

Healthy Communities Scrutiny Sub-Committee

Wednesday 10 February 2016
7.00 pm
160 Tooley Street

Supplemental Agenda

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4.	Minutes The Minutes of the meeting held on 17 November 2015 are attached.	1 - 2
5.	Interview with the Cabinet Member for Adult Care and Financial Inclusion Interview with the Cabinet Member for Adult Care and Financial Inclusion, Councillor Stephanie Cryan, on the following themes: 1. Update on Tower Bridge Care Home, Burges Park and Camberwell Green care homes. Since lifting, or partially lifting, the embargo on Tower Bridge and Burgess Park care homes what has happened? How many residents, if any, remain at Camberwell Green care home since the recent planned closure? (a briefing on this has been provided , and is published under item 9 of the agenda) 2. Council Home Care provider's attitude with regard to not providing pay slips to personal assistants 3. Council tax adult social care precept 4. Hospital discharges	

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Date: 8 February 2016

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8.	Progress report: Health of the Borough scrutiny review A progress report on the recommendations from the scrutiny review of the Health of the Borough is enclosed.	3 - 16
9.	Draft scrutiny review: Time to Care - a future vision of care in Southwark An update report on the closure of Camberwell Green and the lifting of embargoes on Tower Bridge Care Home and Burgess Park is attached to inform the review.	17 - 20
10.	Workplan The workplan is attached.	21 - 24
11.	SLaM centralised Place of Safety South London and Maudsley NHS Foundation Trust have provided a proposal for centralised Place of Safety . This is added as a late and urgent item.	25 - 31



Healthy Communities Scrutiny Sub-Committee

MINUTES of the OPEN section of the Healthy Communities Scrutiny Sub-Committee held on Tuesday 17 November 2015 at 7.00 pm at Ground Floor Meeting Room G02B - 160 Tooley Street, London SE1 2QH

PRESENT:

- Councillor Rebecca Lury (Chair)
- Councillor David Noakes
- Councillor Jasmine Ali
- Councillor Paul Fleming
- Councillor Maria Linforth-Hall
- Councillor Bill Williams

OTHER MEMBERS PRESENT:

OFFICER & Julie Timbrell, scrutiny project manager
PARTNER Mr John Ransford, non-executive Director of HC-One and Liz Whyte, Managing Director HC One
SUPPORT: Mike O'Reilly, Risk Management Director, Four Seasons
 Alex Evans, Director & Cindy Glover , group facilitator for older people's groups, both of Time and Talents
 David Stock, Chief Executive, Southwark Disablement Association - see written evidence
 Clive Smith , area representative , GMB .
 Verinder Mander, Chief Executive, Southwark Carers
 Sue Plain, UNISON – with three care workers
 Jackie Bourke- White , Chief Executive, Joan Thomas , Home Care Lay Inspection project , Miranda Okon , Care worker all of Age UK
 Tom White , Lay Inspector , Age UK
 Helen Well , area manager, CQC.
 Kate Moriarty-Baker, Head of Continuing Care and Safeguarding , Southwark Clinical Commissioning group
 Catherine Negus , Healthwatch
 Peter Doye

1. APOLOGIES

- 1.1 There were apologies for absence from Councillor Lucas Green. Councillor Paul Flaming gave apologies for lateness.

1. NOTIFICATION OF ANY ITEMS OF BUSINESS WHICH THE CHAIR DEEMS URGENT

- 2.1 The chair announced that the Our Healthy South East London Joint Health Overview and Scrutiny Committee (OHSEL JHOSC) has been agreed by Southwark OSC and with neighbouring boroughs. Councillor Lury will be chairing. Representation on the committee from Southwark Council will be from Cllr Lury and Cllr Williams, although there will be some fluidity with additional reserves. Membership was decided by political proportionality of each borough.

3. DISCLOSURE OF INTERESTS AND DISPENSATIONS

- 3.1 There were no disclosures of interests or dispensations.

4. MINUTES

RESOLVED:

That the minutes of the meeting held on 10th October 2015 were agreed as a correct record.

5. INTERVIEW OF CARE HOME PROVIDERS : FOUR SEASONS AND HC ONE

6. REVIEW 2: CARE IN OUR COMMUNITY

RESOLVED:

GMB will provide a submission on Union recognition and steps the council could take to improve labour relations in care homes.

AGE UK will provide a copy of their report which drew together information from surveys & forum meetings with home care users and home care workers.

7. WORK-PLAN

The work-plan was noted.

Item no.	Classification: Open	Date: 10 th February 2016	Meeting Name: Healthy Communities Scrutiny Sub Committee
Report title:		Update on recommendations from the Scrutiny of the Health of the Borough	
Ward(s) or groups affected:		All	
Cabinet Member:		Councillor Barrie Hargrove Cabinet Member for Public Health, Parks and Leisure	

FOREWORD - COUNCILLOR BARRIE HARGROVE, CABINET MEMBER FOR PUBLIC HEALTH, PARKS AND LEISURE

Improving the health of Southwark's population and reducing health inequalities require a multi faceted partnership approach across the system. Southwark Council, NHS partners and the voluntary and community sectors are working together to do this. The Scrutiny Sub Committee highlights the importance of this cross cutting approach by conducting a wide ranging review that covered the financial health, the environmental health and the physical health of the borough. I very much welcome the participation of the many partners in submitting their evidence to the scrutiny process. I am pleased to present the update to the recommendations received from the Healthy Communities Scrutiny Sub-Committee and I look forward to continuing to work across Council departments and with local partners to improve the health of Southwark's communities.

SUMMARY

1. This is an update on the progress to take forward the recommendations made by the Healthy Communities Scrutiny Sub-Committee's in its report 'The Health of the Borough'. There are 33 recommendations which were presented to Cabinet on the 23rd June 2015 covering: financial health, environmental health and physical health.

BACKGROUND INFORMATION

2. The Healthy Communities Scrutiny Sub-Committee undertook an investigation into the health of the borough. The investigation covered financial health, environmental health and physical health. A report of the sub committee's findings was received by the Healthy Communities Scrutiny Sub Committee in March 2015.

