds of age, disability, sex, gender reassignment, pregnancy and maternity, race, religion or belief and sexual orientation our residents can face discrimination for more than one reason. The push for greater inclusion and equality will increasingly identify those different experiences so that they are reflected in what we do.

The work we're doing is all about 'Doing things with residents and not to them'. Co-production (working together) is a way for us to make that happen in practice and includes everyone. The work we've been doing shows that we can be successful in bringing about inclusive change if we adopt the approach of 'Nothing About Us Without Us' with residents and staff.



The council's workstreams already supporting this objective include:

- Co-producing council policies and strategies with those they impact.
- Ensuring the Civic Campus development is co-produced, inclusive and fully accessible.
- Working with residents to co-produce more public projects such as White City.
- Developing our Independent Living vision with residents to support more choice and control over support and services in areas such as social care, housing, employment and education.
- Recruiting residents to support the delivery of our new Disabled People's Housing Strategy.
- Developing resources with community organisations so residents can feel confident to get involved if they want to.
- Challenging digital exclusion and connecting residents with council services.
- Continuing to foster a resident focused culture within the council.

All our work is about building good, inclusive, relationships with residents.

Previous page: Year 11 pupils conduct an experiment at Imperial College in White City. This page: Councillor Sue Fennimore presents the final report of the Independent Disabled Residents' Commission alongside members of the commission.



Objective 3

Ensuring that our services tackle the disproportionate impact on young people of the risks of street crime and exploitation by gangs

Our values include economic prosperity for all. We want to ensure that all children and young people at risk of gangs and street crime receive the critical services and interventions available to better equip them to secure positive opportunities and bright futures.

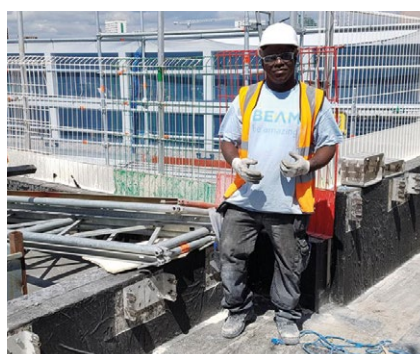
Over the past eighteen months the borough has seen an increase in serious youth violence, largely attributed to organised gang activity. In response, we've set up a new Gangs, Violence and Exploitation Unit, in partnership with the Metropolitan Police Service, tasked with keeping people safe, preventing young people from being victimised or exploited by organised criminals and tackling the fear of crime.



The council's workstreams already supporting this objective include:

- Getting the most value from our new dedicated Gangs unit.
- Embedding The NET, our expanded street Neighbourhood Enforcement Team.
- Developing a safer streets and gang strategy.
- Continuing to tackle hate related crime.
- Delivering the Prevent strategy (which identifies and engages with individuals who may be susceptible to being radicalised and drawn into terrorist activities).
- Promoting inter-generational initiatives that are proven to deliver greater community cohesion and a better understanding of the different challenges affecting younger and older people.
- Ensuring that the Hammersmith & Fulham's Industrial Strategy responds to the needs of young people and is a catalyst for boosting career opportunities and enterprise in growth sectors, such as digital media and science, technology, engineering and mathematics (STEM) industries.

Previous page: H&F Council Leader Stephen Cowan and Deputy Leader Sue Fennimore launch the new Gangs, Violence and Exploitation Unit, in partnership with the Metropolitan Police.



Objective 4

Improving opportunities for all

We want to create opportunities for residents and communities of all backgrounds to flourish, developing their skills and abilities in their chosen career paths.

We'll use our influence, powers and resources to ensure that borough residents have full access to training, enterprise and career opportunities, to help them reach their full potential and fulfil their aspirations. No one should face any disadvantage in the labour market in Hammersmith & Fulham.



The council's workstreams already supporting this objective include:

- Ensuring our Industrial Strategy helps tackle a post-Covid-19 recession in collaboration with key anchor institutions and business, regional and pan-London partners.
- Targeted employment and training initiatives, including:
 - Earn while you Learn initiative: expanding council and borough-wide apprenticeship activity, from entry level to advanced and improving access for all residents.
 - Growing our Supported Interns programme.
 - Rebooting Workzone: our borough-wide employment brokerage service so we better support access for all residents to good jobs and skills opportunities.
 - Beam programmes: helping homeless people get the training and support they need to access skilled jobs.
- Promoting adult learning and skills training and building greater access to employability and life-long learning for all.
- Valuing the voices of the Youth Council in all our work.

