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# Merton Council

## Joint Consultative Committee with Ethnic Minority Organisations Agenda

### Membership

#### Councillors:

Edith Macauley MBE (Chair)  
Agatha Mary Akyigyina OBE  
Marsie Skeete  
Slawek Szczepanski  
Hina Bokhari  
Jenifer Gould  
Nick McLean

#### Co-opted members:

#### Substitute Members:

Laxmi Attawar  
Max Austin  
Kirsten Galea

**Date:** Tuesday 18 October 2022

**Time:** 7.15 pm

**Venue:** Council chamber - Merton Civic Centre, London Road, Morden SM4 5DX

This is a public meeting and attendance by the public is encouraged and welcomed. For more information about the agenda please contact [diversity@merton.gov.uk](mailto:diversity@merton.gov.uk) or telephone [020 8545 4637](tel:02085454637).

All Press contacts: [communications@merton.gov.uk](mailto:communications@merton.gov.uk), 020 8545 3181

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# **Joint Consultative Committee with Ethnic Minority Organisations Agenda**

## **18 October 2022**

1 Agenda

1 - 90

### **Note on declarations of interest**

Members are advised to declare any Disclosable Pecuniary Interest in any matter to be considered at the meeting. If a pecuniary interest is declared they should withdraw from the meeting room during the whole of the consideration of that matter and must not participate in any vote on that matter. For further advice please speak with the Managing Director, South London Legal Partnership.

## Merton Council

### Joint Consultative Committee with Ethnic Minority Organisations Agenda

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**Substitute Members:** Laxmi Attawar, Max Austin, Kirsten Galea,

#### Ethnic Minority Organisations

African Educational Cultural & Health Organisation (AECHO) Deputy	Revd Mrs H Neale
Ahmadiyya Muslim Association	Mr .H.Nawaz
Asian Diabetic Support & Awareness Group	Mrs N. Shah
Asian Elderly Group of Merton	Mr M S Sheikh
Asian Youth Association	
BAME Voice	Revd Mrs H Neale
Bangladeshi Association of Merton Deputy	Mr. N. Islam
Bengali Association of Merton Deputy	Mr J Choudhury
Bengali Women's Association of Merton	Mr Rahman
British Muslim Association of Merton	Mrs M Ahmed
Ethnic Minority Centre	Mr B. Afridi
Euro Bangla Federation Deputy	Mrs Sabitri Ray
London South West Chinese Community Association	Dr Haque
Merton African Organisation	Mr Q Anwar
Merton Somali Community	Ms L Saltoon
Mitcham Filipino British Association Deputy	Mr C J Lusack
Merton and Lambeth Citizen's Advice Bureau	Mr A. Ali
Pakistan Cultural Association of Merton & Wandsworth	Ms Colquhoun
Pakistan Welfare Association Deputy	Ms C Batallones
Positive Network	Ms S Hudson
Polish Family Association	Mr M A Shah
South London Somali Community Association	Mr S U Sheikh
South London Tamil Welfare Group	
Victim Support Merton and Sutton	Ms G Salmon
West Indian Families and Friends Association	Mr S Szczepanski
Wimbledon Mosque	Mr A Musse
	Dr PArumugaraasah
	Ms J Davidson
	Mr T Sandiford
	Mr N Din

**Date: Tuesday 18 October 2022**

**Time: 7.15 pm**

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# Joint Consultative Committee with Ethnic Minority Organisations Agenda

## 18 October 2022

1	Declarations of Interest	-
2	Apologies for Absence	-
3	Minutes of previous meeting	3 – 8
4	The Administration’s Priorities - Councillor Ross Garrod, Leader of the Council	-
5	The Bowel Cancer Screening Programme – Lisa-Lyna Ofosu-Asare, Health Improvement Specialist, St George's University Hospitals NHS Foundation Trust	9 – 18
6	Overview of the Integrated Care System – Nadra Gadeed, Engagement and Equalities Lead – Merton and Wandsworth, South-West London Integrated Care System	19 - 67
7	Merton Civic Pride Programme – Amanda Roberts, Policy Strategy and Partnerships Officer, LBM	68 - 84
8	Cost of Living – Octavia Lamb, Policy and Scrutiny Manager, LBM	85 - 90
9.	Any Other Business	-

### Note on declarations of interest

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# Agenda Item: 3

## JOINT CONSULTATIVE COMMITTEE WITH ETHNIC MINORITY ORGANISATIONS

14 June 2022

Present: Councillors Edith Macauley (in the Chair), Councillor Jenifer Gould, Councillor Marsie Skeete, Councillor Agatha Akyigyina, Councillor Slawek Szczepanski, Councillor Nick McLean

Councillor Stringer, Councillor Joan Henry, Hannah Neale, Edla Rouse, Stella Akintan, Evereth Willis, Rathy Alagaratne, Beau Fadahunsi, Sharon Scott, Albrook Mills, Chris Lee, Jane McSherry, Barry Causer, Dr Arumugaraasah, Abayeh Savage, John Dimmer, Floyd Blake, Grace Oyerinde, Jacqueline Williams, Sivapragasam Shivaranjith, Nasim Din

Silence was observed at the start of the meeting to commemorate the 72 people who lost their lives in the Grenfell fire.

### 1. Declarations of Interest

None.

### 2. Apologies

Simon Shimmens, Mr Sheikh

### 3. Minutes

Agreed.

### 4. Climate Change - Amy Mallett, Climate Engagement Officer

Amy Mallett presented an overview of Merton's Climate Change Strategy and action plan. Merton has pledged to be a carbon neutral council by 2030 and to be a net-zero borough by 2050.

87% of respondents to Merton's 2020 [Climate Survey Consultation Report](#) considered themselves to be White British, Irish, or Other, with 13% considering themselves to be of Black, Asian or of mixed origin.

- However, 36.9% of Merton's population are from minority ethnic backgrounds.
- Research conducted by IEMA, SOS-UK and the Equalities Trust found **only 3.1% of** environment professionals identify as ethnic minorities.
- City Hall analysis highlights that 'Black, Asian and Minority Ethnic Londoners are more likely to be affected by the impact of the climate crisis'
- Syed Ahmed, Chair of Community Energy for London said: "BAME and poorer Londoners are more likely to live in areas which feel the full impact of climate

change. This can be as a result of poorer housing, increased pollution, or reduced access to green spaces.

There are multiple intersecting factors that make communities more vulnerable to climate change, including wealth disparities, age, health, housing tenure, physical location, household composition and size among many others.

In Merton wards with the highest levels of climate risk, also have the highest proportion of residents from minority ethnic backgrounds.

Climate injustice i.e., the unequal distribution of impacts from climate change is a huge challenge which must be addressed.

The Council wants to improve our engagement with ethnic minority groups on climate change, as well as other groups who have been underrepresented in climate conversations to date. It is the ONLY way to ensure a fair and socially just transition to net zero.

The council wants to work with organisations in the JCC to identify and promote any positive work that organisations are already taking regarding carbon emissions reductions and climate adaptation. The council also wants to work with the JCC to identify ways of improving engagement on climate action with minority ethnic groups in the borough, as well as identifying barriers to action

By 2023 partnerships are being encouraged with ethnic minority groups, the Council and Merton's Volunteer led Climate Action Group to support in developing community projects to reduce emissions and realise wider co-benefits e.g., improvements in health and well-being, fuel poverty reduction etc.

#### **Comments/Questions**

##### **Q: What's been done so far to approach BAME communities?**

A: The Climate Change Officer role is new, and this is the first engagement with the B.A.M.E. communities. The council's communication channels will be used. Also, there is a Sustainable Communities Climate Action Group. The engagement is just starting.

##### **Q: Is there a difference in the cost of energy?**

A: Electricity and Gas cost difference depends on the supplier and home energy efficiency.

##### **Q: How are we tackling the energy issue and what practical things can be feedback to BAME communities?**

A: The Climate Action plan sets out a range of activities to work towards achieving zero carbon for the borough. The Climate Action group get involved. Quarterly newsletters are sent out by the council. The borough has good tree coverage that is good for high temperatures. The issue of fewer trees in the East of the borough is being addressed. Sustainable Merton is the main organisation used by the council to engage and welcomes involvement from the wider community.

The Climate Action Group was formed in 2021. There is a school's pilot on energy advice.

##### **C: Waiting 30 years is too long, what can be done sooner?**

**C: It is good to know that £2 million is available to address climate change locally.**

**C: What is the reason for climate change? Flooding is a borough-wide issue, the West has more trees and there are cost of living issues in the East. The council should write strategies in a more equal way – residents in the East feel that the area is always made to look bad.**

A: Flooding is caused by numerous factors and the quality of homes and vulnerability come together to make an area have higher risk. The interventions are more weighted in the East.

**C: It is good that the council has committed £2m revenue spend on climate action**

A: The funding will provide extra people to deliver a response on Energy and buildings and Traffic. £15 million of Capital funding will be used to decarbonise the refuse collection. Separate funding is available for tree planting.

**Q: How are we ensuring our recycling refuse disposal is ethical and does not go to Developing countries?**

A: Yes, the council disposes of recycling refuse ethically. About 10 years ago there was the scandal of rubbish being sent to Africa.

**5. The council's response to B.A.M.E. Voice COVID-19 Community Resilience research and recommendations – Evereth Willis, Equality and Community Cohesion Officer**

Evereth presented the council's response to the B.A.M.E. Voice COVID-19 Community Resilience research. She thanked Hannah Neale and colleagues for the work done to support the research and produce the final report.

The research aimed to understand the impact that COVID-19 has had and build resilience among the communities in its different forms: physical, mental, financial, environmental and reduce the risks to these communities in terms of infection and health outcomes.

B.A.M.E. Voice's research programme used a bottom-up approach where the existing skills and knowledge within the communities were used to develop the programme.

The methodology aimed to undertake extensive community engagement based on the traditional African/Asian forms of communication "one tells another", groups are formed into Pods to gather the lived experiences relating specifically to COVID -19 and the more general health inequalities. Each Pod was formed from residents within a certain area meeting outside, or in a large indoor space allowing for social distancing.

The research found that communities most affected by the virus were similar to those in other parts of London, however, projected high levels of infections among Caribbean and African communities had not occurred in Merton.

The Council's swift actions in response COVID-19 were valued and the report also commended the willingness of the Council, CCG & other agencies and approach taken to working with B.A.M.E. communities and wanting to learn from the losses suffered by B.A.M.E. people

However, it raised the matter of the matter of historic systemic racism as the main factor in the inequalities which B.A.M.E. communities faced. This was the view of 80% of those interviewed.

Anger was expressed that not much progress had been made in introducing changes to tackling the long-identified issues of inequalities in East Merton.

There was hope that council and its partners would use the findings as an opportunity to introduce change that makes a difference, and it was now time for less talking and more action.

The report's recommendations were outlined in the following themes:

- Health
- Education
- Employment
- General

The council's response to the recommendations is outlined in a detailed action plan appended to the report to the JCC. Evereth stressed the need for joined-up working and the council working closely with Voluntary sector organisations to co-design services that address the recommendations made.

#### **Comments/ Questions**

**C: It is important to help our selves and to network constructively.**

**C: The Asset-based model approach was good and this approach needs to be built on.**

**C: To respond to educational issues more, Black Asian and Minority Ethnic (B.A.M.E) governors are needed and the council should support training and place the governors in schools across the borough. It is important to have diverse leadership in schools.**

**C: When assessing the Strategic Partnership funding applications, a member of the council's Race Equality Network or B.A.M.E. Voice should sit on the funding panels to give assurance that there is Cultural Competency.**

**C: Health Prevention Walks were suggested to help with health education messages aimed at B.A.M.E. communities . It was also suggested that to promote Black History education, consider erecting plaques to commemorate the achievements of Black people that have made great contributions in Merton or nationally.**

A: The council has a team to support school governors and Equality Diversity and Inclusion training has been provided in the past. The council has the resources to encourage more B.A.M.E. residents and staff to become governors.

A: Lessons will be learnt from the previous Strategic Partnership grant process as it did not give the outcome we wanted. We want to do better for the next funding round and we will work with the Collaborative Working Group to look at ways to ensure that funding reaches grass roots organisations.

A: Transitioning to living safely and equally with COVID is important and we are dealing with the emerging issues associated with Long COVID. It is evident that there is an under representation of B.A.M.E. residents accessing support services. Public Health is going to be working with health partners to co-create resources to increase awareness. We are recommissioning services for health improvement including health checks, weight



management, stop smoking, substance abuse. The procurement process will include working with the voluntary sector.

**C: B.A.M.E. is not homogenous, however it is important that the different groups work in partnership – being together as one organisation gives strength to attract funds and to be cohesive.**

A: Chris Lee provided reassurance that the report's recommendations have been approved by the Corporate Management Team (CMT) and the Corporate Equality Steering Group. The report's findings align with some of the new Administration's priorities, in particular regarding firstly being a Borough of Sport – improving access to sport and secondly Business – a new award for Merton's Best B.A.M.E. Business is being introduced. The council is looking at how it can use leverage to support B.A.M.E. business and the work we are doing with South London Partnership and the Knowledge Exchange can also contribute to this ambition.

**C: It is good that Black business will be recognised.**

**C: It would be good to have an event where information on health improvement and council services can be given to B.A.M.E. communities.**

A: The council needs to adapt its approach and support small organisations to make successful funding bids – it is down to the council to change.

**C: It was a good process used to gather information – it would be good for the council to look at itself as to how it can support small organisation with funding applications.**

**6. Update on Phase 2 of the COVID-19 Community Resilience programme - Hannah Neale, Chair B.A.M.E. Voice**

Hannah Neale updated the meeting and thanked the trustees - Dr Arumugaraasah and Abayeh Savage and the organisations that took part in the research.

The research required organisations to work closely with one another and come together.

She thanked the council for listening and hearing the voices of the people. It is now evident that the council is taking action. Following on from the report, B.A.M.E. Voice worked with 11 organisations looking at the wider health inequalities. Embedded in the project was COVID information. As the project went on people started to see the benefits and it built trust. People were allowed to make an informed choice.

Phase 3 is now being taken forward. Hannah thanked the Council and Councillor Macauley, Councillor Alambritis, Councillor Akyigyina, Councillor Cooper-Marbiah and Public Health for their support. There was swift help to put the projects together. Hannah also thanked John Dimmer and Evereth Willis and the B.A.M.E. residents for their honesty. The response shows there has been a difference.

Councillor Macauley thanked Hannah and her team and the officers who supported the project.

**7. Any Other Business**

Councillor Macauley thanked Chris Lee for his support in championing equalities and welcomed Jane McSherry who will be taking over from Chris as the CMT Equalities lead.

Councillor Macauley also thanked Councillor Stringer, Cabinet Member for Civic Pride, Councillor Nick McLean, Councillor Jennifer Gould, all the other Councillors and the Voluntary sector organisations in attendance.

The meeting ended at 8.53 pm.