<http://moderngov.southwark.gov.uk/documents/s52215/Health%20of%20the%20Borough%20draft%20report.pdf>

KEY ISSUES FOR CONSIDERATION

Update on the recommendations from Healthy Communities Scrutiny Sub-Committee

Financial Health

3. *Recommendation 1: The Committee recommends that the Council continue to provide funding for the Southwark CAB so that it continues to support vulnerable residents, in particular men in their 50s who are adversely affected.*

Response

4. The Council has three year contracts with the Southwark Citizens Advice, Advising London and Southwark Law Centre to provide advice to residents who are having difficulties with housing, debt, welfare benefits, immigration status and other issues. Southwark CAB from its bases in Bermondsey and Peckham provides face to face advice, drop-in sessions and appointments. It also provides on-line advice via the www.southwarkadvice.org.uk website and telephone advice via the low-rate Southwark Advice Line. The Council is looking at extending these contracts in order to ensure continuity of services at a time of high levels of need.
5. The Council is part of Southwark Legal Advice Network which plans and co-ordinates the delivery of services to meet the needs of Southwark residents. The Council attended the launch of the Southwark Legal Advice Network Draft Strategy for Advice in September and held a Consultation Event with partners and stakeholders to consider community advice needs as part of the process for commissioning services.
6. The scrutiny report highlighted specific concerns with men aged 50+ on low incomes who may be isolated. The CAB aims to ensure its services meet the diverse needs of all residents, including the needs of this group. Specifically, the Council and the Tenants Joint Security Initiative grants panel has funded a project informed by the Pullens Tenants and Residents Association and supported by the Southwark Group of Tenants Organisations. This project is linked to the Community Advice agencies including Southwark CAB and involves:
- Setting up a self-help group for Southwark tenants who are unemployed and claiming JSA or ESA
 - Confidence building of unemployed tenants, thereby decreasing isolation and increasing community engagement.
7. *Recommendation 2: The Committee recommends that the Council continue to promote local CAB services to residents, particularly the Money Savvy service, providing financial education for social housing tenants.*

Response

8. Community Advice Services are promoted on the council website and through a range of communication channels including the Community Engagement e-Newsletter, Community Council e-Newsletters, Facebook page, Southwark Life and the Revenues and Benefits stakeholder letter. Details of Money Savvy workshops and training events are also regularly circulated through the above channels and to local voluntary sector groups and the Southwark Group of Tenants Organisations who work closely with residents. Community Engagement and other Council departments continue to work with the Money Savvy project to build awareness and participation in the activities. Regular updates are posted on the council intranet to ensure staff are aware that these services are available to residents. In addition organisations funded via the Council's Community Capacity grants programme are encouraged to signpost service users to the community advice agencies. A number of organisations are funded through the programme that provide specific support to people who are isolated and vulnerable, such as those with mental health issues, many of whom are men over 50. These include Time and Talents, Southwark Pensioners' Centre, and Mental Fight Club..
9. *Recommendation 3: The Committee recommends the January edition of Southwark Life should carry information on financial services provision in the Borough to raise awareness at a time when people are more likely to be looking at organising their finances.*

Response

10. Information on financial services provision in the borough and being money wise was featured in the summer and Christmas editions of Southwark Life. The CAB was featured and provided some top tips on managing personal finances. Southwark Life will continue to include features on a regular basis about financial management and where to get help.
11. *Recommendation 4: The Committee further recommends that Community Council chairs should be encouraged to invite financial support services to present and be on display at Community Councils during the administrative year.*

Response

12. The healthy borough initiative was discussed at the June 9 Community Council chairs and vice chairs meeting. Chairs were encouraged to hold a health and wellbeing themed meeting in their areas. Credit Unions and Money Savvy (CAB) have presented in community council meetings previously and are welcomed to present or have stalls at future meetings. Their services are regularly promoted in the Community Council e-newsletters.
13. *Recommendation 5: The Committee recommends that the Cabinet Member writes to all Tenants & Residents Associations on an annual basis to provide them with details of services that are located within Southwark.*

Response

14. Information on these services is regularly provided to tenants via the resident involvement team and Southwark Group of Tenants Organisations.
15. *Recommendation 6: The Committee therefore recommends that a named Cabinet Member works to identify a potential premise for a credit union on the Walworth Road, which would help to balance the number of payday loan shop services.*

Response

16. Officers have been working with the London Mutual Credit Union (LMCU) in relation to the former Cash Office, 177-179 Walworth Road, in order for that property to become a new service outlet for LMCU. Terms for a lease have been agreed and granted. The LMCU has taken possession and the property is undergoing refurbishment. Currently, it is anticipated that the new premises will open in February 2016.
17. *Recommendation 7: The Committee also recommends that all Councillors should be encouraged to join a credit union so that they can speak from first-hand experience to residents about using credit unions.*

Response

18. Credit union and money advice services are promoted in the borough. These services have presented at Council meetings and to councillors so that councillors are aware of them and are able to promote them.
19. Additionally, young people in Southwark are encouraged to save through a credit union. Eleven year olds in Southwark are being given a helping hand with their finances with the Council Smart Savers initiative. Every child aged 11 living in the borough can set up their own bank account with the London Mutual Credit Union, and all those who do so will find £10 in their account, to help them get their savings underway. Southwark Smart Savers has been designed to help young people to save and teach responsible financial behaviour including experience of money matters, budgeting, saving and handling cash. As at January 2016,
- 11% of eligible young people have taken up the scheme
 - 29% increase in junior accounts at the credit union
 - 91% of vouchers were used to create new accounts, rather than applied to existing credit union accounts.
20. *Recommendation 8: The Committee recommends that the Council takes the lead in initiating discussions about the potential for working with the CCG, local GP practices and CAB services to provide financial health services in health centres in Southwark.*

Response

21. There is an agreed project plan and on-going discussion between the Council and CCG.

Environmental Health

22. *Recommendation 9: The commitment that the Council has so far made to our parks and green spaces should be commended, and the Committee recommends that the Council continues to invest in these areas to improve the health of residents.*

Response

23. We will continue to invest in our Parks and Green Spaces. We have a multi-million pound capital programme rolling out over the next few years. But at the same time need to always be mindful of future budgetary constraints, particularly those affecting revenue streams.

24. *Recommendation 10: The Committee would recommend that the Cabinet member continue to put pressure on TfL to reconsider the scope for the ultra-low emission zone to include Southwark.*

Response

25. Transport for London has agreed to review the extent of the Ultra Low Emission Zone. A working group has been established through London Councils to assist and steer this work. Southwark Council will be feeding into this work.

26. *Recommendation 11: The Council should consider banning smoking in children's playgrounds. This will be a good initial move to improve the air quality for young people in our borough and those who are likely to be affected by second hand smoking from adults whilst they are at play.*

Response

27. Smoking will not be allowed in any of the children playgrounds in Southwark's parks. A voluntary approach has been taken initially. Young people have been engaged in a poster competition around smoking during the summer term 2015. The winning poster from Bellenden Primary School is being used as signage in playgrounds to inform people that smoking is not allowed. Signage preparation is in process and the installation of the signs in the playgrounds is scheduled in February 2016.