Previous page: Working with Imperial College means we can encourage young people to fulfil their potential in science and technology, Youth Parliament at Hammersmith Town Hall 2017, H&F and Beam are helping homeless people get the training they need to access skilled jobs, International Day of Persons with Disabilities event at Hammersmith Town Hall. This page: Duke at Pedal Back Cycling in Fulham, Adult education courses at H&F's Macbeth Centre.



Objective 5

Becoming an employer of choice and fostering greater inclusion

We want to recruit from all sections of our community to ensure that the council's workforce reflects the borough's diversity whilst creating an environment where all staff feel secure and confident in being themselves.

We believe that the council cannot ensure the delivery of equal opportunities and equal treatment and inclusion for its residents and service users, if its workforce doesn't reflect the community it serves. We aim to employ a workforce that represents our borough's demographic, one that is treated equally and respectfully with all its differences embraced and celebrated.

The council is working on its pledge to ensure equality of opportunity among staff and potential recruits. We'll lead by example. We'll monitor our own standards to make sure we achieve and maintain an inclusive workforce at all levels of the organisation through coaching, mentoring, job carving and career pathways.



The council's workstreams already supporting this objective include:

- People and Talent initiatives, e.g. Get Ahead (promoting internal staff development opportunities).
- Recruitment and selection policies and procedures – maximising inclusive career opportunities for residents and young people.
- Inclusion matters – developing a participative staff culture (e.g. H&F Way, a staff led initiative).
- Tackling race inequality initiatives in response to the Black Lives Matter movement.
- Communicating with our customers – improving customer services.

Previous page: H&F Council aims to be a fully inclusive employer. However, focusing on inclusion does not mean that we don't need to think, talk or take action around issues of diversity and equality. This page: Earn While You Learn (apprenticeships).

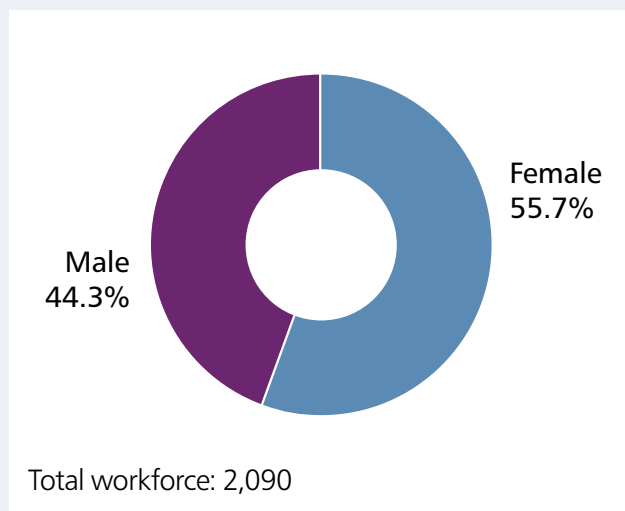
A volunteer at the Hammersmith & Fulham Foodbank helps package a parcel for a resident in need.



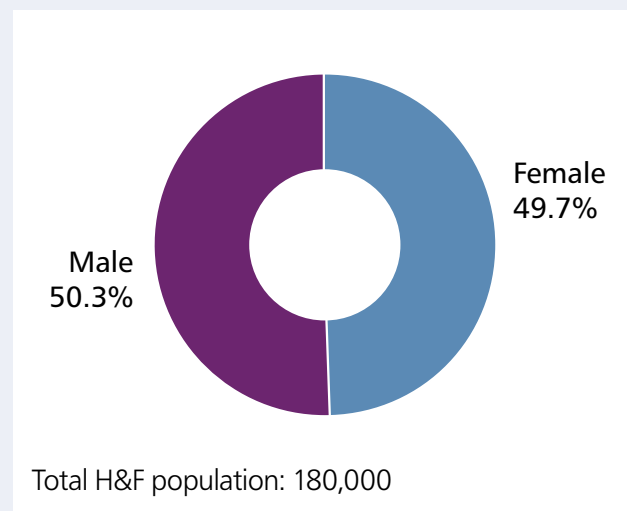
How the council is doing as an employer – a snapshot

We employ 2,090 people and work well with a good number of contractors. The opportunity to be an exemplar employer for equality, diversity and inclusion is something we are striving towards.