# JCC Presentation - The BOWEL CANCER SCREENING PROGRAMME

By Lisa-Lyna Ofosu-Asare

# Bowel Cancer Screening

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Bowel Cancer Screening in South West London (SWL) is delivered by the Bowel Cancer Screening Centre (BCSC) based in St George's Hospital. The BCSC has a dedicated Health Improvement Specialist called Lisa-Lyna Ofofu-Asare, that supports the uptake of Bowel Cancer Screening across SWL. Lisa-Lyna's role involves working within primary care settings as well as doing community engagement. Lisa-Lyna is happy to Engage with Community Groups and provide information on the following:

- ▶ Bowel Cancer - Signs & Symptoms
- ▶ The Bowel Cancer Screening Programme
- ▶ The importance of taking part in the Screening Programme
- ▶ Prevention of Cancer
- ▶ Provide free Bowel Cancer Resources

# Bowel Cancer

# Bowel Cancer: The FACTS



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- ❖ 4<sup>th</sup> most common cancer in the UK.
- ❖ 2<sup>nd</sup> cause of cancer deaths. Around 16,000 deaths a year
- ❖ More common over 60 years old.
- ❖ 98% of people with bowel cancer live for over 5 years if caught early.
- ❖ 50% of bowel cancer cases are linked to lifestyle risk factors
- ❖ Over 42,000 people are diagnosed with bowel cancer, every year in the UK
- ❖ 1 in 15 men and 1 in 18 women will be diagnosed with bowel cancer during their lifetime.

# Symptoms of bowel cancer

Not everyone with bowel cancer will have symptoms and these may vary:

- ❖ A persistent change in bowel habit, especially going more often or looser for several weeks.
- ❖ Bleeding from the anus and/or blood in your poo.
- ❖ A Lump or pain felt in the lower abdomen (tummy).
- ❖ Unexplained weight loss
- ❖ See the GP if persistent for more than TWO weeks

# Bowel Cancer Screening Programme

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# FIT



- ❖ Men and women aged **60 to 74** are screened **every 2 years**
- ❖ Men and women aged 75 and over can request a screening kit
- ❖ **Currently age extension includes 56 year olds and 58 year olds.**
- ❖ It involves a stool test (**FIT**), looks for hidden blood in the stool
- ❖ It can help identify polyps which may develop into cancer, these can be removed (cancer prevention)
- ❖ Test is done at home and posted for analysis

## Barriers to participation in bowel screening

Fear and denial around the test outcome



Individual perceived low risk or don't want to know result



Gender - males less likely to take part in screening



Misconception that the test is not applicable if no apparent symptoms of bowel cancer



Lower uptake among ethnic minority groups



Lower socioeconomic group

Concerns around the practicalities and cleanliness of the test



Low health literacy and numeracy

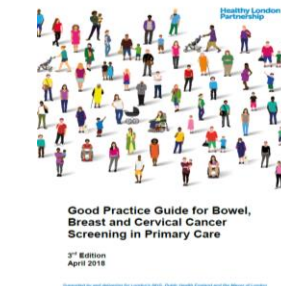


It's important to design activity to address these **barriers** for screening in your area, if relevant.

# Resources

- ▶ Free publications available:
- ▶ Cancer Research UK:  
<http://publications.cancerresearchuk.org/>
- ▶ Macmillan Cancer Support:  
<http://publications.macmillan.org.uk/>
- ▶ Bowel Cancer UK [www.bowelcanceruk.org.uk](http://www.bowelcanceruk.org.uk)

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# South West London Integrated Care System

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## Explaining integrated care and what it means for South West London

**Nadra Gadeed**

Engagement and Equalities Lead – Merton and Wandsworth  
South West London Integrated Care System

# Key messages

- On 1 July 2022, we are launching South West London Integrated Care System as we take on health and care statutory responsibilities
- The ICS will have four purposes:
  1. improving outcomes in population health and healthcare
  2. tackling inequalities in outcomes, experience and access
  3. enhancing productivity and value for money
  4. supporting broader social and economic development
- The South West London Integrated Care System will bring our health and care partners closer together, to make sure local people receive the best care
- New legislation, outlined in the 2022 Health and Social Care Act, makes it easier for GPs, hospitals, mental health, social care, community services, and the voluntary sector to work together more closely.
- By working together, we can do more to: support people to live healthier and happier lives; prevent ill-health; keep people independent for longer; and take action together to address the wider-determinants of health. Examples of these wider-determinants of health are jobs, housing, education and our environment. We know these have a big impact on our health.
- All over the country, in the poorest areas people have worse health and lower life expectancy than the people living in the richest areas. Our South West London ICS will focus on reducing these health inequalities or unfair differences in health in different groups within our six boroughs.

# Narrative

Changes are taking place across health and care in South West London to make sure local people receive the best care. When the NHS was first set up it focused on treating single conditions or illnesses and much has changed in the last 74 years.

The good news is that there are less infectious diseases, fewer people smoke, more people survive cancer, and advances in science and technology have revolutionised the way patients are diagnosed and treated.

However, as people live longer, they often do so with one or more ongoing health conditions, meaning they receive care and support from a variety of places including hospitals, GPs, and social care. Navigating these different services can be confusing and mean receiving care can be more stressful than it needs to be.

The idea of joining-up care is not something new. In South West London, the NHS, local councils, voluntary sector, Healthwatch, charities and community organisations have been working together to improve health and care services for local people for a long time. Our partnership working became stronger throughout the pandemic.

On 1 July 2022, we are launching South West London Integrated Care System, which will take on new health and care statutory responsibilities. This means a legal framework for services to work more closely together so that local people can receive the care they need, when and where they need it.

Each of our health and care organisations has an equal part to play round the table to understand and meet the health and care needs of local people, including a greater emphasis on working with community and voluntary sector organisations. This will mean we can make a bigger difference by helping people live healthier, more independent, and happier lives.

By working together across health and care organisations we can also work more productively with a strong focus on value for money. We can support our communities more by thinking about how we spend our money as health and care organisations. We can aim to buy locally, support local people into employment and training opportunities, and use our spaces and buildings to support our local communities.



# What is Integrated Care ?

Integrated care is about giving people the support they need, joined up across local councils, the NHS, and other partners including social care providers, voluntary and community enterprise sector and charities.

These two animations help explain how

King's Fund animation: how the NHS works and how it is changing



NHS England: Strong Integrated Care Systems Everywhere





# What are Integrated Care Systems?



Integrated Care Systems are partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people in their area. They will be responsible for how health and care is planned, paid for and delivered.

## ICSs have four key purposes:

1. improving outcomes in population health and healthcare
2. tackling inequalities in outcomes, experience and access
3. enhancing productivity and value for money
4. supporting broader social and economic development

# What are Integrated Care Systems?

The Health and Care Act 2022 will establish 42 ICSs across England on a statutory basis.

Integrated Care Systems will be made up of two parts:

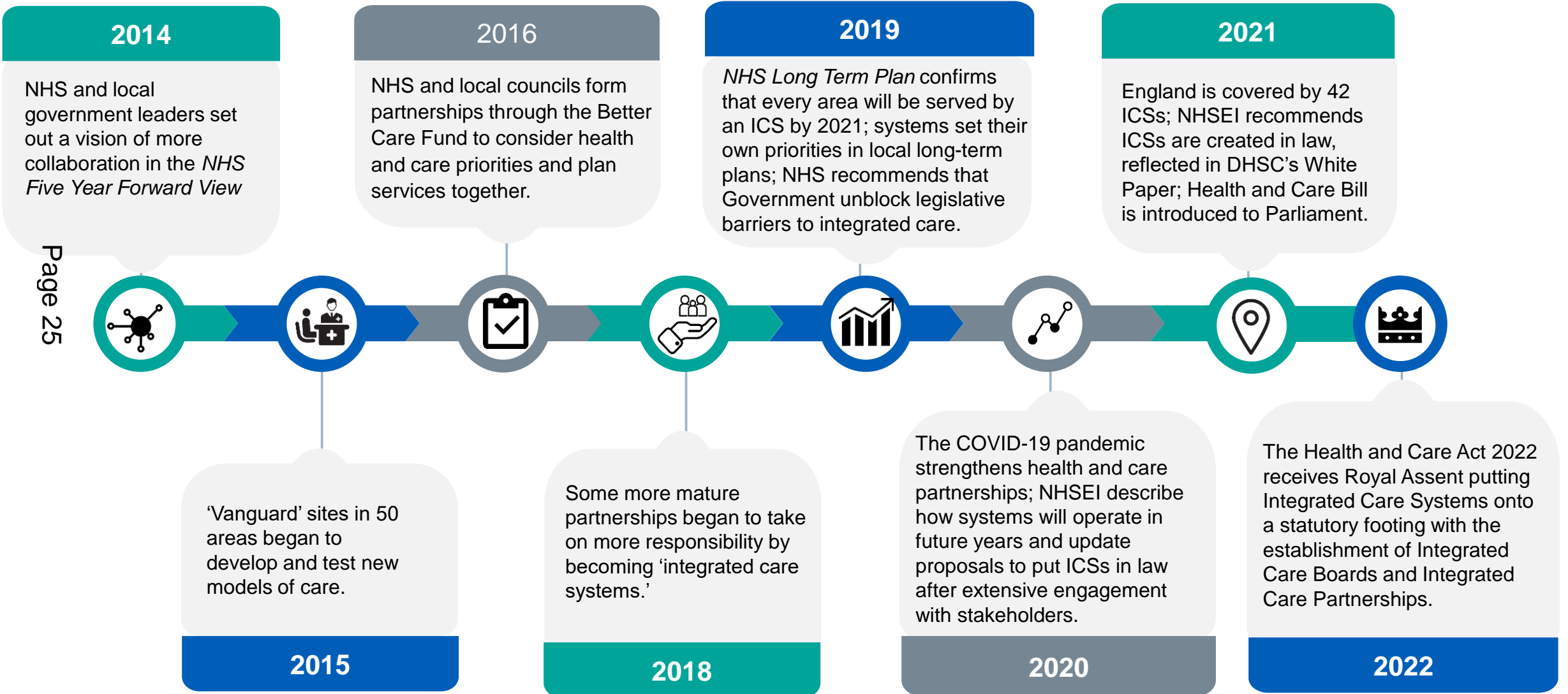
- **Integrated Care Boards** decide how the NHS budget for their area is spent and develop a plan to improve people's health, deliver higher quality care, and better value for money
- **an Integrated Care Partnerships** bring the NHS together with other key partners, like local authorities, to develop a strategy to enable the Integrated Care System to improve health and wellbeing in its area

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**Other important ICS features are:**

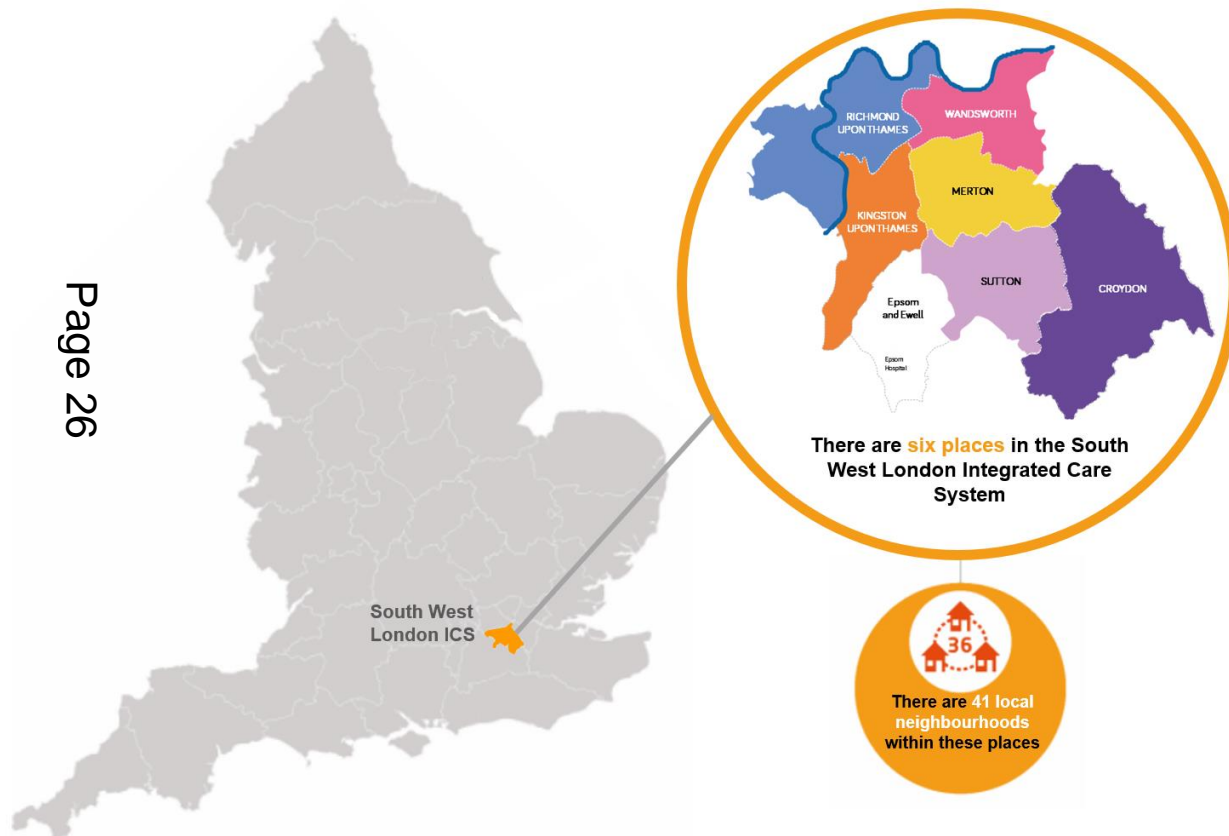
- **Local authorities**, which are responsible for social care and public health functions as well as other vital services for local people and businesses.
- **Place-based partnerships** lead the detailed design and delivery of integrated services across their localities and neighbourhoods. Our place partnerships involve the NHS, local councils, community and voluntary organisations, local residents, people who use services, their carers and representatives and other community partners with a role in supporting the health and wellbeing of the local population.
- **Provider collaboratives** bring NHS providers together to achieve the benefits of working at scale across multiple places and one or more ICSs, to improve quality, efficiency and outcomes and address unwarranted variation and inequalities in access and experience across different providers.

# The journey to integrated care systems



# SW London Integrated Care System

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South West London Health and Care Partnership was granted Integrated Care System status in 2020, and on 1 July 2022 we will take on statutory responsibilities.

We bring together NHS organisations, local councils, Healthwatch, charities, community and voluntary organisations to improve local health and care services and to improve the health and wellbeing of local people.

- Our ICS is made up of six ‘places’ – Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth.
- Since we were set up in 2018, we have developed better and more convenient services, invested in keeping people healthy and out of hospital and set shared priorities for the future through our local health and care plans for each borough.