28. *Recommendation 12: The Committee would recommend that the Cabinet Member looks into the possibility of funding a project highlighting the green link projects throughout the Borough.*

Response

29. We are working on a major cycling marketing campaign that will be promoting the priorities in the strategy. This will include the different routes people can cycle and is expected to roll out next year. In the interim, there is on-going print and digital promotion to highlight cycling schemes, like the cycle loans, cycle training and cycle parking. There is also work exploring the various social media options to advertise local cycling

provision and the Council is promoting walking by hosting a 'walking hub' on its website. The council's walking strategy is currently being developed. Green links will be promoted within this.

30. *Recommendation 13: The Committee welcomes the suggestion from meeting participants that we have planted sections which would act as a 'green ribbon' through the Borough and recommend that the Cabinet member factors this into the ongoing Cycling Strategy that the Council is developing.*

Response

31. The Cycling Strategy commits the council to talking to communities about how a street functions, and to better understand what designing for cycling means for local streets, parks, neighbours and the community itself when provided the infrastructure improvements identified in the plan. It is through this engagement that landscaping and greening can be considered. It is also worth highlighting that green ribbon projects also meet the criteria for Cleaner, Greener, Safer.

32. *Recommendation 14: The Committee recommends that the Cabinet Member for Regeneration seriously considers the viability of a low line and works with the Walworth Society to develop a proposal to take this forward.*

Response

33. Officers will continue working in close partnership with Network Rail and the local community in Bankside, London Bridge, Elephant and Castle and Walworth to ensure the delivery of the project as appropriate sites and opportunities come forward. The Low Line will be supported in planning policy through the New Southwark Plan to be adopted in 2017. The 'Preferred Option' version of the New Southwark Plan, out for public consultation until 12th February, includes Policy DM45 supporting the implementation of 'Low Line' walking routes across the borough.

34. *Recommendation 15: The Committee would recommend that the Cabinet Member looks to conduct a study into the better use of green space in the Borough and work with local TRAs and community groups to identify community projects that can be undertaken.*

Response

35. This summer, the marketing team conducted a piece of research into how to encourage behavior change relating to green spaces in areas identified as having the lowest rates of activity. Different messages were being tested to ascertain which have the greatest impact on park use. Areas near a park were split, with half of the residents receiving one message, the other half another. Materials have the same look and feel but a different emphasis, one specifically promoting local facilities. The direct mail was being followed up with research in key streets to identify whether residents took the required call to action, whether the shift in emphasis affected this and to gather other key information about what encourages or discourages residents to use their local parks or other parks in the borough. The results of the research are now being analysed and used to support

the development of a significant marketing campaign to promote park use in the borough.

36. *Recommendation 16: We would encourage the Cabinet Member for Regeneration and the Chair of Planning to look to encourage developers to consider interim use projects which contribute to improving the environment for Southwark residents during their schemes.*

Response

37. The Council is actively encouraging developers to consider interim use projects which contribute to improving the environment for Southwark residents during their schemes. For example, at Elephant and Castle the Council is working with Lend lease to deliver a programme of interim uses. The Artworks scheme has opened providing over 30 temporary units for small business start ups, and land has been provided to the Mobile Gardeners, a local community group, for a gardening and horticulture project. Next year, Lend Lease will be submitting plans for a temporary park which will provide an interim open space for residents pending the provision of a much larger permanent one hectare open space. At Canada Water, the Council is working with British Land to redevelop the former Harmsworth Quay's printing press site. Secret Cinema are currently occupying the premises on a short term basis as a venue for a programme of cinematic, theatrical musical and cultural events. Opportunities for gardening and greening projects are also being actively explored. In the longer term, once the site is cleared there could also be opportunities for interim sport and leisure uses such as temporary 5 aside football pitches.
38. Planning policy DM13 of the 'Preferred Option' version of the New Southwark Plan states that planning permission will be granted for appropriate temporary 'meanwhile uses' where they deliver community benefits and do not compromise the future redevelopment of the site.

Physical Health

39. *Recommendation 17: The Committee recommends that the Council consider further sites for outdoor gyms in parks and open spaces throughout the Borough.*

Response

40. Fifteen outdoor gyms were identified at the time of writing the Health of the Borough report: Leyton Square, Tabard Gardens, Peckham Rye Park, Haddon Hall Estate, Mint Street Park, Southwark Park, Geraldine Mary Harmsworth Park, Aylesbury Estate, Burgess Park (Albany Rd/Canal St), Burgess Park (St Georges Way /Sumner Road), Lordship Lane Estate, Dulwich Park, Durand's Wharf, Bethwin Road Adventure Playground, Brimington Park. Since then several more installation sites have been identified, funded through the Cleaner Greener Safer programme (2014/15) in consultation with local communities: Bermondsey Spa Park, Pearsons Park, Kingswood outdoor gym, Clifton Estate, Comus House.

41. Additionally, there is an outdoor gym at Pynners sports ground which was a pilot project funded through Olympic Legacy capital. The project is entitled Active Spectators. The aim is to encourage the parents and general spectators who visit the sports ground to be active, while watching their children take part in organised activities. The equipment is also used by the young people who visit the sports ground for sessions run by Caribb F.C. A further sports ground site may be funded informed by the usage and lessons from Pynners.

42. *Recommendation 18: The Committee believes that the play street scheme provides an ideal opportunity for engaging children in safe play near their homes, and would recommend that the Cabinet Member looks to extend the scheme during school holidays.*

Response

43. The recommendation is welcomed. The intention is to extend the scheme. The target set for applications for play streets are 12 (2014/15) and 24 (2015/16) ie to double the number of schemes. A targeted summer marketing plan is being rolled out with support from Living Streets as well as Council channels to advertise this opportunity. In 2014/15 there were 13 participating streets. So far in 2015/16, 32 applications have been received, (17 delivered Apr-end July and 15 booked for Aug-March).