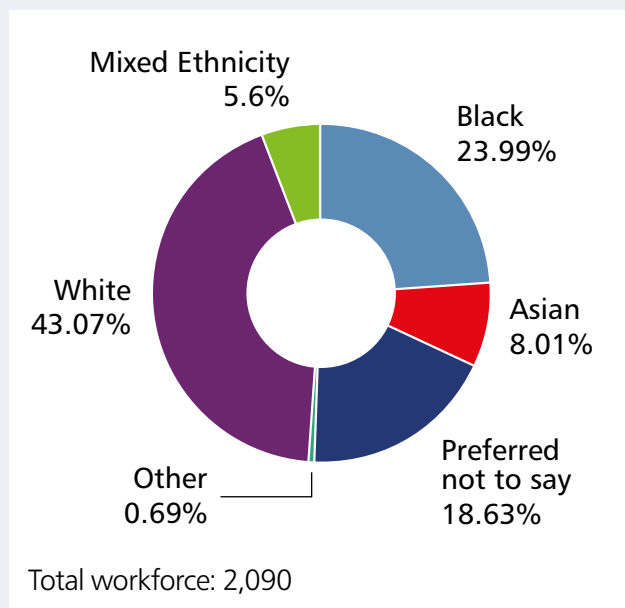
Workforce by gender, December 2020*



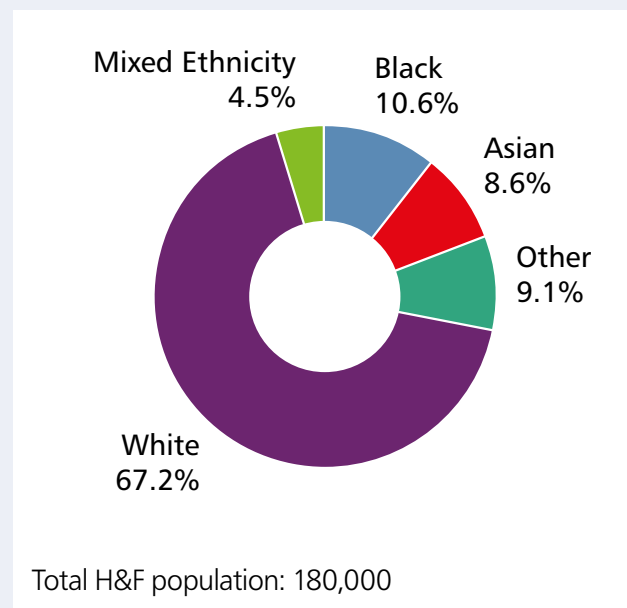
H&F working age population by gender, 2020



Workforce by ethnicity, December 2020*



H&F working age population by ethnicity, 2020



*At the council we are promoting a 'share not declare' initiative with staff and are pleased to see that more staff are sharing their data.



London Borough of Hammersmith & Fulham

Report to: Policy & Accountability Committee

Date: 30 March 2021

Subject: Community Champions – working together

Report of: Katharina Herrmann

Responsible Director: Lisa Redfern, Strategic Director Social Care

Summary

The community champion projects have been delivering in H&F since 2013, the maternity champion project started in 2017. Each project has a manager who is responsible for recruiting and training volunteers from the local area who can act as champions, delivering messages of support around healthy lifestyles; changing unhealthy behaviours and improving health and wellbeing of the population.

The Council is working with the champions depth of community experience to promote testing and vaccination, alongside their regular public health messaging.

There are currently six community and one maternity champion projects. Locations are listed in the analysis section.

Recommendations

That the Council continues to work with community champions as a successful method of supporting and communicating with residents in their communities to promote health and well-being.

Wards Affected: All, potentially, but particularly the wards where the projects operate.

H&F Values

Our Values	Summary of how this report aligns to the H&F Priorities
<ul style="list-style-type: none">• Building shared prosperity	A number of champions move on from volunteering into paid employment.
<ul style="list-style-type: none">• Creating a compassionate council	Projects address issues in areas of highest need and deprivation.
<ul style="list-style-type: none">• Doing things with local residents, not to them	Local volunteers work with local people, helping to address health and well-being issues.
<ul style="list-style-type: none">• Being ruthlessly financially efficient	Reduction of problems that can create high expenses for the council, such as children being taken into care.
<ul style="list-style-type: none">• Taking pride in H&F	Improves local engagement in deprived parts of the borough.
<ul style="list-style-type: none">• Rising to the challenge of the climate and ecological emergency	Raise awareness and address solutions such as alternative use of transport, improving health and reducing pollution.