# South West London Integrated Care System

Our integrated care system will have two statutory committees:

**NHS South West London Integrated Care Board** decides how the NHS budget for their area is spent and develop a plan to improve people's health, deliver higher quality care, and better value for money

Our NHS Board will be made up of:

- Our Chair
- 4 non-executive members
- Chief Executive
- 4 Partner members NHS and Foundation Trusts
- Partner member Primary Medical Services
- Partner member Local Authorities
- Chief Finance Officer
- Medical Director
- Director of Nursing
- 6 Place Members
- Deputy Chief Executive Officer

The first meeting of our NHS Board in public will be:

10am, Friday 1 July 2022  
The Chaucer Centre

The first meeting of our Partnerships Board will be in the autumn

**South West London Integrated Care Partnerships** bring the NHS together with other key partners, like local authorities, to develop a strategy to enable the Integrated Care System to improve health and wellbeing in its area

Our Partnerships Board will be made up of:

- Co-Chairs – the ICB Chair and a Leader of a SWL Council
- Health members
  - ICB Chief Executive
  - ICB Population Health Management Director
  - ICB CFO
  - 5 NHS SWL Provider Chairs
  - Primary care representative
- Local Authority members
  - 6 Chairs of Health and Wellbeing Boards
  - Chief Executive representative
  - Director of Children Services representative
  - Director of Adult Services representative
  - Director of Public Health representative
  - Growth and economy representative
- 6 Place representatives
- SWL Clinical Senate co-chairs
- ICB Deputy Chief Executive Officer
- Healthwatch representative
- Voluntary sector representative



# Our places in South West London

Place-based partnerships lead the detailed design and delivery of integrated services across their localities and neighbourhoods. We have six place partnerships across each of our boroughs.

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### Croydon

Croydon Council  
Croydon Health Services NHS Trust  
Croydon Healthwatch  
South London and The Maudsley NHS Trust  
Croydon voluntary sector organisations  
Age UK Croydon  
NHS South West London



### Kingston

Kingston Council  
Kingston Hospital NHS Foundation Trust  
Hounslow & Richmond Community Healthcare  
South West London & St George's Mental Health Trust  
Kingston Healthwatch  
Kingston voluntary sector organisations  
Your Healthcare  
NHS South West London



### Merton

Merton Council  
St George's University Hospitals NHS Foundation Trust  
Merton Healthwatch  
South West London & St George's Mental Health Trust  
Merton voluntary sector organisations  
NHS South West London



### Richmond

Richmond Council  
Kingston Hospital NHS Foundation Trust  
Hounslow & Richmond Community Healthcare  
South West London & St George's Mental Health Trust  
Richmond Healthwatch  
Richmond voluntary sector organisations  
NHS South West London



### Sutton

Sutton Council  
Epsom and St Helier University Hospitals NHS Trust  
Sutton Healthwatch  
South West London & St George's Mental Health Trust  
Sutton voluntary sector organisations  
NHS South West London



### Wandsworth

Wandsworth Council  
St George's University Hospitals NHS Foundation Trust  
Wandsworth Healthwatch  
South West London & St George's Mental Health Trust  
Wandsworth voluntary sector organisations  
NHS South West London

# Provider Collaboratives in SWL

**Provider Collaboratives** are partnership arrangements involving two or more trusts (foundation trusts or NHS trusts) working across multiple places to realise the benefits of mutual aid and working at scale.

There are three Provider Collaboratives in South West London:

- **South London Mental Health Partnership** - comprising Oxleas NHS Foundation Trust, South London and Maudsley NHS Trust and South West London and St. George's NHS Trust
- **The Acute Provider Collaborative** - comprising Croydon Health Services NHS Trust, Epsom and St. Helier University Hospitals NHS Trust, Kingston Hospital NHS Foundation Trust, St. George's University Hospitals NHS Foundation Trust
- **RM Partners** - comprising all South West London and North West London bodies supporting the NHS Cancer Pathway, including Primary, Acute and Specialist providers and screening services

The purpose of provider collaboratives is **to work together to continuously improve quality, efficiency and outcomes**, including proactively **addressing unwarranted variation and inequalities in access and experience**

Together, trusts work collaboratively to **lead the transformation of services and the recovery from the pandemic**, making sure they have shared ownership of their objectives and plans

# In summary

- On 1 July 2022, we are launching South West London Integrated Care System as we take on health and care statutory responsibilities
- The ICS will have four purposes:
  1. improving outcomes in population health and healthcare
  2. tackling inequalities in outcomes, experience and access
  3. enhancing productivity and value for money
  4. supporting broader social and economic development
- The South West London Integrated Care System will bring our health and care partners closer together, to make sure local people receive the best care
- New legislation, outlined in the 2022 Health and Social Care Act, makes it easier for GPs, hospitals, mental health, social care, community services, and the voluntary sector to work together more closely.
- By working together, we can do more to: support people to live healthier and happier lives; prevent ill-health; keep people independent for longer; and take action together to address the wider-determinants of health. Examples of these wider-determinants of health are jobs, housing, education and our environment. We know these have a big impact on our health.
- All over the country, in the poorest areas people have worse health and lower life expectancy than the people living in the richest areas. Our South West London ICS will focus on reducing these health inequalities or unfair differences in health in different groups within our six boroughs.



## Our health and care partners

South West London Integrated Care System is made up of health and care partners across our six boroughs:

- Our six local authorities: Croydon, Kingston, Merton, Richmond, Sutton and Wandsworth
- Our acute and community providers: Central London Community Healthcare, Croydon Health Services NHS Trust, Epsom and St Helier University Hospitals NHS Trust, Hounslow and Richmond Community Healthcare, Kingston Hospital NHS Foundation Trust, The Royal Marsden Foundation Trust, St George's NHS Foundation Trust and Your Healthcare
- Our two mental health providers: South West London and St George's Mental Health NHS Trust, South London and the Maudsley NHS Foundation Trust
- GP Federations in each of the six boroughs
- The London Ambulance Service
- Six Healthwatches: Croydon, Merton, Kingston, Richmond, Sutton and Wandsworth
- Key borough voluntary sector organisations
- And from 1 July 2022, NHS South West London Integrated Care Board, a statutory organisation that will take on many of the responsibilities previously held by NHS South West London Clinical Commissioning Group

# What are the benefits of Integrated Care Systems?

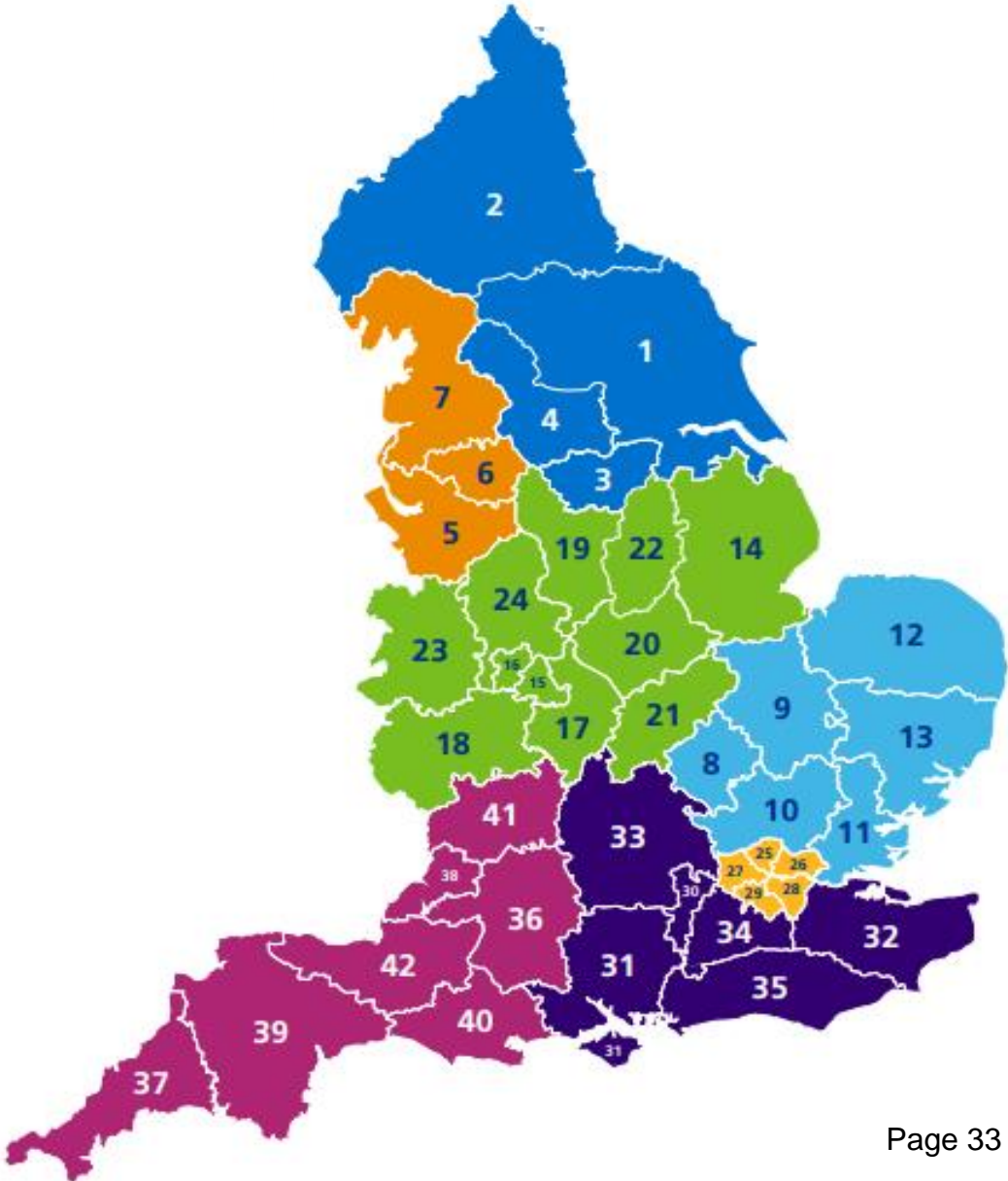


Collaborating as an ICS helps health and care organisations tackle complex challenges, including:

- Improving the health of children and young people
- Supporting people to stay well and independent
- Acting sooner to help those with preventable conditions
- Supporting those with long-term conditions or mental health issues
- Caring for those with multiple needs as populations age
- Getting the best from collective resources so people get care as quickly as possible.

# Integrated Care Systems in England

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## North East and Yorkshire ■

- 1 Humber and North Yorkshire Health and Care Partnership
- 2 North East and North Cumbria Integrated Care System
- 3 South Yorkshire Integrated Care System
- 4 West Yorkshire Health and Care Partnership

## North West ■

- 5 Cheshire and Merseyside Integrated Care System
- 6 Greater Manchester Integrated Care Partnership
- 7 Lancashire and South Cumbria Integrated Care System

## East of England ■

- 8 Bedfordshire, Luton and Milton Keynes Integrated Care System
- 9 Cambridgeshire and Peterborough Integrated Care System
- 10 Hertfordshire and West Essex Integrated Care System
- 11 Mid and South Essex Integrated Care System
- 12 Norfolk and Waveney Integrated Care System
- 13 Suffolk and North East Essex Integrated Care System

## South East ■

- 30 Frimley Health and Care
- 31 Hampshire and Isle of Wight Integrated Care System
- 32 Kent and Medway Integrated Care System
- 33 Buckinghamshire, Oxfordshire and Berkshire West Integrated Care System
- 34 Surrey Heartlands Health and Care Partnership
- 35 Sussex Integrated Care System

## Midlands ■

- 14 Better Lives Lincolnshire
- 15 Birmingham and Solihull Integrated Care System
- 16 Black Country Integrated Care System
- 17 Coventry and Warwickshire Integrated Care System
- 18 Herefordshire and Worcestershire Integrated Care System
- 19 Joined Up Care Derbyshire
- 20 Leicester, Leicestershire and Rutland Integrated Care System
- 21 Northamptonshire Integrated Care System
- 22 Nottingham and Nottinghamshire Integrated Care System
- 23 Shropshire, Telford and Wrekin Integrated Care System
- 24 Staffordshire and Stoke-on-Trent Integrated Care System

## London ■

- 25 North Central London Integrated Care System
- 26 North East London Health and Care Partnership
- 27 North West London Integrated Care System
- 28 South East London Integrated Care System
- 29 South West London Integrated Care System

## South West ■

- 36 Bath and North East Somerset, Swindon and Wiltshire Together
- 37 Cornwall and the Isles of Scilly Integrated Care System
- 38 Healthier Together: BNSSG Integrated Care System
- 39 One Devon
- 40 Our Dorset Health and Care System
- 41 One Gloucestershire
- 42 Somerset Integrated Care System

# South West London Integrated Care System



South West London Integrated Care System is made up of three parts:

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# Integrated Care Board Leadership Announcements



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## Sarah Blow

### Chief Executive Designate NHS South West London ICB

Sarah has 30 years' experience in the NHS. She is an experienced Chief Executive and has led programmes across partnerships while working widely across systems to improve health and care services. Sarah has held operational and strategic roles with Local Authorities, providers and the Department of Health, and values and recognises that a strong collaborative approach delivers better care for local people. Read more about Sarah [here](#).



# Integrated Care Board Executive Announcements



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**Karen Broughton**  
**Deputy Chief Executive Officer and Director of People and Transformation**

Karen Broughton has worked in a variety of roles within the NHS over the course of her 30+ year career and has specific expertise in working with provider and commissioning organisations across London. Karen has held a number of Director roles across a range of areas - Workforce Director, Commissioning Director and Strategy and Transformation Director.



**Jonathan Bates**  
**Chief Operating Officer**

Jonathan Bates has worked for the NHS for more than 25 years in a wide variety of roles. Jonathan's background includes working in acute hospitals, primary care, Primary Care Trusts and nationally for the NHS and the Department of Health.

Since 2006, Jonathan has worked in South West London, more recently as Chief Operating Officer for Sutton CCG until 2017 and then as an Executive Director responsible for planning, performance and delivery across South West London CCG.



**Dr John Byrne**  
**Executive Medical Director**

Born in Dublin, Dr Byrne graduated in medicine from University College Dublin in 1994 before serving for six years as a doctor in the Royal Army Medical Corps, where he completed his training in general practice. In 2002 he became a partner at a GP surgery in Hampshire, and in 2008 was appointed locality medical director for Hampshire Community Healthcare.



**Dr Gloria Rowland**  
**Chief Nursing and Allied Professional Officer and Director for Patient Outcomes**

Previously Director of Midwifery for the country's largest maternity service at Barts Health NHS Trust, Dr Rowland has been recognised by CQC Chief Inspector Ted Baker for her "outstanding practice in the leadership and drive shown" to improve Midwifery services.



**Helen Jameson**  
**Chief Finance Officer**

Helen is a finance professional with over 20 years of experience working in the NHS. In 2018 she became Chief Finance Officer at Great Ormond Street Hospital leading the finance, procurement and commercial functions as well as Executive lead for the North Thames Genomic Laboratory Hub.



**Charlotte Gawne**  
**Executive Director of Communications and Strategic Stakeholder Relations**

Before joining us in South West London, Charlotte was the executive director of communications at The London Ambulance Service. Charlotte has worked at Board Director level for 18 years and has also worked at NHS England London and NHS England South, Epsom and St Helier University Hospitals NHS Trust, Sutton and Merton PCT, St George's University Hospitals NHS Trust, Wandsworth Community NHS Trust, Surrey Oaklands Mental Health and Learning Disability NHS Trust, NHS Direct and the Department of Health.

[Read more about the team here](#)

# Non Executive Members



## Dick Sorabji

Dick Sorabji has worked in public policy and management across four decades. In the 1980s he was the Parliamentary Adviser to the Shadow Health Secretary. He was elected a councillor in Lambeth becoming leader in 1988.