44. *Recommendation 19: The Committee is currently conducting a Licensing Policy Review, and the Committee would recommend that the new guidance would seek to ban the sale of super strength alcohol as a standard condition of a licence.*

Response

45. The Statement of Licensing Policy has been reviewed. The revised policy incorporates the 'removal of low cost high strength alcohol from offer' as part of the suite of measures intended to promote the licensing objectives of 'the prevention of crime and disorder' and 'the prevention of nuisance'. Applicants for new licences and applications for variations of existing licences would be directed to consider the inclusion of this measure as a proposed licence condition when preparing their business operating schedule as part of their application. 'Responsible authorities' and 'other persons' may also recommend the inclusion of the measure as a licence condition, where this is omitted by the applicant but considered to be appropriate for the promotion of the licensing objectives in the specific case in question.

46. The Council Assembly agreed the revised Southwark Statement of Licensing Policy for 2016-2020 on 25 November 2015. It came into effect on 1 January 2016.

47. Tthe policy incorporates 'the removal of low cost, high strength alcohol from offer' as recommended best practice and this will be promoted by the relevant responsible authorities through the representations process.

48. *Recommendation 20: The Committee recommends that the Licensing Review further considers the ways in which current licensing policy can be used more effectively to have a clear impact on decision making.*

Response

49. The licensing policy has been fully reviewed with significant contribution from Public Health.
50. Alongside fully revised best management practice for each of the four licensing objectives relevant to different types of licensed operation, the document also incorporates (for the first time) guidance on appropriate operating hours for different classes of licensed premises based on the local area planning classification and extended guidance on how cumulative impact policies shall be applied.
51. The revised policy is supported by the relevant responsible authorities, which will work together to ensure that its content and recommendations are taken on as appropriate.

52. *Recommendation 21: As a Committee we believe there needs to be great importance placed on health as a licensing objective. We recommend that the Cabinet Member lobbies central Government for weight to be put behind this objective, so that it can be added to the updated licensing conditions.*

Response

53. It is important that health is a licensing objective so that the impact of alcohol licensing on health can be taken into account in the licensing process. This is currently being lobbied for through the London Healthier High Streets Group (over 20 London boroughs are represented on this group which is chaired by Lambeth & Southwark Public Health) and through lobbying via the London Councils and public health devolution 'asks'. Haringey Council is exploring how health as a licensing objective can be implemented. Lambeth and Southwark Public Health and Southwark Licensing colleagues will learn from the pilot.

54. *Recommendation 22: The Committee would recommend that Public Health is regularly consulted on licence applications and review processes, and data is taken into account to assess the likely impact on health for residents, including A&E admissions, noise disturbance and ambulance call-outs.*

Response

55. As a named 'responsible authority' within the Licensing Act 2003, Public Health is formally consulted as a matter of course on every application for a new premises licence or variation of an existing licence. Public Health has developed and is now using a data tool which allows the geographical location of licensing applications to be assessed in relation to alcohol related violence and crime, hospital admissions, A&E attendances and ambulance call outs. This evidence is being used by Public Health to make

representations to support the Local Authority and the Metropolitan Police as Responsible Authorities to assess the impact of a license on the licensing objectives. This has supported the refusals of licenses as well as the incorporation and adoption of best practice conditions such as minimum price, sales of single cans of super strength, sales of alcohol in open containers and hours of operation. Public Health are now included in the three-weekly cycle of Responsible Authority meetings held to discuss new licence applications and upcoming reviews.

56. *Recommendation 23: The Committee supports the idea that there needs to be a more localised approach to tackling smoking and we would recommend the close working together of the CCG, the Council and local partner organisations.*

Response

57. A Southwark Tobacco Control strategy is being developed. The strategy is being informed by local intelligence that is being gathered through data analysis, engagement with partners including the CCG, as well as deep dive community insights with residents. The strategy will set out how the smoking prevalence target agreed by the Southwark Health and Wellbeing Board in January 2016 will be achieved. The strategy will also identify commissioning priorities for the council as well as the NHS. The Lambeth and Southwark Tobacco Control Alliance facilitated by Public Health continues to promote an evidence based tobacco control approach locally. The Alliance consists of representatives from the council, CCG, NHS acute trusts, Fire Brigade, Police and HMRC.

58. *Recommendation 24: Tackling smoking needs to remain a high priority for Public Health. The Committee supports the idea that there needs to be a more localised approach and we would recommend the close working together of the CCG, the Council and local partner organisations.*

Response

59. Public Health has led the review of smoking across Southwark. Evidence of what works to tackle smoking has been collated. Smoking cessation is one of the most cost effective health interventions, every £1 spent on smoking cessation services saves £10 in future costs. A Health Equity Audit has been conducted to understand who is accessing the service and who is more likely to quit or be lost to follow up; and whether access is according to needs. Work has been conducted to enable comparisons to be made between Southwark and the rest of England on key indicators. In depth engagement has occurred with residents across Southwark – smokers and non-smokers. Dialogues have also been had with members of specific target groups e.g. those with long term conditions, mental health, unemployed. Partners have been engaged with all the different elements of work and findings will inform the Tobacco Strategy.

60. *Recommendation 25: Discouraging young people from taking up smoking is a particularly important want to tackle the issue, and there needs to be more done to educate in schools. . At present 4 schools per year are being funded in a 4 year project (2013-2017) working with year 8 students. This does not provide a comprehensive enough approach and we recommend that the Council needs to work with secondary schools to have a yearly programme of activity.*

Response

61. Stopping young people from starting smoking is a crucial element within a comprehensive evidence based approach to tackling smoking. This will be a focus within the strategy, identifying what information and support need to be offered to young people through schools and youth settings. Emerging issues such as the increasing use of shisha by young people will also need to be taken into account. Consideration will also be given to how to restrict sales of cigarettes to people born after the millennium – there may be lessons learnt from the London Devolution Prevention Pilot which will include elements of tobacco control.

62. *Recommendation 26: In terms of tackling illegal tobacco, there is currently a partnership with Lambeth, Lewisham, Greenwich, Bexley and Bromley looking at the situation in SE London. The Committee commends this approach and would like to see a more concerted effort to tackle sales of illegal tobacco.*

Response

63. The London Boroughs of Lambeth, Southwark, Lewisham, Royal Greenwich, Bexley and Bromley are stepping up their fight against illegal tobacco in South East London. Over the last three years these boroughs have worked together and had success in finding and prosecuting those who sell illegal tobacco. This summer has seen the launch of a joint South East London illegal tobacco campaign, “Keep It Out”. The message has been going out into the community and online to show people what the true cost of tobacco is to them and their children in terms of crime and poor health. There have been face to face engagement at local events and a new website page and helpline that allows people to report illegal tobacco anonymously has been set up. Messages are also going out that the boroughs are working with the Police and HMRC and people who sell illegal tobacco could be visited by enforcement teams with sniffer dogs.