Contact Officer(s):

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Email: Katharina.Herrmann@lbhf.gov.uk

DETAILED ANALYSIS

1. The role of community champions is to implement effective and sustainable community-led approaches, particularly in areas of greatest need. They engage with and invest in people to build and strengthen good health and wellbeing for their communities; they build confidence, knowledge, skills and capacity of local people. Community champions work in partnerships with local organisations and agencies to provide volunteering and employment opportunities.
2. The H&F Community Champions projects are based in six areas that experience the highest levels of deprivation, where peer led activities have been shown to have a significantly positive impact upon behaviour change. The six projects are:

- White City (managed by Urban Partnership Group (UPG), based at Parkview)
 - Edward Woods (managed by UPG, based at Edward Woods estate)
 - Addison Champions (managed by UPG)
 - Old Oak (based at Old Oak Centre, managed by Peabody Trust)
 - Bayonne and Field Road Estates (Laundry Rd, managed by H&F Volunteer Centre)
 - West Kensington and Gibbs Green (managed by Pinnacle Housing)
3. Through training, information sharing, signposting, events, consultations and campaigns, Community Champions had over 19,000 resident interactions in 2019 alone. Examples of key community benefits achieved are:
- Reduced impact of food poverty
 - Avoiding an A&E visit or hospital admission
 - Moving from Universal Credit to employment
 - Sustaining tenancies, avoiding eviction, other housing support and assistance
 - Extra support for people who speak no or little English
 - Help avoiding children to be placed in care of local authority
 - Help to avoid someone committing a criminal offence
 - Help to avoid school exclusions
 - Help to take medication correctly
 - Avoiding a mental health crisis
 - Supporting people with learning difficulties or physical disabilities
 - Engaging those who were previously isolated and/or lone
- Additional benefits of the maternity champions project are:
- Breastfeeding levels above national average
 - Improved health literacy about maternal health and baby development
 - Many parents are less isolated, less alienated, develop more social relationships/friendships avoid worse mental health and lower levels of wellbeing
 - Improved confidence and empowerment amongst parents around how to structure their parenting techniques, strategies, and decision-making
 - Increased opportunities for parents and residents in maternity volunteering and training
4. Throughout the Covid Crisis in 2020, projects responded speedily, flexibly, and creatively by moving many activities online – within 3-4 weeks most projects had initiated online activities. The regular sessions modified their content, for example finance and well-being sessions provided practical advice for the pandemic situation. Activities re-focussed on supporting food provision and distribution to low income households where necessary, eg White City.
5. Information on testing and later vaccination for Covid was circulated through the CC networks, council information and messages were distributed that way, but project managers also quickly took their own initiative to organise workshops and online question and answer sessions for their

communities with health care staff. Vaccination information is distributed consistently on a weekly basis, through social media channels - including specific WhatsApp groups for Champions and service users. Updates are also provided weekly during coffee morning sessions.

6. This happened despite some of the trained volunteers temporarily turning into service users, due to their changed circumstances. Recruitment of new volunteers slowed down in 2020, but will be a focus of the recovery.
7. Between 1st April and end of December 2020, the Community and Maternity Champions had approximately 6,430 supportive contacts with local people, many of these involved food provision and advice on how to stay safe. With the help of CCG colleagues, the priority is now shifting to intensive engagement with people who are reluctant to get vaccinated in a co-ordinated attempt to address their concerns. Apart from holding information sessions with experts and distributing the Council and NHS guidance, the community champions have collected and shared an extensive list of reasons why people are concerned through the regular events they hold. This is valuable information. Over 70 champions are currently active, although there are more, some still have to shield due to complications from the pandemic.
8. Council staff (Communications, Community Investment) have provided tools and information to improve the take up of tests and vaccinations, which the community champions are disseminating through their networks. This has resulted in valuable feedback on why parts of the population are reluctant to engage or comply with health advice, helping to identify and address systemic problems that put some groups at a disadvantage.
9. The Community and Maternity champions are networked into other programmes, e.g. PCN link workers, UPG Masbro Centre, Sheltered Housing, Parkview surgery, through their management structure, location, volunteers and contacts. This increases their reach into other communities.
10. Future planned activity: approval is currently being sought to renew and re-tender the Community Champions and Maternity Champions projects, streamlining their funding arrangements and time scales. The work on testing and vaccination promotion will continue until the pandemic abates. Council officers are working with the community and maternity champions on a review of priority outcomes and building upon learning from the pandemic.
11. Having an existing network of community champions put H&F at an advantage regarding messaging communities where English may not be the first language and where levels of hesitancy are high – we were able to quickly and routinely spread positive messages in a range of languages by peers to support the Council's pandemic response.

List of Appendices:

Community Champions outcomes on a page – taken from an independent report completed June 2020.