## Mercy Jeyasingham MBE

Mercy Jeyasingham has mainly worked in the voluntary health and social care sector, most recently as the CEO of the umbrella organisation for the eye health and sight loss sector. She is a non-executive Director of the medicines and devices regulator, the MHRA, and Chairs its Patient Safety and Engagement Committee.

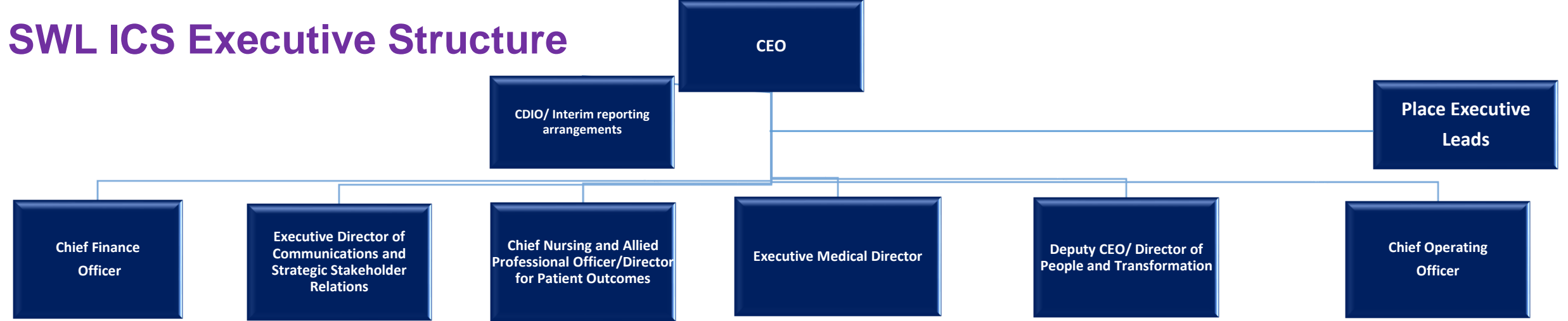


## Ruth Bailey

Ruth Bailey has 23 years of experience working in the public sector in strategy, delivery and human resources. She was HR Director in the Cabinet Office, the Care Quality Commission and the Department of Housing Communities and Local Government between 2015 and 2021.

[Read more about the team here](#)

# SWL ICS Executive Structure

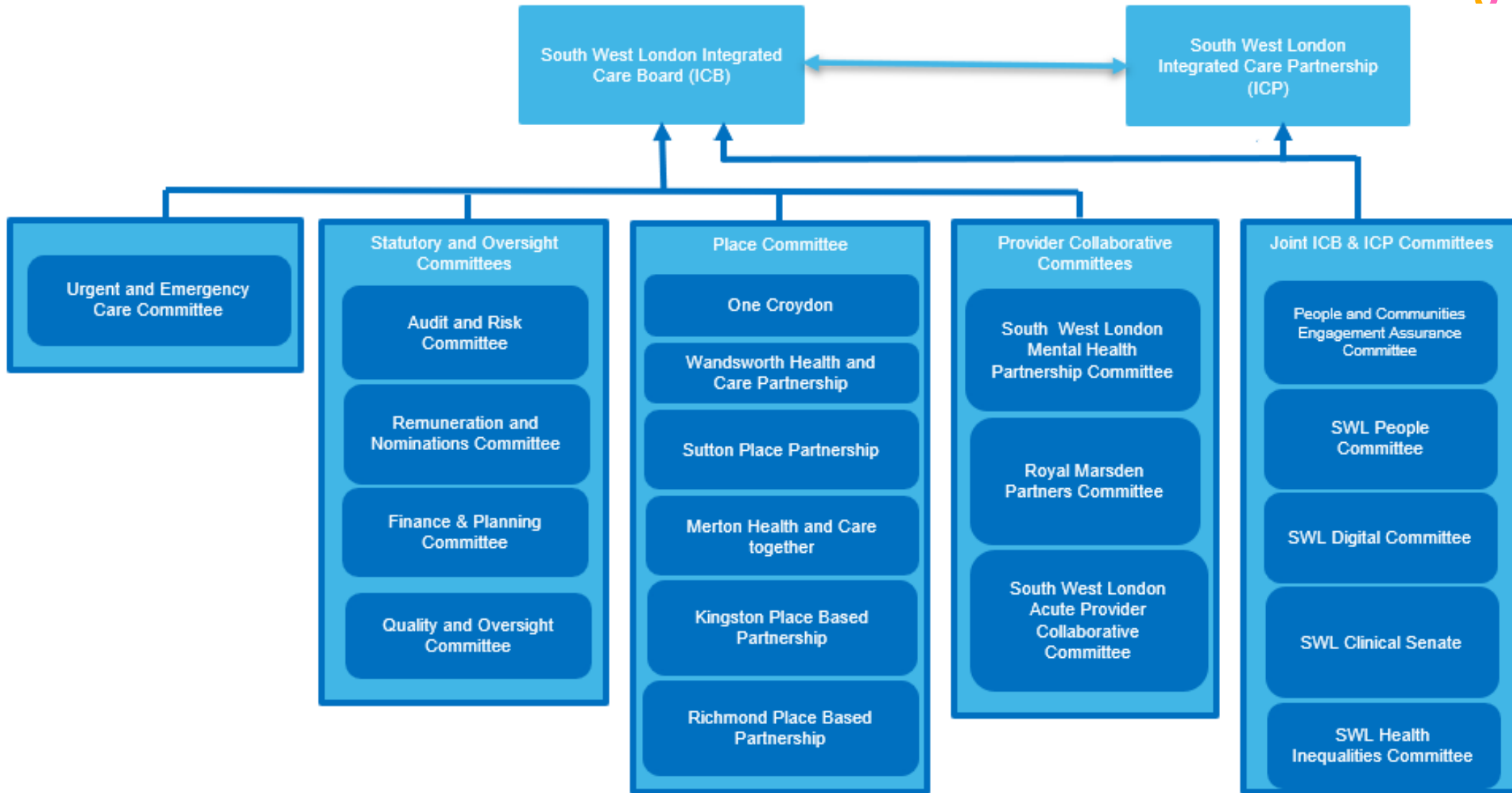


Chief Finance Officer	Executive Director of Communications & Strategic Stakeholder Relationships	Chief Nursing and Allied professionals Officer/ Director for Patient Outcomes	Executive Medical Director	Deputy CEO/ Director of People and Transformation	Chief Operating Officer
<ul style="list-style-type: none"> <li>• Strategic finances</li> <li>• Investment capital and</li> <li>• Estate</li> <li>• IHT</li> <li>• Sustainability and Net Zero</li> <li>• Joint lead for system planning</li> </ul>	<ul style="list-style-type: none"> <li>• System strategic comms &amp; engagement, Media &amp; crisis management</li> <li>• Stakeholder/public affairs,</li> <li>• Engagement with community groups including Healthwatch, voluntary Sector and other</li> <li>• Patient and Public involvement</li> <li>• Campaigns digital &amp; social,</li> <li>• Staff engagement</li> <li>• NHS and partner engagement in priorities, development and involvement in the priority making process</li> <li>• Support to the ICP and ICB Chair and CEO</li> <li>• Service change and consultation</li> </ul>	<ul style="list-style-type: none"> <li>• Nursing and Allied Professional leadership</li> <li>• Professional Leadership</li> <li>• Safeguarding</li> <li>• Quality Improvement and oversight</li> <li>• Health inequalities and prevention (joint Lead)</li> <li>• CHC</li> <li>• IPC</li> <li>• Maternity and Children</li> </ul>	<ul style="list-style-type: none"> <li>• Population Health               <ul style="list-style-type: none"> <li>• Health inequalities and prevention (joint Lead)</li> <li>• Working with Digital on PHM data strategy</li> <li>• Working with DPHs and ICP to identify strategic priorities</li> </ul> </li> <li>• System clinical Leadership</li> <li>• Strategic lead research and development</li> <li>• IFR and ECI</li> <li>• Clinical Strategy</li> <li>• Medicines Management</li> <li>• Clinical Standards &amp; Ethics</li> <li>• Any regulatory responsibility from NHSE/I</li> </ul>	<ul style="list-style-type: none"> <li>• Strategy and Transformation</li> <li>• People and Workforce (including EDI</li> <li>• OD and System Development including provider and place development</li> <li>• Office of CEO – including governance and link to integrated system planning)</li> <li>• Support delivery of Partnership and ICS NHS Boards</li> <li>• IT and infrastructure for corporate and GP</li> <li>• Oversight of some major programmes per above</li> <li>• Health and care in the community – including:               <ul style="list-style-type: none"> <li>• Primary Care</li> <li>• MH and LD</li> <li>• Immunisations</li> <li>• Ageing well and EOLC</li> <li>• Place link</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Joint lead for Integrated System Planning</li> <li>• System Performance Oversight, Intensive Support and Escalation</li> <li>• Contracting and procurement</li> <li>• Urgent and Emergency Care</li> <li>• Cancer</li> <li>• Critical and Acute care</li> <li>• Link acute provider collaborative</li> <li>• Specialised commissioning (longer term) – currently joint with SEL on an interim seconded basis</li> </ul>

The CNO and EMD will working jointly across the clinical portfolio



# SWL ICS emerging governance structure



# How will we improve health & care in SW London?



**"This is all about making a difference to the people we serve" - Improving services for local people**

Gillian Norton, Chairman of St George's, Epsom and St Helier Hospitals Group

**"We can make services more accessible, efficient and patient centered" - Reducing health inequalities**

Imran Choudhury, Director of Public Health, Sutton Council



# Why are we coming together?



**"It's more about residents and their needs"** - Bringing health, care and voluntary services together

Simon Shimmens, Chief Executive of Merton Connected

**"We can't do this on our own in the NHS"** - Why we are bringing health and care services together

Sarah Blow, Chief Executive of the South West London Integrated Care System



# ‘Message from Millie and Sarah’

Sign up to our regular SWL ICS update

# South West London updates – sign up



To keep our partners and stakeholders updated every month we are sharing the ‘Message from Millie and Sarah’, this updated features stories of delivery from across South West London and information about the transformation to ICS.

Share these monthly messages by:

- Sharing the web version of the update - we post every message on our website check [here](#) every month for the latest edition
- There are also six local Place updates, if you’d like to be signed up [publicaffairs@swlondon.nhs.uk](mailto:publicaffairs@swlondon.nhs.uk)
- Promote the [sign up link](#) -to encourage people to receive the update directly to the their inbox
- Send us your own partnership stories to include [publicaffairs@swlondon.nhs.uk](mailto:publicaffairs@swlondon.nhs.uk)

**Message from Millie and Sarah**

**Millie Banerjee CBE**  
Chair Designate  
South West London Integrated Care System

**Sarah Blow**  
Chief Executive Designate  
NHS South West London Integrated Care Board

**May 2022**

Welcome to our May 2022 update. The Health and Care Bill has been given Royal Assent and this means that we are on track for South West London Integrated Care System (ICS) to take on statutory responsibilities from 1 July. We hear from Imran Choudhury, Director of Public Health at Sutton Council, about what ICSs mean for health and care staff.

We also show you how partnership working is supporting people with learning disabilities and autism, new mums and people who experience health inequalities.

We are also delighted to be able to announce the new executive team for the NHS South West London Integrated Care Board.

CONTENTS	
People are going to want to come and work here	
Baby steps for new mums	
Creating practical solutions in Croydon	
Best foot forward in Wandsworth	
Going further faster to diagnose more cancers	
Sew, a needle pulling thread	
"We can't do this on our own in the NHS"	

# Partnership case studies

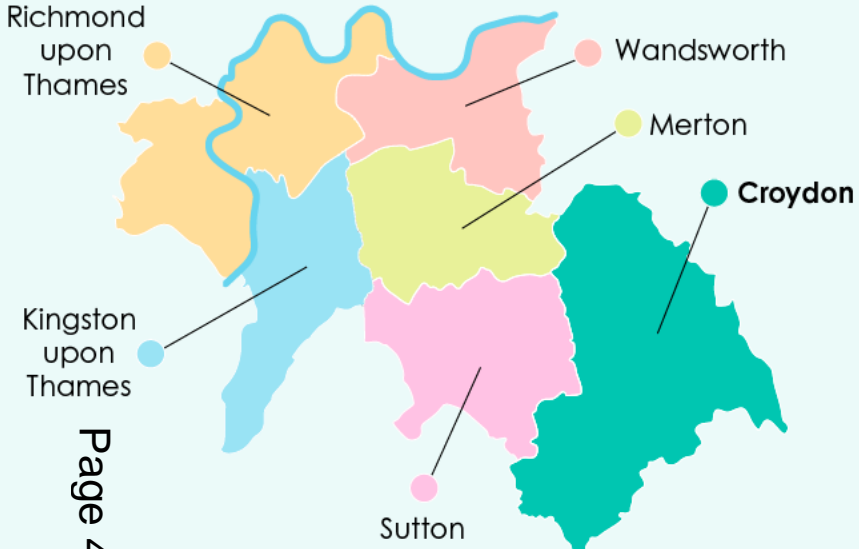
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The following slides show case studies from all of our boroughs to show how our ICS is already delivering for local people

Please choose the case studies most useful for your audience



# Croydon's practical solutions

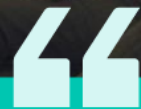


## How we're making a difference

Through the Healthy Communities Together programme, which was developed in partnership between The National Lottery Community Fund and The King's Fund, One Croydon was awarded £500,000 over 4 years to support local partnership working to improve the health and wellbeing of Croydon's local communities.

Six Local Community Partnerships (LCPs) have been implemented covering the whole of Croydon. Chairs from the local community are coming into post in each of these LCPs, bringing greater local ownership, collective voice and leadership.

The programme of LCP events gives the opportunity for local residents, community groups, local charities and health and social care teams to collaboratively develop community action plans



**Locality partnership working has improved the connections between our clinical teams, our community assets and community organizations. It's empowered people to improve their quality of life.**

Lynda Graham Social Prescribing Link Worker-Team Leader



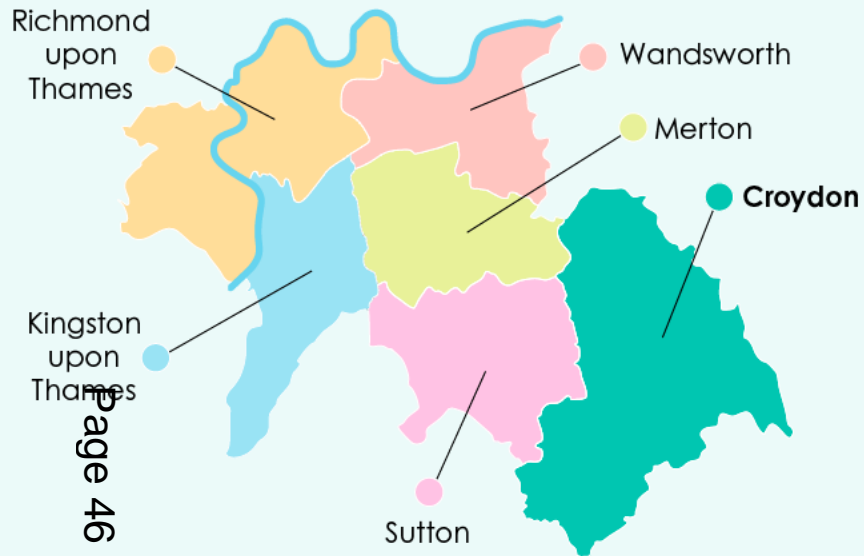
**Proud to be working together to create healthier communities**

### Partners involved

- NHS South West London CCG
- One Croydon's alliance of Voluntary and Community Sector organisations
- Croydon Council

**Find out more**  
Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

# Croydon's hospital in a hospital



## Proud to be working together to create healthier communities

### Partners involved

NHS South West London CCG  
Croydon Health Services  
Epsom and St Helier University Hospitals  
St George's University Hospitals  
Kingston Hospital

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

To make sure that as many people as possible across South West London have their planned operation as soon as possible following the delays caused by the pandemic.