64. *Recommendation 27: The Committee would recommend that the Cabinet Member takes note of the submissions to this Committee in his consideration of responses to the Council’s Cycling Strategy.*

Response

65. The Cycling Strategy was adopted by Cabinet on 2 June 2015, the final version was informed by all responses received including that of the committee.

66. *Recommendation 28: The Committee recommends that the Cabinet Member looks at a joined up approach and fairer allocation of safe cycle storage schemes and communication with residents about their location and provision.*

Response

67. The Cabinet Member has met with officers, who will investigate how to engage with residents to deliver cycle storage schemes.

68. *Recommendation 29: The Committee recommends that the Cabinet Member works with TfL to extend further cycle hire schemes throughout the Borough.*

Response

69. The council is continuing to lobby Transport for London for an expansion of the cycle hire scheme. TfL and Southwark officers are working on a funding package to be finalised in early autumn. The marketing team are engaged in work to promote usage of existing cycle hire hubs in the borough.

70. *Recommendation 30: The Committee recommends that the Cabinet Member considers the outcomes of the Grange Project and looks to see whether the scheme could be further extended in other areas in the Borough to encourage cycling.*

Response

71. Agreed, officers to investigate further.

72. *Recommendation 31: The Council is currently aiming to have 10% of the borough actively cycling. Given the success of the Grange Project, the Committee recommends that the Cabinet Member should consider increasing the target percentage of those actively cycling in the Borough for 2016/17.*

Response

73. Southwark has the sixth highest percentage of commuting cycle users in London. Currently 4.6% of all trips in Southwark are made by cycle which equates to approximately 35,000 trips made by cycle every day. The current Transport Plan cycle mode share target aims to double current levels of cycling to 10% by 2025/26. We will continue to review progress against our target on an annual basis as part of the Annual Transport Plan Monitoring report.

74. *Recommendation 32: For contracting purposes, the Committee recommends that the impact of public health on staff is taken into consideration.*

Response

75. Southwark Council has signed up to the Workplace Health Charter which provides a systematic process to improve the health of its workforce. Southwark employees will also benefit from the free swim and gym offer when it is fully launched.

76. The commitment to the London Living Wage and the Southwark Ethical Care Charter for homecare workers will have a positive impact on the health and wellbeing of directly employed as well as contracted staff.

77. Local employers are also being supported to sign up to the Workplace Health Charter. In addition to Southwark Council, other local organisations signed up include Southwark

CCG, GSTT, Kings College Hospital, HMRC, London Fire Brigade and GLA. Public health is also working with the voluntary sector to support their engagement with the Charter. There are on going discussions with Adult and Children Commissioning to also promote this within tendering specifications. This is also being negotiated into new tenders for example for leisure centres and park cafes.

78. Recommendation 33: The Committee recommends mandating Audit & Governance to investigate the inclusion of public health impact assessments across all Council departments.

Response

79. Health impact assessments and mental health and wellbeing assessments are effective and useful tools to flag and maximise positive effects on different population groups, and to highlight and mitigate unintended negative effects of a policy, strategy or project. These tools will also help to target investment to where it is most needed and to monitor if it reaches its intended population.

80. The Director of Public Health attended the audit and governance committee in November 2015 and outlined work under way already to formalise consideration of the impact on public health of council decisions in reports. It was agreed that an update on the implementation of public health impact assessments into the decision making process be brought back to the committee in six months' time.

Policy implications

81. There are no specific policy implications currently arising from the recommendations. In taking forward the recommendations, should any changes to policy arise, they will be further considered at Cabinet.

Community impact statement

82. In taking forward the recommendations, equality of opportunity and assessment of potential impacts, in line with the Equality Duty, at section 149 of the Equality Act, will be considered. In particular, the provision of money advice services, the impact and take up of physical activity opportunities and active travel, the impact of re-commissioning tobacco control and smoking cessation services, and the impact of alcohol licensing on different communities, will be considered to ensure that some communities, in particular most 'at risk' communities are not disproportionately affected.

Legal implications

83. There are no legal implications for the report.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact
Scrutiny report considered by Cabinet	Constitutional Team, Southwark Council, 160	Paula Thornton Paula.thornton@southwark.gov.uk

	Tooley Street, London SE1 2QH	020 7525 7055
Link: http://moderngov.southwark.gov.uk/documents/s52215/Health%20of%20the%20Borough%20draft%20report.pdf		

AUDIT TRAIL

Cabinet Member	Councillor Barrie Hargrove, Cabinet Member for Public Health, Parks and Leisure	
Lead Officer	Dr Ruth Wallis, Director of Public Health for Lambeth & Southwark	
Report Author	Jin Lim, Assistant Director of Public Health	
Version		
Dated		
Key decision	No	
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES / CABINET MEMBER		
Officer title	Comments sought	Comments included
Director of Legal Services	Yes	Yes
Strategic Director of Finance and Corporate Services	Yes	Yes
Strategic Director of Environment & Leisure	Yes	Yes
Strategic Director of Housing & Community Services	Yes	Yes
Director of Planning	Yes	Yes
Director Regeneration	Yes	Yes
Cabinet Member		
Date final report sent to Constitutional Team		

Prepared by:	Pauline O'Hare	For:	Committee Briefing Paper
SMT senior sponsor:	Jay Stickland	Date:	04/01/2016

Title: The closure of Camberwell Green and the lifting of embargoes on Tower Bridge Care Home and Burgess Park

1. Background

On 4th October Care Home provider HC-1 announced that it would be closing Camberwell Green nursing home. At the time the only other available nursing homes in the borough were Tower Bridge (owned by HC-1) and Burgess Park (owned by Four Seasons). Both were under an embargo by the council

Southwark Local Authority had placed these care homes under embargo following concerns in regard to standards of care. Shortly afterwards, Care Quality Commission (CQC) undertook inspections and placed both homes in special measures.

Southwark Adult Social Care and the NHS Southwark Clinical Commissioning Group (CCG) worked with the management teams of both Burgess Park and Tower Bridge to raise the standards of care.

Health and Social Care professionals visiting Burgess Park during this period noted improvements in the management and care delivered at the home and believed it was now safe to admit new residents.

Tower Bridge had a higher number of agency staff and a new manager. HC-1 planned to transfer many of its permanent staff over to Tower Bridge from Camberwell Green at the point of closure. Professionals visiting Tower Bridge had noted that improvements in care were being made under the direction of the new manager.