Link to the [video](#) is here.



Champions on a Page

**90
Active
Champions**
**61 Community
29 Maternity**

**Volunteer in their communities
to improve health and wellbeing and
build community resilience**

1

**Six Community Champions hubs in
the Borough reaching around
6000 households**



2

**32 languages
spoken by the
Champions**

**95% are women
85% from BAME
communities**



**Lots of Champions move on to
employment (22 in 2019)
= £506,000 in value/benefit**
Public Health England calculation

3

**Champions gave 6,411 volunteering
hours in 2019 with a value of £68,918***

* calculated using London Living wage - £10.75

**For every £1 invested in the Programme
a value of £5-£6 is realised (SROI 2018)**



What do Champions do?

- lots of training
- sharing information and learning about health and wellbeing
- signposting to services
- gathering insight from communities and help services develop
- run activities, events and campaigns - over 19,000 resident interactions in 2019

Click on this [link](#) to watch a short film about the Champions

Agenda Item 8

London Borough of Hammersmith & Fulham

Report to: Health, Inclusion and Social Care Policy & Accountability Committee

Date: Tuesday, 30 March 2021

Subject: Work Programme

Report of: Bathsheba Mall

Summary

The Committee is asked to consider its work programme for the municipal year 2020/21

Recommendations

The Committee is asked to consider the proposed draft work programme (attached as Appendix 1) and suggest further items for consideration

Wards Affected: All

H&F Priorities

Our Priorities	Summary of how this report aligns to the H&F Priorities
<ul style="list-style-type: none">Building shared prosperity	<i>In accordance with its constitutional terms of reference the work of the Committee will support the Council's priorities by helping to develop, shape and deliver health and social care services for the benefit of all borough residents.</i> <i>The Work Programme comprises of health and social care topics, ensuring an inclusive agenda of emerging and strategic policy areas.</i>
<ul style="list-style-type: none">Creating a compassionate council	
<ul style="list-style-type: none">Doing things with local residents, not to them	
<ul style="list-style-type: none">Being ruthlessly financially efficient	
<ul style="list-style-type: none">Taking pride in H&F	

Contact Officer:

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Background Papers Used in Preparing This Report

None.

List of Appendices:

Committee Work Programme 2020/21

Health, Inclusion and Social Care Policy and Accountability Committee Work Programme Development Plan 2020/21

Item / working title	Overview / Development	Report Author / service
10 September 2020		
Covid-19 Update	Brief update from the Director of Public Health	PH
Supported Employment	To look at the opportunities for improving the provision of supported employment placements within the Borough and that development of guidance for this.	ASC / Economy (LBHF) / Providers
Community Transformation – Mental Health Integrated Network Team	This item provides detailed background information as to the development of the Mental Health Integrated Network Teams (MINT) across Hammersmith & Fulham.	CCG / WLT
4 November 2020		
Covid-19 Update	Brief update from the Director of Public Health	PH
Inclusive Employment - Verbal Update	To look at the opportunities for improving the provision of supported employment placements within the Borough and that development of guidance for this.	ASC / Economy (LBHF) / Providers
Brompton Hospital	Background and context to the potential movement of services from RBH to other providers.	RBH
Healthwatch Young Voices H&F	An outline and introduction to the organisations work and remit, specific to H&F.	Healthwatch Young Voices H&F
26 January 2021		
Budget	For the Committee to review corporate and ASC budget plans and medium-term financial strategies.	Resources / ASC

Suggested items – included for information (2020/21)

Mental Health	Children's
<ul style="list-style-type: none"> • Analysis of Mental Health data and how this informs key performance indicators • West London NHS Trust update • Health Based Places of Safety • The impact of Covid-19 on mental health and wellbeing • Impact of Covid-19 on older people 	<ul style="list-style-type: none"> • Immunisations • Supported Employment
Community / Public Health	Health Partners and Providers
<ul style="list-style-type: none"> • Community Champions - to consider current provision and support, following disaggregation of the service and what this means for LBHF residents; to consider the further development and support of the service. • Health and Public Transport for older residents • The Digital Development of Primary Health Services – GP at Hand • Brompton hospital – impact of the transfer of services* • Immunisation – how to support work around improving immunisation take up, what are the barriers and how can these be effectively addressed 	<ul style="list-style-type: none"> • CAMHS update • Track and track review issues generated by the Imperial Quality Audit. • Engage with and review work being done by PCNs on the effectiveness of their work on Long Term conditions* • Dentistry – most services have been suspended for COVID (an issue that disproportionately effect the more deprived areas)*