Over 18,500 patients have safely received planned care at the Croydon Elective Centre since it opened in July 2020, despite the pressures of the pandemic. The 'Covid-protected' hospital within a hospital has been dubbed a 'blueprint for the NHS', seeing around 300 patients from across South West London every week for routine surgery or planned care - more than a 10% increase since pre-lockdown levels. The Croydon Elective Centre has its own separate entrance, operating theatres, inpatient wards and a catheter lab, with strict infection prevention and control measures to keep it protected.

Around 2,000 patients have been referred to the centre from neighbouring trusts as part of a coordinate approach to tackle backlogs in South West London.

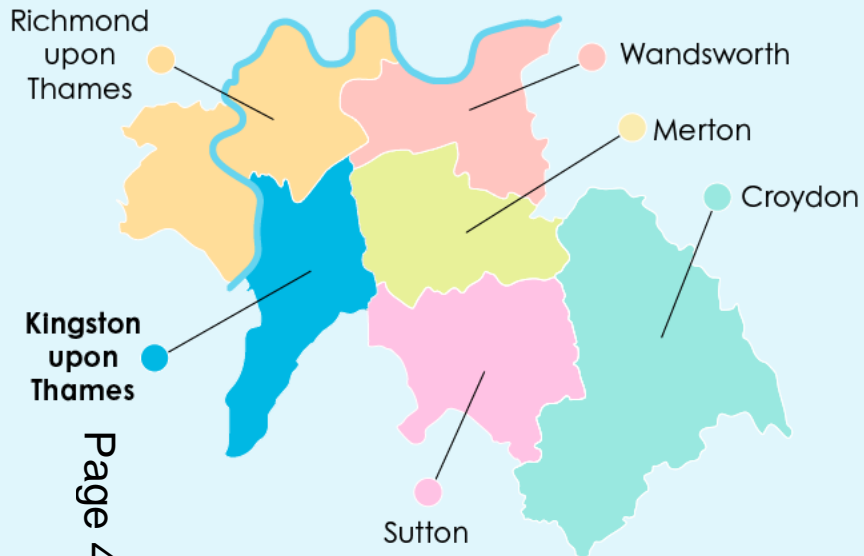


**The Croydon Elective Centre is a great example of how clinically-led innovation can make a real difference to the lives of our patients and staff, as well as the wider health system.**

Stella Vig, Consultant Surgeon and Clinical Director for COVID-19 Recovery, Croydon Health Services NHS Trust



# Supporting patients at home: Kingston virtual wards



## How we're making a difference

All South West London hospitals have developed 'virtual wards' allowing patients who are well enough, to be monitored virtually from their own home instead of from a hospital bed.

The Kingston virtual ward has been up and running since mid-December to support low-risk cardiology and respiratory patients.

A dedicated team of highly trained clinical specialists use technology to monitor patients on the virtual ward, allowing them to be cared for safely at home and crucially freeing up bed space in hospitals. In their first six weeks, the team had already treated 21 patients and screened a total of 190 who came for care at the hospitals A&E.

Every patient is carefully assessed and counselled by specially trained clinical staff before discussing with them whether they would like to be treated by the virtual ward team at home rather than stay in hospital.

Patients are shown how to use the virtual ward monitoring equipment which they then take home with them. This means they can be monitored exactly as they would be on a real-life ward.



“Most patients don't like being in hospital and we see the change in them on the very first day of the virtual ward. They are cheerful, their skin has more colour and they are active and more hopeful. It's really nice to see that you've helped them to get home. A lot of them are really thankful to have such carefully tailored specialist care from the comfort of their own homes.

Salina Harvey-Porter, Consultant Physiotherapist, Kingston Hospital NHS Foundation Trust

**Proud to be working together to create healthier communities**

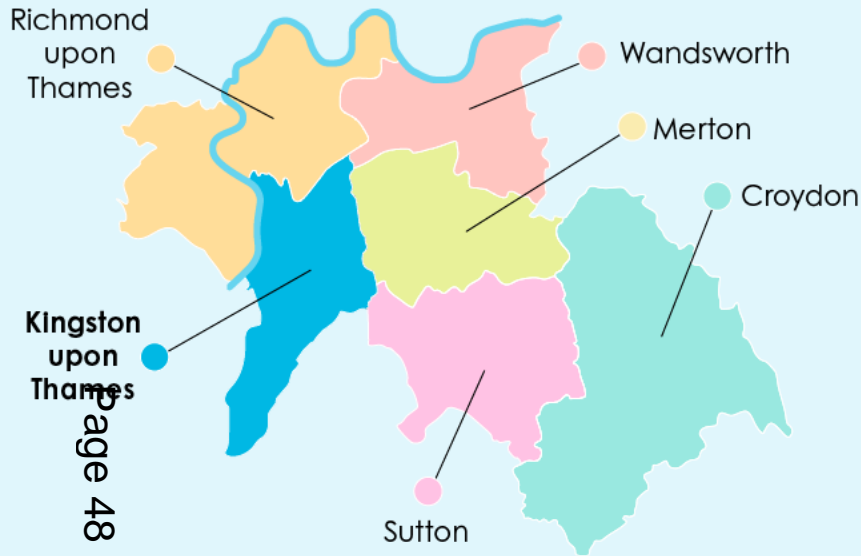
### Partners involved

Kingston Hospital  
Kingston GP Federation  
Hounslow Richmond Community Healthcare

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

# Rapid diagnostic cancer clinic at Kingston Hospital



## Proud to be working together to create healthier communities

### Partners involved

Kingston Hospital NHS Foundation Trust  
Royal Marsden NHS Foundation Trust  
Primary Care

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

Kingston Hospital has launched a Rapid Diagnostic Cancer Clinic to support early and faster diagnosis of cancer.

The new clinic will provide a much-needed service to patients who have non-specific symptoms which may be hard to diagnose.

Previously these patients may have presented multiple times to their GP, and had several investigations and referrals to secondary care, over long periods of time. Many of these patients may have then presented at a late cancer stage to Kingston Hospital's emergency services.

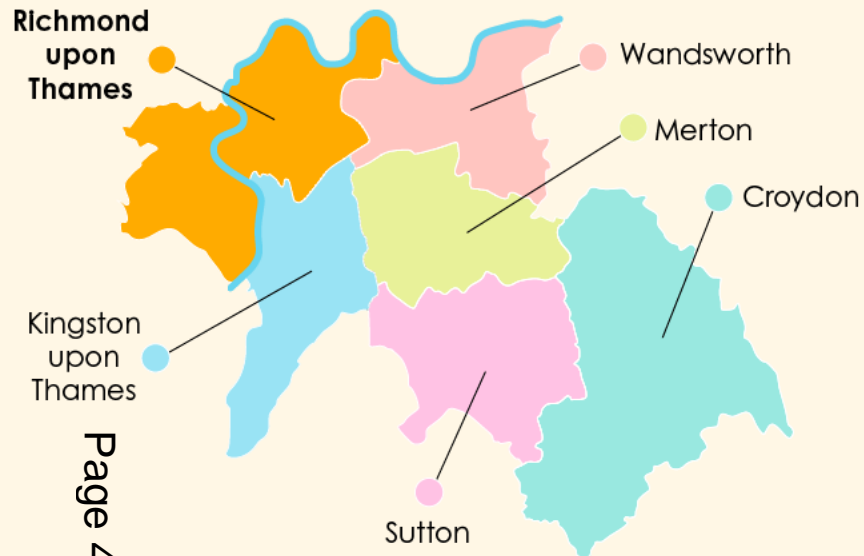
With the new clinic in place, local GP partners will now have a clear pathway to direct these patients to and the service will reduce the number of duplicate referrals and unnecessary attendances, whilst achieving what really matters to patients – early and faster diagnosis.



“The launch of the Rapid Diagnostic Cancer Clinic is great news for patients who may well have been struggling to receive a diagnosis for their worrying symptoms. It will help to reduce stress, speed up diagnosis and therefore save lives

Jane Stephenson, Cancer Patient Partners Group, Kingston Hospital NHS Foundation Trust

# Lifting the Long Covid fog in Richmond



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## Proud to be working together to create healthier communities

### Partners involved

Hounslow and Richmond Community Healthcare  
Richmond Primary Care Networks  
Kingston Hospital NHS Foundation Trust

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

The Hounslow and Richmond Community Healthcare's Long COVID Service, which brings together staff from community, primary care, respiratory and Richmond Wellbeing Services, has helped 75 people from across Kingston and Richmond in the first three months after launching in November 2021.

Patients have their therapy in the best place for them – either as an outpatient at Richmond Rehabilitation Unit, in an online video call or telephone consultation, or at home.

People get help with managing their symptoms, learning how to cope when the brain isn't processing properly, getting the right amount of rest, and increasing chances of recovery. The team also give advice on self-care, sleep, diet, mood, work, exercise and other activities. Patients start with an initial assessment and personalised plan to address their main concerns and goals. Treatment is one to one and in a group.

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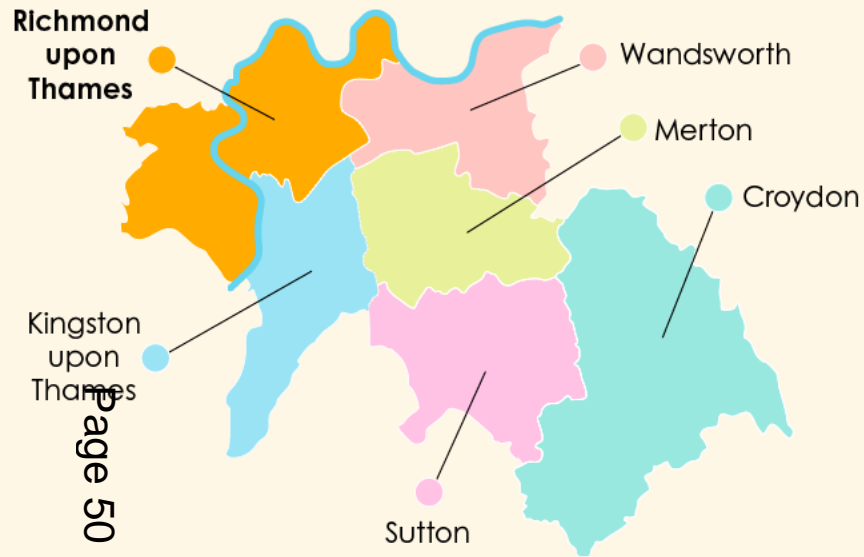
“The way you're listening and caring for us is excellent and I can say that this way of care is something which I have never experienced. If you didn't create such a safe environment for us, I doubt I would have been able to speak openly about how I felt. These Fridays are always rays of hope for me that something is finally changing for us. I just wish everybody was like you.

Long Covid clinic patient





# Volunteers helping fallers bounce back



## Proud to be working together to create healthier communities

### Partners involved

Kingston Hospital NHS Foundation Trust  
Kingston Hospital's volunteering service (in conjunction with Healthforce)  
Hounslow and Richmond Community Healthcare  
Your Healthcare

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

A new partnership project operating across Kingston and Richmond is helping elderly residents maintain their independence by matching trained volunteers to people who need support to complete exercises following a fall or injury. Falls are one of the biggest issues resulting in hospital admission in Kingston and Richmond boroughs.

Through this initiative, launched in October 2021, volunteers can spend up to eight weeks supporting patients at home by helping them to complete their exercises safely. With many of these people living alone, as well as the practical support, the patients have spoken positively about the social and emotional benefit in having regular contact with someone.

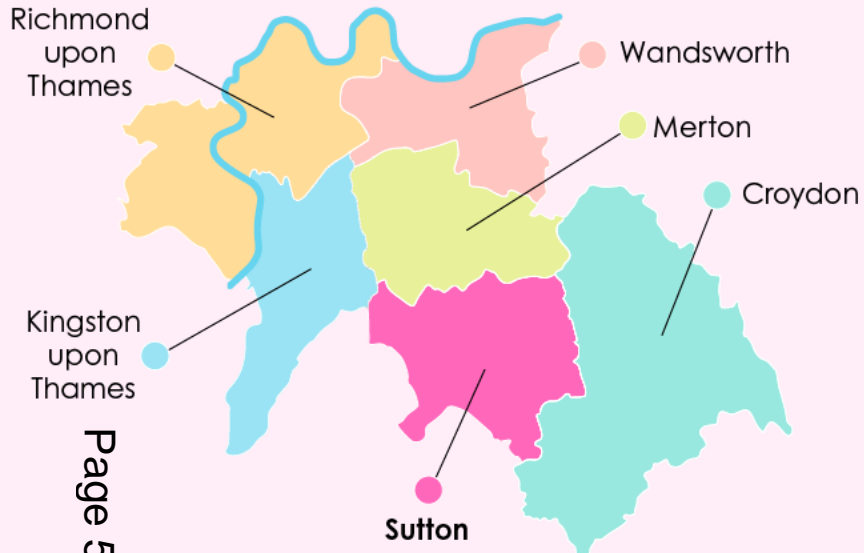
The current cohort of patients, aged between 76 and 92, has now reached the end of their eight week home exercise programme, with volunteers noting that social interaction with their patients has been equally important as completing the physical exercises.



“The exercises were enjoyable and there was a good variety. I liked being able to choose and tailor the programme to suit my needs. I chose what I wanted to work on which was lower body and balance, then we found the best exercises for this. The sessions went on for a good amount of time- once a week for 8 weeks felt like enough time to build up confidence. It was nice to be able to see the volunteer... it really boosted my mood and confidence.”

Richard, aged 83

# Sutton's crisis cafe



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## Proud to be working together to create healthier communities

### Partners involved

Sutton Mental Health Foundation  
NHS South West London CCG

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

We are providing more help in the community for adults who feel they are in or might be moving towards a mental health crisis that doesn't need medical intervention

Open 365 days a year, the Sutton Crisis Café is a safe, calm and supportive non-clinical place for people experiencing a mental health crisis, and an alternative to attending A&E.

The Café, on Downs Road in Belmont, is run by the Sutton Mental Health Foundation, a community mental health support service for anyone over the age of 18 living in the borough of Sutton.

The Café employs four crisis support workers, including two with specialist expertise in dealing with substance misuse, and six peer support workers, a manager and a deputy.