The improvements reported by Health and Social Care professionals visiting the homes on a regular basis has yet to be verified by CQC. CQC were not scheduled to report on, or revisit the homes, in the immediate future.

It is good practice for Local Authorities to liaise with regulators, including sharing information and coordinating actions. However CQC are independent from the Local Authority in decisions to place or lift an embargo on a care provider.

Southwark Care Management and Brokerage were finding it difficult to locate suitable nursing care home placements anywhere in Southeast London. This was causing considerable stress for the residents of Camberwell Green and their families.

2. Decision in relation to embargo on admissions

In response Adult Social Care in consultation with Health colleagues from NHS Southwark Clinical Commissioning Group (SCCG) began to weigh up the risks and benefits of lifting the embargoes on the two care homes, in recognition of the improvements made, and in anticipation of the special measures being removed by CQC. Appendix 1 outlines the factors which were considered as part of the decision making process and risk analysis:

Based on the risk assessment, Adult Social Care and colleagues from Health determined that the benefits and advantages of lifting the embargo outweighed the risks.

In order to manage the risks imposed by moving a number of residents within a relatively short period, it was decided in partnership with the two nursing home providers to have graduated return to full service.

In addition a multi disciplinary team, consisting of a Consultant Psycho-Geriatrician, a GP, nursing staff and social workers would proactively monitor residents as they were transferred. This level of support is still currently in place

3. Outcome

Camberwell Green Nursing Home closed its doors at the beginning of the New Year. During the transfer period there were no safeguarding concerns raised relating to the move. The majority of residents and their families made the choice of Tower Bridge Care Home. Residents were moved where possible in batches to enable them to maintain friendship groups with staff who they were familiar with. The closure of the home and the transfer of 40 residents went relatively smoothly. During this period Health and Social Care staff worked closely with residents and their families to make the transition as stress-free as possible.

HC-1 kept its promise not to close the home until every resident had found a placement of choice. The last resident in the home was gravely ill and in receipt of end of life care. HC-1 kept the home open and staffed for the final few days of this person's life. The family described their relative's last days as peaceful and the staff as supportive.

The majority of Camberwell Green residents moved to Tower Bridge and have successfully settled in to their new environment. Many residents and their relatives have described the move as positive and are pleased with the new location. The manager of Tower Bridge is actively overseeing the care of the new residents and inducting staff who have transferred across from Camberwell Green. Care plans are being revised and regular spot-checks on care practice and administration are undertaken.

Appendix: 1

Removal of Embargo - Risk Analysis –

Possible Risks

- Both Homes are in special measures and it is not possible to predict if the improvements in care will be sustainable in the long term;
- The Local authority may lose leverage in ensuring that the management of the care home make all necessary improvements once the embargo is lifted;
- Removing the embargos whilst the home is under special measures may have a reputational risk for the Council if the care home does not continue to make all necessary Improvement or standards fall once again;
- Clinical risk if the care home is not capable of caring for the influx of residents transferred from Camberwell Green:

Possible Benefits

- Southwark is at risk of losing all nursing home provision in the borough, unless local nursing homes were supported in their efforts to provide a service;
- There is more control and scrutiny over local placements;
- Some of residents of Camberwell Green were so frail that it would have been detrimental to their health if they were transferred outside of the borough;
- The medical treatment of some of these residents would be interrupted by a transfer out of borough and to other medical teams;
- Family and friends would find it difficult to maintain regular contact if their relatives are placed outside of borough. Relatives are the primary advocates for residents and play a key role in monitoring their care;
- Some of the relatives of Camberwell Green residents are themselves elderly and would find it difficult to visit homes at a distance from the borough;
- The relatives of residents placed out of borough could challenge the Council under the Mental Capacity Act or the Human Rights Act.
- It is more costly in social work time to support and review residents in out of borough placements;
- Fees are higher outside of the borough and the quality of service more difficult to monitor at a distance;
- Staff at Camberwell Green could be transferred to work at Tower Bridge Care Home, reducing dependency on agency staff;
- It would support the retention of qualified nursing staff employed in the borough;
- Tower Bridge care home would be able to maintain staff resident relationships if the current residents of Camberwell Green were able to move there;
- Would potentially reduce the anxieties of Camberwell Green residents and their families if the embargoes were lifted;
- Relatives spoke highly of staff and the care delivered in Burgess Park and Tower Bridge Care Homes.

**Healthy Communities Scrutiny Sub-Committee
Workplan 2015/16**

7 July 2015

1. Review 1: Personalisation: Making Southwark Personal

- What is the Council's vision for personal budgets?
- What are the options for service delivery and how robust is the safeguarding of individuals?
- Are service users satisfied with the way personalisation is being introduced?
- What recommendations would we make to make the journey for end-users easier?
 - Community Action Southwark (CAS)
 - Healthwatch
 - David Quirke – Thornton /Jay Strickland (Strategic Director/ Director adult social care)
 - Richmond Update
 - Cllr Stephanie Cryan – cabinet lead

Care Opinion to be promoted over the summer to gain insight. Findings to be circulated in advance and fed into final report.

2. Agree workplan

7 October 2015

1. Review 1: Sign off Personalisation Review

2. 'Our Healthier South East London': An update from the Clinical Commissioning Group (CCG)

3. Review 2: Care in our community

- How are we delivering on the Care Home Improvement Strategy?
- How are we delivering on the Southwark Ethical Care Charter?
- What is our approach to Home care and reablement?
- What further things should we be doing as a Council to support care in our community?
 - Council officer & Cabinet lead
 - CQC

- CCG
- Lay inspectors

17 November 2015

1. Review 2: Care in our community

- How are we delivering on the Care Home Improvement Strategy?
- How are we delivering on the Southwark Ethical Care Charter?
- What is our approach to Home care and reablement?
- What further things should we be doing as a Council to support care in our community?

** this session will be conducted as a roundtable

10th February *report deadline 1 Feb*

- 1. Cabinet Member interview 1: Cllr Stephanie Cryan - Cabinet Member for Adult Care and Financial Inclusion**
- 2. Cabinet Member Interview 2 : Cllr Barrie Hargrove - Cabinet Member for Public Health, Parks and Leisure**
- 3. Partnership Merger: GP Practices North of the Borough**
- 4. Review 3: Progress report: Health of the Borough Report**
- 5. Draft scrutiny review: Time to Care: A future vision of care in Southwark**

2 March 2016 - report deadline 22 February

1. Review 3: Sign off Progress on Health of the Borough Report

2. ~~Update BME mental health report~~

3. **Review 4: Joint Mental Health Strategy: A joined up approach?**

- Does the mental health strategy set out a convincing enough case for a joined-up approach to mental health in Southwark?
- What more do we need to do to ensure a joined up approach to mental health?
- What recommendations can we make to the Council and CCG as they develop the mental health strategy?

A) Report & presentation on draft strategy

Council : Strategic Director, David Quirke Thornton & Cabinet Lead,
Councillor Stephanie Cyran,

CCG : Andrew Bland (CCG)

B) Roundtable

- CAS
- Healthwatch
- South London & Maudsely (SLaM)
- Current Contract Provider
- MIND
- Other mental health charities/organisations
- Patient Opinion
- Guys & St Thomas Hospital Foundation Trust
- Kings Hospital Foundation Trust
- Centre for Mental Health

22 March 2015 report deadline 14 March

1. *Review 4: Sign off Mental Health strategy review for 4 April OSC (12 April Cabinet)*
2. ~~Annual Safeguarding Report~~
3. **London Ambulance Service TBC**
4. **Hospital Quality Accounts**
5. **Hospital mortality and morbidity statistics.**
 - hospital ward staff turnover and levels of ward staffing
 - Scrutinise hospital mortality and morbidity statistics.
 - Scrutinise hospital ward staff turnover and levels of ward staffing
 - Receive and consider Serious Incident Reports, including analysis of root causes.

OR

JHOSC SlaM Place of Safety

Proposal for centralised place of safety -

South London and Maudsley NHS Foundation Trust

February 2016

Briefing note for Southwark Overview and Scrutiny Committee

Summary

The purpose of this briefing note is to provide an update on proposals to change the current service model of place of safety provision within the Trust from four separate to one central place of safety. A trigger template is included for your consideration.

Context

A number of people are brought to hospital under Section 136 of the Mental Health Act (MHA). This is a power that police officers can use if someone is in a public place and the police have concerns about them. Across the Trust we have four Place of Safety or 136 Suites, where people can be brought, assessed and cared for.

The Trust currently has four suites, one located at each of our four hospital sites. Following an assessment in one of these suites, by a doctor and an interview with an Approved Mental Health Professional (AMHP), the person can either be discharged with or without referral for further mental health support, or admitted for further treatment.

The Mental Health Crisis Care Concordat published in February 2014 commits all local agencies to improving the services people with mental health problems receive when in crisis. A commitment has been made through the London wide Mental Health Partnership Board by all London mental health trusts and the Metropolitan Police to end all detentions under Section 136 in police custody.

Reasons for change

The current provision of four places of safety is inadequate and the Trust has had difficulty maintaining the availability of places of safety, resulting in the suites being closed regularly. During the period January 2015 through to August 2015, the Trust was unable to provide any place of safety to the Police on 40 occasions.

The largest single factor which has led to closures has been the availability of staff. With no dedicated staffing team, staff are drawn from other wards on the site to assist the place of safety. Where this is not possible due to staffing availability or levels of activity, the place of safety suite is closed. Other reasons for closing suites include where there is high demand and suites become occupied, or the length of stay of people in the suites.

Where suites are closed, those detained under S136 have no immediate access to an assessment suite and may result in long delays in police vehicles or ambulances whilst awaiting a suite to become vacant, or on occasion re-direction to Emergency Departments.

It is widely acknowledged that people in crisis are best supported in a health based facility to minimise their distress and to support safe practice and it is now considered unacceptable for a person in an acute mental health crisis to be detained in a police station.

The proposal

The proposal outlined in the attached trigger template is for the development of a central, fully resourced and purpose built place of safety. The aim of the proposed model is to ensure that an assessment facility is always available 24/7; that assessment is carried out speedily and by a team with specific expertise in the field and that the environment in which people are received is modern, welcoming and fit for purpose for all ages including children and young people. The Trust would wish to have the centralised suite ready by 1 April 2016.

Communications of changes to patients and key stakeholders and equality impact assessment

The Trust is engaging with the police, local authorities, commissioner and other stakeholders on these proposals. Our assessment is that these changes will mark a significant improvement to the current provision and improve the current pathway for patients. We have completed an equality impact assessment which demonstrated that there is no adverse impact anticipated by this proposal for people from any of the 9 protected characteristics.

Catherine Gormally, Director of Social Care
Zoe Reed, Director of Organisation and Community

TRIGGER TEMPLATE

NHS Trust or body & lead officer contacts:	Commissioners e.g. CCG, NHS England, or partnership. Please name all that are relevant, explain the respective responsibilities and provide officer contacts:
Kristin Dominy Chief Operating Officer South London and Maudsley NHS Foundation Trust	Croydon, Lambeth, Lewisham and Southwark CCGs and Local Authorities

Trigger	Please comment as applicable
1 Reasons for the change & scale of change	
What change is being proposed?	The development of a central, fully resourced and purpose built modern Place of Safety for the reception and assessment of those detained by the Police under Section 136 of the Mental Health Act 1983, across Lambeth, Southwark, Lewisham and Croydon. The new Central Place of Safety would have capacity to assess up to six people at any one time in an environment suitable for people of all ages and levels of distress.
Why is this being proposed?	<p>The current provision of four places of safety is inadequate in terms of the number of assessment facilities provided. There is currently no dedicated staff team to provide the service – staff are drawn from wards to which the four suites are attached. This can lead to closures of suites meaning those detained under S136 have no immediate access to an assessment suite and may result in long delays in police vehicles or ambulances whilst awaiting a suite to become vacant, or on occasion re-direction to Emergency Departments. This is unacceptable practice. Access to physical health assessment is limited and the environments in which the assessments take place are not for purpose in most of the existing locations.</p> <p>In summary the current model of service provision is not sustainable in terms of timely accessibility for assessment, safety and service user experience.</p>