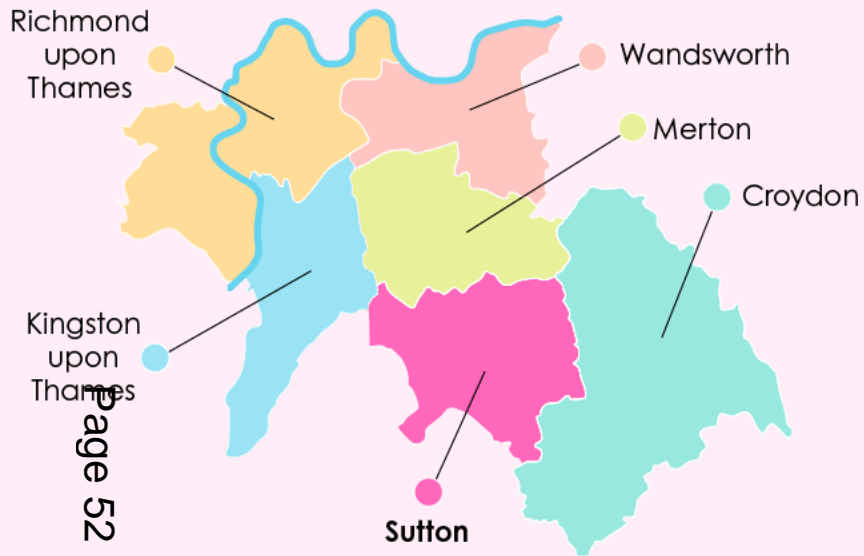
Since its launch in August 2021, over 100 people have been supported by the Café and almost 300 one to one crisis support sessions have been held. Some 75% of visitors to the Café are self-referred intervention.



I was amazed to find such a facility available and accessible. It makes such a difference knowing that there is a clean, safe, comfortable place I can go to talk or just be. That I can bring my dog has also been great. I am so grateful to everyone involved in this. I don't know how my story will end but, just for today, Sutton Crisis Café has made a very significant positive difference for me. Thank you.

A recent visitor to the cafe

# Baby Steps-supporting new mums in Sutton



## Proud to be working together to create healthier communities

### Partners involved

Sutton Perinatal Mental Health Network  
Local health and care organisations  
NHS South West London CCG

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

Baby Steps in Sutton was established in 2021 to help mums who are struggling with their mental health and need some support with the transition from pregnancy to motherhood. The group, which is run as an informal drop-in session, meets every fortnight at the Riverside Centre in Carshalton between 12pm and 3pm.

Aimed at mums experiencing the first year of parenthood with mild mental health problems, the group is not prescriptive and welcomes mums who are pregnant too.

People are referred to the group by their clinicians, such as GPs, midwives and psychologists, but can also self-refer.

Mums are encouraged to come along and share their stories with other mums in the group, or simply sit and listen. There are also group activities led by Fiona, such as mindful drawing. People can get involved in as much or as little as they want to at the sessions.

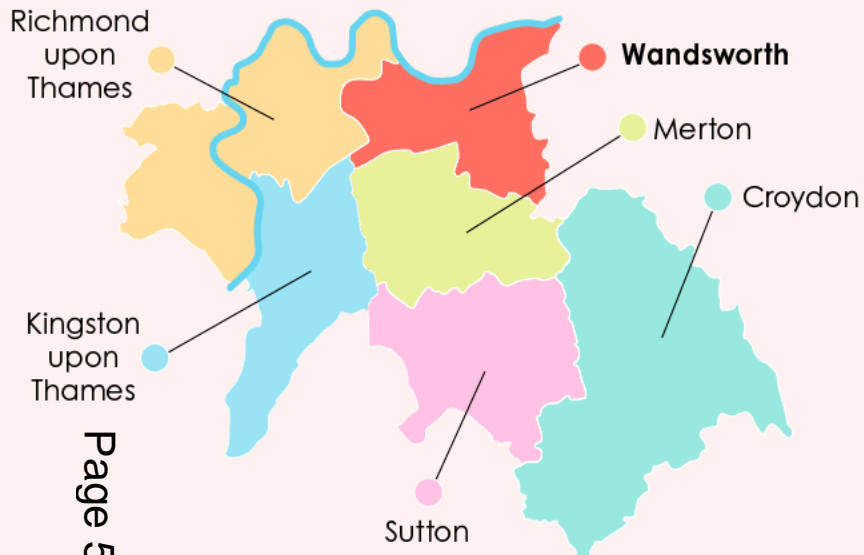


Thank you for offering us a place where we can be honest about how we are feeling. It's the only mums' group I go to where I feel I can open up and really talk about my true feelings about motherhood. Love the hot tea, biscuits and the little art activities that we do.

A mum who attended the group



# Wandsworth home blood pressure checks



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## Proud to be working together to create healthier communities

### Partners involved

Brocklebank Primary Care Network  
NHS South West London CCG

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

People across Wandsworth are checking their own blood pressure on machines they keep at home with support from their doctors. It's a simple but radical move that puts people in control of their own health.

The project follows the huge shift in the way people have accessed primary care since the start of the pandemic, with the touch points where people had an opportunity to check their blood pressure at the GP practice or local pharmacy reduced.

1,250 machines have been given to people across Wandsworth, prioritising people who haven't been having their blood pressure checked in the previous 18 months and are known to a history of hypertension or are receiving treatment. Other patients have been able to buy their own.

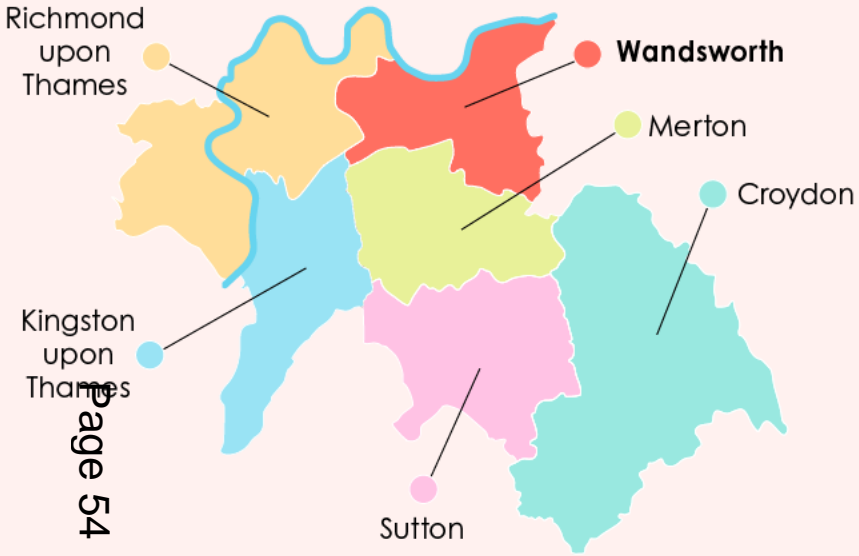
Doctors and nurses from local practices support them to use the machines, understand what their readings mean and submit them for assessment



“It's empowering to patients, who are often aware of their readings for the first time, and it's an effective use of our time. I think it's quite awesome. We're giving the machines to people who we are particularly keen to monitor, but there's a side benefit- they're not just checking their own blood pressure, they're checking their wives, husbands, dads, brothers ... which would never have happened before.

Dr Caroline Scott, Wandsworth GP

# Best foot forward for fitness in Wandsworth



## How we're making a difference

Wandsworth students are putting their best foot forward to build up fitness and resilience after long months of lockdown.

The students attend Share Community, a charity which supports around 140 people with autism and learning disabilities in Wandsworth and some neighbouring boroughs. A £2,444 NHS Wandsworth Community Grant paid for pedometers so students can measure their daily steps, and the training of five student health champions.

The champions will help their peers to boost walking and overall activity levels through healthy choices such as taking the stairs. They will record how the students are feeling on a day-to-day basis and monitor weight loss and reductions in blood pressure.

A health and well-being noticeboard has been set up in Share's main centre in Wandsworth. This carries positive images and easy to read information on healthy eating tips, cutting down on cholesterol and the importance of cleaning your teeth.



“ We are aiming to have about 40 people taking part in walks on our local green spaces such as Clapham and Wandsworth Commons. We'll also be boosting people's activity levels by working with the charity Disability Sports Coach. Students have reported doing more exercise overall and everyone gets really excited for Thursdays when we run a step competition!

Rachel Healy-Share Community

## Proud to be working together to create healthier communities

### Partners involved

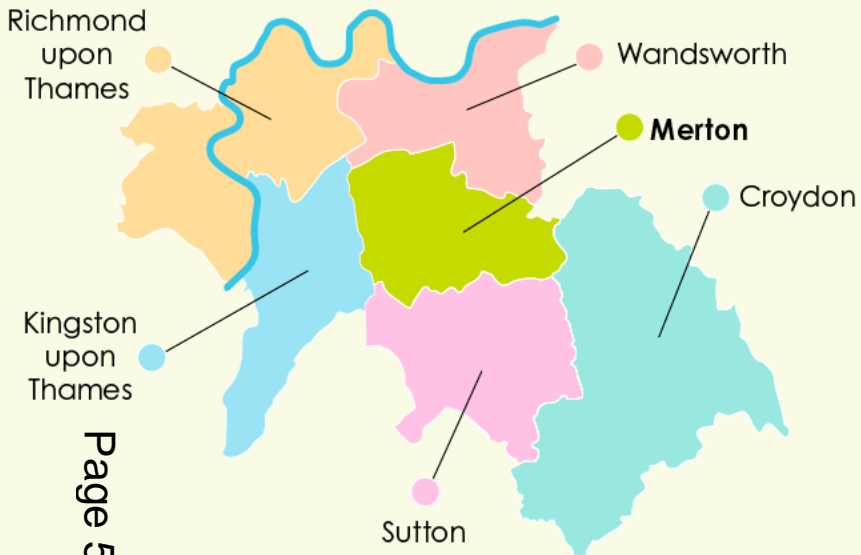
Share  
NHS South West London CCG

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)



# Sew, a needle pulling thread...



## How we're making a difference

Thousands of tons of perfectly good clothes are chucked away each year, often when they've only been worn a few times. But in a little corner of Merton, a dedicated group of trainee stitchers are challenging the throw-away philosophy, learning new skills and finding friendship.

Based at the Wilson Wellbeing Space at the Wilson Hospital, Project Preloved is teaching complete novices how to upcycle and mend well-loved items and give them a second breath of life. T-shirts are turned into tote bags and old cardies into colourful cushion covers.

Project Preloved is the brainchild of Rachael Edwards and her Sustainable Merton colleague Amy Coyne. Funded by The National Lottery Community Fund, distributed by Merton Giving, the scheme provides free two-hour long workshops, sewing kits, and expert tuition from professional sewers and designers. The project also provides a great place for local people – 60% of them from east Merton – to meet and work in a gentle and holistic environment.



Learning to sew, mend and upcycle gives people the skills and knowledge to save money and extend the life of their clothes. Around £140 million worth of clothing is sent to UK landfills each year. Globally, extending the average life of clothes by just nine months could save £5 billion a year.

Rachael Edwards, Sustainable Merton

Proud to be working together to create healthier communities

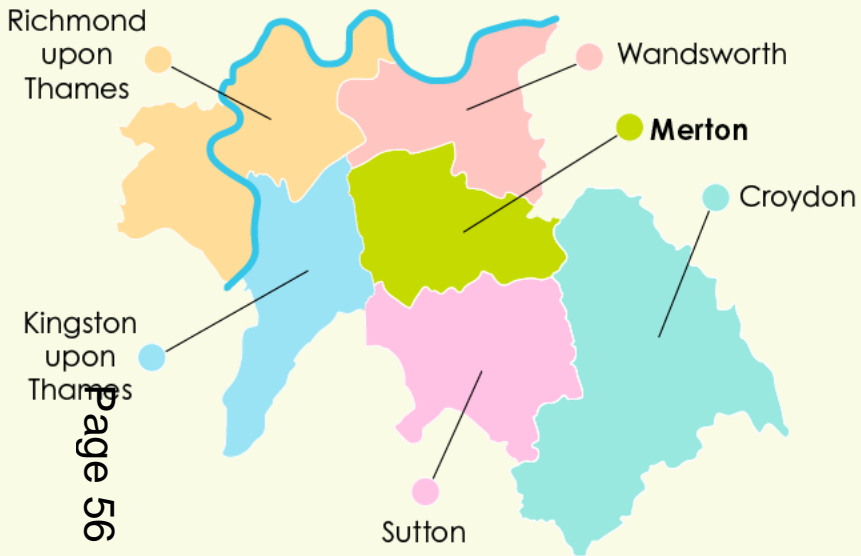
### Partners involved

Sustainable Merton  
Merton Council  
NHS South West London CCG

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

# Merton's pedalling paramedic



## How we're making a difference

A ground-breaking partnership between South West Merton Primary Care Network and the London Ambulance Service is helping more patients receive key primary care services in their own homes and identifying patients who may need more support sooner.

Working between the Nelson Health Centre and Grand Drive Surgery in Raynes Park, Paramedic Matt Kilner responds to acute calls that cannot be dealt with GPs on the phone, zipping through the streets of Merton on his power assisted bicycle carrying essential medical equipment.

Matt also leads an elderly frail, low-contact project and makes routine visits to patients for diabetic or dementia reviews. On an average day, Matt visits eight patients in their own homes.

He splits his time with the London Ambulance Service at New Malden where he uses a mountain bike to rush to emergencies.

There are still some visits that only a GP will be able to perform. With most busy GPs only able to fit in a couple of home visits each day, Matt's extra eight visits a day mean many more people in Merton are able to benefit from care in their home.



**We take a holistic view of how people live and because we spend a lot of time in home environments we can pick up on issues such as self-neglect, even if the signs are subtle. We can spend 45 minutes or longer with patients to find out what really matters to them and help build their personalised care plans.**

Matt Kilner, Paramedic

## Proud to be working together to create healthier communities

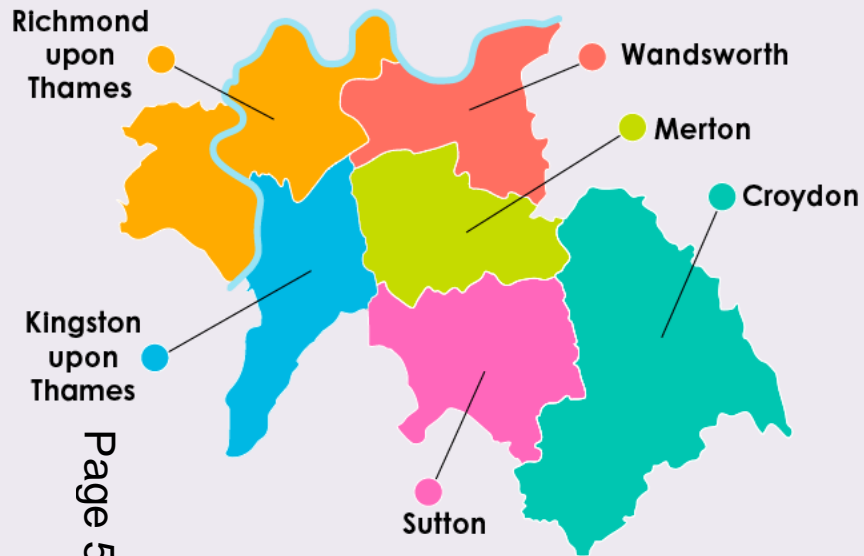
### Partners involved

South West Merton Primary Care Network  
London Ambulance Service  
NHS South West London CCG

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

# 1,000 extra eye ops for South West London



## How we're making a difference

Cataracts surgery has been carried out on more than 1,000 extra patients in South West London thanks to hospitals teaming up to co-ordinate care to help speed through the backlog.

Epsom Hospital is being used by the local NHS for people in the region needing cataracts operations, which do not require overnight stays.

It has proven so successful that waiting times are now on track to return to normal levels seen before the pandemic struck. All patients are now being seen within the 18-week timetable.

To watch Mr Ursell talking about the service you can watch this video – <https://youtu.be/1P-YDke6CZE>.



“Other hospitals needed a bit of help, so we took on 1,000 patients from other trusts. They came over to us and we've managed to do the surgery and get the waiting list down for everybody – so we are all part of one big NHS family.”

Paul Ursell, Consultant Ophthalmologist at St George's, Epsom and St Helier Hospitals Group

**Proud to be working together to create healthier communities**

### Partners involved

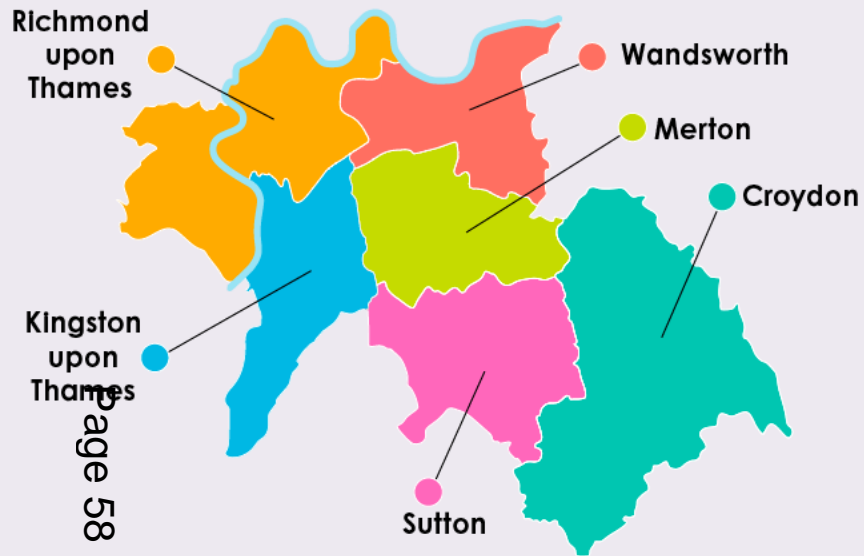
NHS South West London CCG  
South West London Acute Provider Collaborative

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)



# Building vaccine confidence



## Proud to be working together to create healthier communities

### Partners involved

NHS South West London CCG  
All South West London Local Authorities  
All South West London Healthwatches  
All South West London Primary Care Networks

### Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

We are building confidence in the Covid-19 vaccines by working with people in areas where uptake has been low, to reassure them the safety of the vaccination and to dispel myths that circulate on social media.

We work closely with local authorities and voluntary sector organisations to reach deep into communities to engage with different groups and to have conversations with people about the vaccine. In each borough we have developed a bespoke engagement plan with our partners, to engage with communities with lower uptake and used the vaccine data to inform where we locate pop-up vaccination clinics and focus our activity.

We have seen the success of this work through increasing numbers of people who were more reluctant or concerned about being vaccinated in the early days coming forward to receive their vaccination.

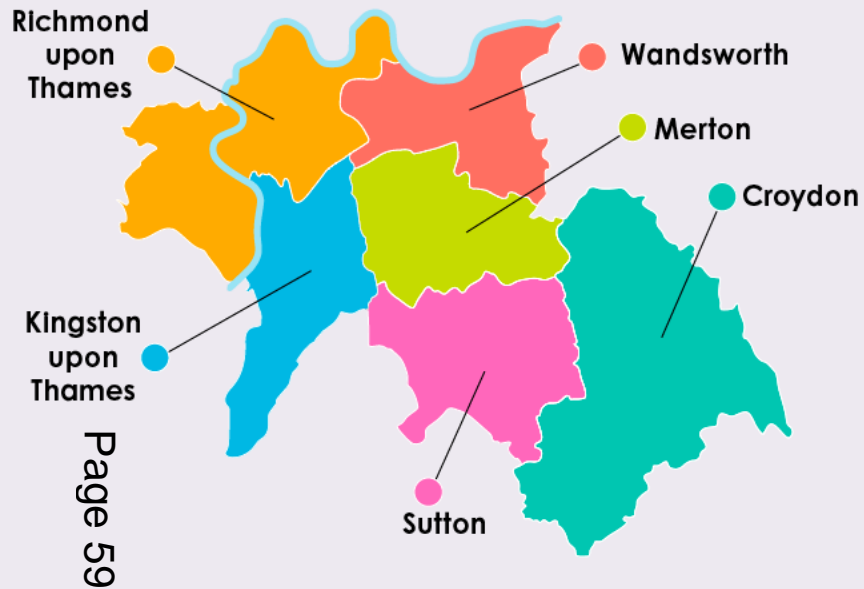
By March 2022, we had delivered more than 3 million vaccinations in South West London. Page 58 of 90



I had some questions which I made sure I asked the nurse, like what are the symptoms afterwards. Having that consultation with the nurse for about 10 minutes made me feel much more comfortable, and it was really quick, much quicker than I expected. I'm glad I came today to share the love and to now be able to help spread the word. Anybody reading this, please go ahead and get vaccinated.

Andrew Brown, Croydon BME Forum Chief Exec

# 'One-stop shop' cancer diagnosis clinics



**Proud to be working together to create healthier communities**

## Partners involved

NHS South West London CCG  
RM Partners  
South West London Acute Provider Collaborative

## Find out more

Learn more about our work and get involved at [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk)

## How we're making a difference

Rapid diagnostic cancer clinics across South West London – one stop shops designed to make assessments quicker – have carried out 50,000 tests since opening in July 2021.

People with vague, non-specific symptoms like unexplained weight loss, appetite loss, abdominal pain or signs suggestive of cancer can be referred several times for different tests for different cancers, but these centres are helping to end that.

Should a GP or other healthcare professional suspect cancer, they can refer people to their local clinic where all the necessary investigations can be done under one roof by a specialist team – with patients usually seen within two weeks of their first appointment.

The centres also pick up a number of non-cancer diagnoses, in which case the patient is referred to the relevant specialty. Others can be provided with the reassurance that all is okay.

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**Our one-stop-shops have undertaken over 50,000 tests since the first clinic opened at Queen Mary's Hospital in July 2021. By working together in South West London we can see and diagnose more patients more quickly, and make sure they receive the treatment they need as quickly as possible and closer to home.**

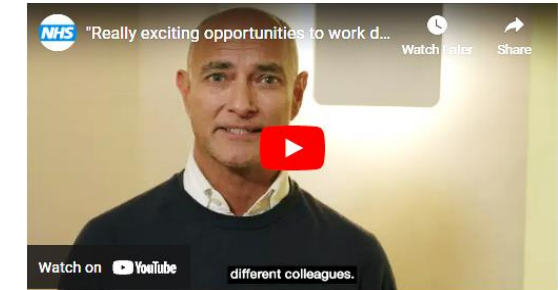
Dr James Marsh, Deputy Chief Executive at St George's, Epsom and St Helier Hospitals Group

# Local Leaders talk on video about what an ICS means for them and social media content and national links

# Short films from health and care leaders on what the ICS means for SW London

Share these films from key health and care leaders on what the ICS means to them, their staff and the people their organisations care for – see an examples below and the full YouTube play list can be found here:

[https://www.youtube.com/playlist?list=PL6C7nBjuT1x5x\\_u47gwxTLeyBvoXpnnVS](https://www.youtube.com/playlist?list=PL6C7nBjuT1x5x_u47gwxTLeyBvoXpnnVS)



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**Vanessa Ford, Chief Executive of South West London and St George's Mental Health NHS Trust**

"It's the relationships that make things work, and if we role model that as leaders it becomes something that actually happens throughout the organisation."

**Dr Vasa Gnanapragasam, GP Borough Lead for Merton**

"There'll be more collaboration and there'll be more joint co-creation of work so that patients don't get shunted from one place to another without much communication. I think we'll now come together as one in all the work we do."

**Liz Meerabeau, Chair, Healthwatch Kingston**

"We have talked about prevention for really very many years, but this is a really good opportunity to get it right this time and for prevention to be everybody's business."

**Dr Naz Jivani, Kingston GP**

"I think there's going to be a real enthusiasm for new ways of being able to work, working across organisations. Making sure that actually, if you've got real skills in the community they are really transferable into the acute trusts or into primary care, so having really exciting opportunities to work in a different way with different colleagues."





# Individual films of health and care leaders

Sarah Blow

"We can't do this on our own in the NHS" – Why we are bringing health and care services together [https://youtu.be/D\\_wfw5gwZeQ](https://youtu.be/D_wfw5gwZeQ)

Gillian Norton

"A once in a lifetime opportunity" – What the ICS means for health and care staff <https://youtu.be/rigsxjXrDr4>

Imran Choudhury

"People are going to want to come and work here" – What the ICS means for health and care staff <https://youtu.be/NrHRMQnjM8A>

Jacques Totterdell

"We can work more collectively and collaboratively" - What the ICS means for health and care staff <https://youtu.be/ftGPTIWXSNY>

Andrew Murray

"This will improve the morale of our workforce" - What the ICS means for health and care staff <https://youtu.be/H1YgM3acna4>

Vanessa Ford

"It's the relationships that make things work" – What the ICS means for health and care staff [https://youtu.be/tjxN\\_inM6mY](https://youtu.be/tjxN_inM6mY)

Ian Thomas 1

"Responsive services for our diverse communities" - What the ICS means for health and care staff <https://youtu.be/NloNslHspcU>

Naz Jivani

"Really exciting opportunities to work differently" - What the ICS means for health and care staff <https://youtu.be/molWCHJupCk>

Liz Meerabeau

"Across the whole of the NHS we have a focus on prevention" - How will we improve health and care for local people? <https://youtu.be/uwcnZJ8TXfo>

Gillian Norton 2

"This is all about making a difference to the people we serve" - Improving services for local people <https://youtu.be/5nx-wn1O7oc>

Vasa Gnanapragasam

"We will come together as one" - What the ICS means for health and care staff <https://youtu.be/AZr8Y0j4dE>

Gillian Norton 3

"We have an incredibly rich voluntary sector" - Bringing our partners together <https://youtu.be/C531BUB98ic>

Simon Shimmens

"It's more about residents and their needs" - Bringing health, care and voluntary services together <https://youtu.be/uZpP1Ose94k>

Richard Murray

"There's huge opportunities for seamless services" - Bringing health and care services together <https://youtu.be/wrQuPvXEIzg>

Mike Bell

"Big opportunity to prevent illness before it happens" - Improving population health management <https://youtu.be/7vi21gHcRMQ>

Matthew Kershaw

"We work well together" - How we will improve health and care for local people <https://youtu.be/N8Bgf3qSVn8>

Ian Thomas 2

"We can offer seamless and effective support" - How will we improve health and care for local people [https://youtu.be/qjRJShw\\_AfY](https://youtu.be/qjRJShw_AfY)

Imran Choudhury 2

"We can make services more accessible, efficient and patient centred" - Reducing health inequalities <https://youtu.be/5bVBcBtBV7c>



# Suggested copy to use on social media

## Topic: What does ICS mean for SW London health and care staff

### Gillian Norton

Video download - [Gillian Norton - What does the ICS mean for health and care staff.mp4](#)

Gillian Norton, Chairman of @StGeorgesTrust and @epsom\_sthelier tells us that for health and care staff, the South West London ICS is a once in a lifetime opportunity [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

### Imran Choudhury

Video download - [Imran Choudhury - What does the ICS mean for health and care staff.mp4](#)

Imran Choudhury, Public Health Director @SuttonCouncil - "People are going to want to come to work because they are going to be really impressed with the work South West London ICS is doing for local people."

[www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

### Dr Naz Jivani

Video download - [Naz Jivani - What does the ICS mean for health and care staff.mp4](#)

Dr Naz Jivani, #Kingston GP, tells us that "for health and care staff, ICSs are going to create a lot of security around their job roles, with really exciting opportunities to work differently." [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

### Ian Thomas

Video download - [Ian Thomas - What does the ICS mean for health and care staff.mp4](#)

Ian Thomas, CEO of @RBKingston talking about our new ICS - "Our staff will be better supported and we will create the conditions for them to deliver effective services that are responsive to the needs of our diverse communities."

[www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

# Suggested copy to use on social media



## Topic: How will we improve health and care for local people

### Matthew Kershaw

Video download - [Matthew Kershaw - How will we improve health and care for local people.mp4](#)

"I've worked across the NHS for nearly 30 years and the thing that stands out in South West London is the relationships we have, that we work well together." @croydonhealth CEO Matthew Kershaw on working together for local people. [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

### Ian Thomas

Video download - [Ian Thomas - How will we improve health and care for local people.mp4](#)

"I think that there is a great opportunity to truly ensure that the support that we offer is seamless, effective, and ultimately cost effective for the public purse at large." Ian Thomas, CEO of @RBKingston [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

### Imran Choudhury

Video download - [Imran Choudhury - How can we reduce health inequalities.mp4](#)

"We can make services more accessible, efficient and patient centred" @SuttonCouncil Public Health Director Imran Choudhury on how the ICS can help reduce health inequalities [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

### Liz Meerabeau

Video download – [Liz Meerabeau - How will we improve health and care for local people.mp4](#)

Liz Meerabeau, Chair of @HWKingston said that our new ICS allows will "focus on inequality and on the most disadvantaged people, and have a focus on prevention" [www.swlondon.nhs.uk](http://www.swlondon.nhs.uk) #IntegratedCareSystems

# Borough slides to use at Place

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**Heads of Comms in each Place can share with you place specific slides:**

**Croydon** – [joanna.blackburn@swlondon.nhs.uk](mailto:joanna.blackburn@swlondon.nhs.uk)

**Merton and Wandsworth** – [jennifer.nolan@swlondon.nhs.uk](mailto:jennifer.nolan@swlondon.nhs.uk)

**Kingston and Richmond** – [tara.ferguson-jones@nhs.net](mailto:tara.ferguson-jones@nhs.net)

**Sutton** – [valentina.seradi@swlondon.nhs.uk](mailto:valentina.seradi@swlondon.nhs.uk)

# National ICS online resources



## National ICS online resources

Our mission: [www.england.nhs.uk/publication/breaking-down-barriers-to-better-health-and-care](http://www.england.nhs.uk/publication/breaking-down-barriers-to-better-health-and-care)  
NHS England and NHS Improvement website: [www.england.nhs.uk/integratedcare/integrated-care-systems/](http://www.england.nhs.uk/integratedcare/integrated-care-systems/)

Published guidance and supporting documents: <https://future.nhs.uk/ICSGuidance/grouphome>

[Webinars](#) on integrated care in collaboration with Social Care Institute for Excellence

Integrated care [case studies](#)

Short films: [Youtube playlist](#) for integrated care

ICS appointments: <https://www.england.nhs.uk/integratedcare/ics-independent-chairs/>

Integrated Care Systems by region: <https://www.england.nhs.uk/integratedcare/integrated-care-in-your-area/>

To share integrated care resources, join the Integrated Care Learning Network: <https://future.nhs.uk/integratedcare/grouphome>

ICS bulletin: subscribe [england.systempartnerships@nhs.net](mailto:england.systempartnerships@nhs.net)

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## Feedback and questions

If you have any questions about this toolkit, or you feel there's anything that should be included, please email us at [publicaffairs@swlondon.nhs.uk](mailto:publicaffairs@swlondon.nhs.uk)

# Merton Civic Pride Fund: Supporting the Voluntary and Community Sector 2023/26

# Working Better With Communities Framework

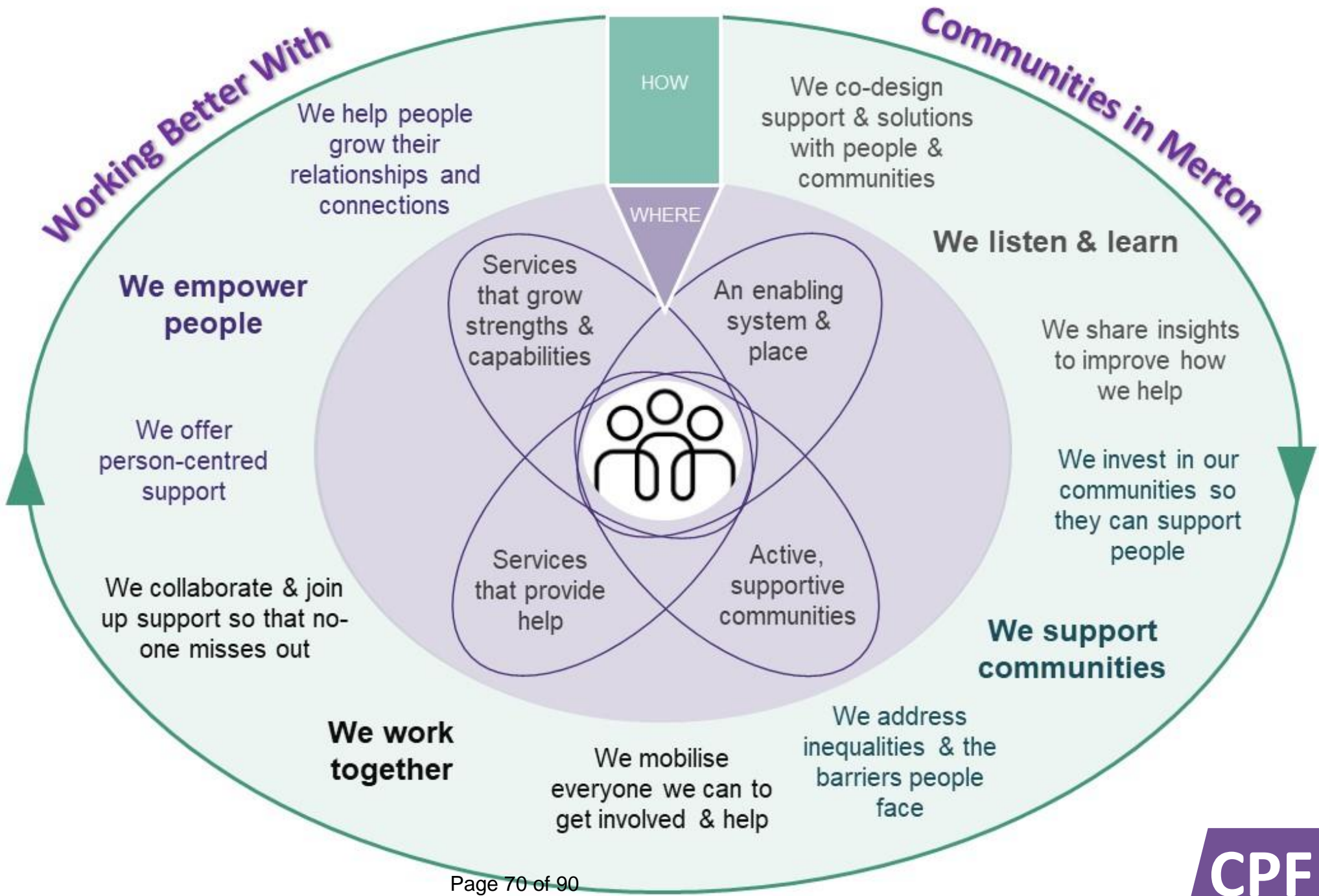




We want Merton to be a place to be proud of, where everyone can thrive, and where we embrace the strength and diversity of our communities and businesses.

By listening and trusting each other, sharing resources and decisions, and empowering everyone to solve the challenges we face, together we can build a better Merton.

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# Merton Civic Pride Programme

## The Vision

Merton's Civic Pride Programme aims to:

- Invest in and support Merton's local voluntary and community infrastructure.
- Nurture a strong sense of community and reduce inequalities.
- Bring together preventative services that provide information, advice and support in the community to strengthen Merton resident's physical, social, emotional, and economic resilience.

# What are the four key themes in the draft prospectus?

## 1. Services that provide help

Services that provide emergency assistance to people in crisis and direct help to adults in need

## 2. Services that grow strengths and capabilities

Services that provide good quality information, support and non-accredited advice, accredited advice and casework and specialist and/or legal representation where necessary.

## 3. Active, supportive communities

Services that co-design support and solutions with people and communities to help grow their relationships and connections and increase their level of activity.

## 4. An enabling system and place

Services that help to support an enabling system and place. This will include voluntary and community sector infrastructure support and the provision of small grants via Merton Giving.

# 8 ways of working for each theme

## Listen and learn

1. **Listen without judgement and involve** residents, staff and communities in co-designing support and solutions and shaping decisions which affect them
2. **Learn together and share insights** openly to continuously improve prevention, help and support in Merton

## Support communities

3. **Look for and address inequalities** in and between communities, target resources, make support accessible and value community insight
4. **Invest in community support** (volunteers, hubs, workers, activities) so that communities can develop and support people and places

## Work together

5. **Think holistically, ask for help and mobilise** everybody you can in solving challenges
6. **Invest time in relationships, collaborate** with across professions, silos and sectors and join up support and solutions as early as possible

## Empower people

7. Provide information & help earlier and in **empowering, accessible and person-centred ways** which build on the strengths of people and communities
8. **Connect** people into their community and enable them to find and offer **peer support**, and know where to find help

# 1. Services that provide help

The VCS are already working with Council to support residents with the increasing pressures of the cost of living on Merton.

The rising cost of living and its impact locally has been a key theme of the partnership over the past few months.

We are looking to commission services that provide direct help to people in need or crisis under the following key strands:

- Emergency Assistance
- Direct Help to support adults in need



## 2. Services that grow strength and capabilities

The Strengths and Capabilities theme will fund **information, advice and 1-1 support** services which grow people's strengths and capabilities and enable them to live independent lives.

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### Ways of working

Learn and share insights; address inequalities; collaborate & integrate support; connect and grow relationships

# 3. Active support communities

## Preventative Activities

**The Active and Supportive Communities theme will provide preventative activities that support and empower adults 18+ who have no social care needs, although could be:**

- At risk of frailty
- Have a long-term condition
- Have a disability/impairment
- Mental health condition or substance misuse problem
- Caring for someone who is ill, frail, disabled or has mental health condition or substance misuse problems.

## Ways of working

Learn and share insights, address inequalities, collaborate and integrate support, strengths-based, person-centred support, connect and grow relationships

# 3. Active support communities

## Healthwatch

The Health and Social Care Act 2012 requires local authorities to commission a local Healthwatch which has five key themes:

Page 77

Strategic Context and Relationships

Informing People

Making a Difference Locally

Community Voice and Influence

Relationship with Healthwatch England

# 4. An enabling system and place

The Enabling System and Place theme will fund:

- Voluntary and community sector infrastructure support
- Small Grants Support Programme via Merton Giving (annual funding)

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## Ways of working

Learn and share insights; address inequalities; invest in community support; Inspire and mobilise; Collaborate & integrate support; Connect and grow relationships.

# 4. Small Grants Support Programme

- Response to **State of the VCS in Merton 2021** report recommendations and feedback from other engagement on the need to build the capacity and capability of Merton's small, volunteer and community led organisations, including diversity-led groups, to maximise their potential.

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Allocate funding for smaller groups to build in opportunities and address challenges around infrastructure and capacity.

- **Merton Giving** a well-established mechanism for disseminating funding to smaller organisations in the borough.
- The fund will aim to build **capacity** and resilience, address **gaps** in services and support available and support **innovation** and the testing of new approaches.

# Consultation and engagement to shape framework which has informed draft prospectus

Listening and engagement as part of the Transforming How We Work With Communities project

'Your Merton' Residents' engagement programme

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Community Response Steering Group

Engagement event in April 2022 and Collaborative Working Group

State of the Sector report, local impact reports and Big Conversation/Big Explore

Additional research and benchmarking



# Timeline

What	When
<b>Draft prospectus and equality analysis taken to Cabinet</b>	19 September 2022
<b>Civic Pride Programme to be advertised</b>	3 October 2022
<b>Application closing date</b>	11 November 2022
<b>Convene Evaluation panel(s)</b>	After 11 November 2022
<b>Decision Report drafted and presented</b>	December 2022
<b>All applicants will be notified of the outcome</b>	By 31 December 2022
<b>Programme launches</b>	1 April 2023

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# Contacts:

**Amanda Roberts**

**Heather Begg**

**voluntary.sector@merton.gov.uk**

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# New bidding opportunity: Civic Pride – Investing in Neighbourhoods Fund

## Funding to develop Civic Pride

The opening of a fund for investing in neighbourhoods to help to nurture civic pride is being considered for the autumn.

The money comes from the Community Infrastructure Levy that developers are required to pay to support demands that developments place on our neighbourhoods.

### Find out more

**Civic Pride – Investing in Neighbourhoods:** [merton.gov.uk/cpneighbourhoods](https://merton.gov.uk/cpneighbourhoods)

- The majority of the funding goes to projects delivered directly by the council notably public realm improvements to parks and town centres, but we do support community groups and organisations mainly through grants for actual things such as improvements to facilities.
- We have given grants to community groups/organisations for activities in the past however the opportunity for this is restricted this year because there is less funding available to give out and the demand for public realm and other council projects is expected to be greater. However, we may be able to share any bids with our colleagues managing the Civic Pride – Supporting the Voluntary Sector Fund bidding round in case of any opportunities for a grant from that fund.
- So, the message is **if in doubt submit a bid!** ...by following the instructions on our webpage: [merton.gov.uk/cpneighbourhoods](https://merton.gov.uk/cpneighbourhoods)
- Timescales (anticipated but subject to minor changes):
  - Open for bids: 5 weeks this Autumn from Late September/early October 2022
  - Questions & Assessment: late 2022/early 2023
  - Cabinet decision on which bids it would like to support: February 2023
  - Grant agreements: from March 2023
  - Funding available: from April 2023 subject to grant conditions being met.
- For more information please visit the Neighbourhood Fund webpage: <https://www.merton.gov.uk/planning-and-buildings/planning/community-infrastructure-levy/neighbourhood-fund>.
- The webpage includes the bid application form, guidance, and the bidding deadline. It also sets out what bids are required to include and assessment criteria.
- The bid form is being designed so that you don't have to provide answers to all the questions. Anyone finding the form difficult can always send us an email to [neighbourhoodfund@merton.gov.uk](mailto:neighbourhoodfund@merton.gov.uk) stating:
  - the name of the organisation or group they represent
  - their contact details
  - how much funding they need
  - what they want funding for

and we can get back to them with any questions so that we can fill in any gaps in the information we need to consider the bid.

**For more information and assistance please contact:**

Tim Catley - Planning Contributions Manager, Merton Council

Email: [neighbourhoodfund@merton.gov.uk](mailto:neighbourhoodfund@merton.gov.uk)

Telephone: 020 8545 3197.

# The Cost of Living Crisis in Merton

Joint Consultative Committee with Ethnic Minority Organisations

Tuesday 13<sup>th</sup> September 2022

- Octavia Lamb – Policy and Scrutiny Manager
- [octavia.lamb@merton.gov.uk](mailto:octavia.lamb@merton.gov.uk)



# The Current Picture in the UK

- The annual inflation rate in the UK increased to 10.1 percent in July of 2022
- April saw an increase in the energy price cap to £1971, and a further increase to £3549 is planned for the 1st of October
- The price of food & beverages is up 9.8% from the year up to June 2022, and rose a full 1.2% between May and June alone
- Low-income households owe £22bn in debt, of which £12.5bn was taken on in the last year
- Based on new tenancies, rents in London are up 13.6% in the year up to June, now at an average of £1868 per month
- Unleaded and Diesel fuel have been slowly coming down in price - currently at £1.75 and £1.86 per litre respectively, from a high of £1.93 and £2.01 per litre in early July





# Social Impact of Cost of Living Crisis 1

- Women's Aid research reveals 96% of domestic abuse victims claim cost of living is making their abuse worse, and 73% are afraid to leave their abuser because of finances
- 7m households have gone without at least 1 essential or not enough food in the 30 days before a study by the Joseph Rowntree Foundation published in June
- Cost of energy and other important expenses are expected to result in closures of community services, e.g. libraries, care homes, community hubs
- 30% of Homes for Ukraine households have said that the crisis would either "quite a lot" or "very much" affect their ability to continue their hosting
- 23% of those who decided to only host a Ukrainian for 6 months or less attributed the decision to the rising cost of living
- Studies and analysis suggest a disproportionate effect on women and minority ethnic groups – details to follow

# Social Impact of Cost of Living Crisis 2

- 150 Merton households were assessed as being homeless or threatened with homelessness within 56 days between January and March 2022
- Food bank vouchers are in very high demand across the sector in Merton
- In the last 6 months, there have been 1800 visits to the Merton Community Fridge
- South West London Law Centre's debt team have seen a 24% increase in referrals over the past 6 months
- Citizen's Advice Merton and Lambeth (CAML) who offer a range of advice services, are continuing to see a significant increase in demand for advice across the board
- CAML have reported that demand for support is continuing at record high levels and more than ever before, they are unable to support residents who are contacting them. This does not include the hundreds of residents who are unable to get through to Merton Adviceline.



# Action by the Council so far

- Declaring a Cost of Living Emergency
- A series of Cost of Living events across the borough for residents to access information and support – two more in October
- A £2 million Cost of Living Fund – details to follow
- Funding Free School Meal Vouchers through school holidays
- Looking at initiatives that help residents reduce heating costs
- Engagement with voluntary sector partners to understand demand and find ways of working together
- Engagement with local businesses and the Merton Chamber of Commerce

# Key Aims – Ongoing Dialogue

- Work with organisations in the JCC to identify and promote any positive work that organisations are already taking with regard to the cost of living crisis
- Work with organisations in the JCC to better understand the impact on minority ethnic communities
- Work with the JCC to identify ways of improving engagement on cost of living with minority ethnic groups in the borough, as well as identifying barriers to action
- Encourage partnerships with minority ethnic groups, the Council, businesses and voluntary sector to find sustainable ways of supporting residents through the crisis