	<p>The main aims of the proposal are to ensure that an assessment facility is always available 24/7; that assessment is carried out speedily and by a team with specific expertise in the field and that the environment in which people are received is modern, welcoming and fit for purpose for all ages.</p>
<p>What is the scale of the change? Please provide a simple budget indicating the size of the current investment in the service, and any anticipated changes to the amount being spent.</p>	<p>The annual revenue costs of the new central place of safety will be approximately £1.65 million pa, which is an increase of approximately £800k pa on the existing costs.</p>
<p>How you planning to consult on this? (please briefly describe what stakeholders you will be engaging with and how) . If you have already carried out consultation please specify what you have done.</p>	<p>The Trust's Director of Social Care and Head of Crisis Services have met with the four DASSs in each of the four boroughs. Meetings have been held with the social care leads and head of AMHP services in each of the boroughs and the details of the proposal have so far been discussed at the Lambeth Social Services Leadership Group and the Southwark Adults and Children's Board. It is planned to replicate these discussions in Croydon and Lewisham.</p> <p>Discussions have already taken place with the Police Mental Health Liaison officers for each of the four boroughs and the proposal is on the agenda for the forthcoming Trust Police Liaison Committee.</p> <p>An audit of the experiences of approximately 100 service users who have been detained under Section 136 has been conducted and the findings used to inform the development of the central place of safety and its operational procedures.</p> <p>The proposal is also for discussion at the Psychological Medicine Advisory Group on 17 February which is the formal process of discussing service developments in crisis services with user and carer representatives. Service users have been part of the steering group overseeing the development of the proposal.</p> <p>Further engagement is planned with the Healthwatch and relevant local VCS in all 4 Boroughs as well as Trust internal service user groups.</p>

2 Are changes proposed to the accessibility to services?

Briefly describe:

Changes in opening times for a service	There will be no changes in opening times – this is a 24/7 service.
Withdrawal of in-patient, out-patient, day patient or diagnostic facilities for one or more speciality from the same location	There is no withdrawal of service proposed.
Relocating an existing service	The place of safety assessment function for Lambeth, Lewisham and Croydon will be relocated to the Maudsley Hospital. There are no changes of location for Southwark residents.
Changing methods of accessing a service such as the appointment system etc.	The main improvement in this area will be the ability to access the facility, rapidly at all times.
Impact on health inequalities across all the nine protected characteristics - reduced or improved access to all sections of the community e.g. older people; people with learning difficulties/physical and sensory disabilities/mental health needs; black and ethnic minority communities; lone parents. Has an Equality Impact Statement been done?	<p>The central place of safety will have a range of assessment rooms within the same facility. A separate assessment room with adjacent sitting room will be available for those under 18 and their carers. This will also be available for older adults or for those who may have special needs (e.g. those with learning disabilities) who may benefit from a quieter, less stimulating environment.</p> <p>The new facility will be fully accessible for those with disabilities including wheelchairs or mobility aids. There is also a DDA compliant toilet facility. At present, two of the suites are not DDA compliant.</p> <p>There will be no impact on others with protected characteristics; and EIA has been carried out.</p>
3 What patients will be affected? (please provide numerical data)	
Briefly describe:	
Changes that affect a local or the whole population, or a particular area in the borough.	There are approximately 75-80 people per month detained under Section 136 across the four boroughs. On average 18-20 people per month from each borough. The development of the central place of safety would mean that up to 60 people per month would be accessing the central place of safety from boroughs other than Southwark.
Changes that affect a group of patients accessing a specialised service	None
Changes that affect particular communities or groups	None

4 Are changes proposed to the methods of service delivery? Briefly describe:	
Moving a service into a community setting rather than being hospital based or vice versa	No
Delivering care using new technology	No
Reorganising services at a strategic level	The main change is the relocation of the service currently provided in three hospital (or borough) locations to join the service already provided on the Maudsley site.
Is this subject to a procurement exercise that could lead to commissioning outside of the NHS?	No
5 What impact is foreseeable on the wider community? Briefly describe:	
Impact on other services (e.g. children's / adult social care)	The proposal will have an impact on local authority partners, on current AMHP duty arrangements and local authority duties under S13 of the Mental Health Act. Initial discussions have taken place with each local authority borough and the potential impact and possible options to mitigate the impact have been scoped out by the Director of Social Care in the Trust.
What is the potential impact on the financial sustainability of other providers and the wider health and social care system?	The proposal could have an impact on the statutory responsibilities of Southwark Local Authority for assessing those presenting under Section 136 due to the place of safety being located within the borough of Southwark. Work has already commenced with the DASSs in each of the boroughs to develop a legal and workable arrangement for the provision of AMHP services from other boroughs to the place of safety, thus not increasing the workload or increasing the demand on Southwark services.
6 What are the planned timetables & timescales and how far has the proposal progressed?	
What is the planned timetable for the decision making	The Mental Health Crisis Care Concordat published in February 2014 commits all local agencies to improving the services people with mental health problems receive when in a crisis. A commitment has been made by the London wide Mental Health Partnership Board to end all detentions under Section 136 in police custody. To enable us to resource this commitment the proposed creation of a central POS is essential. The Trust Board will make the final decision on implementation at it's

	March meeting in the light of the results of the consultation process.
What stage is the proposal at?	<p>The Trust has considered options on how it could provide an improved place of service facility and is of the view that a central place of safety is the preferred option and the only option which enables a safe, reliable service to be offered with an improved access and experience for service users.</p> <p>Consultation is still ongoing and the findings from that exercise will be reported to the Board in March.</p>
What is the planned timescale for the change(s)	The Trust aims to have the change implemented by 1 April 2016
7 Substantial variation/development	Briefly explain
Do you consider the change a substantial variation / development?	Yes
Have you contacted any other local authority OSCs about this proposal?	Yes we propose to discuss it with all of them

HEALTHY COMMUNITIES SCRUTINY SUB-COMMITTEE MUNICIPAL YEAR 2015-16

AGENDA DISTRIBUTION LIST (OPEN)

NOTE: Original held by Scrutiny Team; all amendments/queries to Julie Timbrell Tel: 020 7525 0514

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Councillor David Noakes (Vice-Chair)	1	Andrew Bland, Chief Officer, Southwark CCG	1
Councillor Jasmine Ali	1	Malcolm Hines, Southwark CCG	1
Councillor Paul Fleming	1	Dr Ruth Wallis, Public Health Director	1
Councillor Maria Linforth-Hall	1	Jin Lim , Public Health Assistant Director	1
Councillor Lucas Green	1	Jay Stickland , Director Adult Social Care	1
Councillor Bill Williams	1	Rachel Flagg, Principal Strategy Officer	1
		Shelley Burke, Head of Overview & Scrutiny	1
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Jo Kent, SLAM, Locality Manager, SLaM	1	Niko Baar, Liberal Democrat Political Assistant	1
Zoe Reed, Director of Organisation & Community, SLaM	1	Julie Timbrell, Scrutiny Team SPARES	10
Marian Ridley & Jackie Parrott Guy's & St Thomas' NHS FT	1		
Lord Kerslake, Chair, KCH Hospital NHS Trust	1		
Julie Gifford, Prog. Manager External Partnerships, GSTT	1	External	1
Geraldine Malone, Guy's & St Thomas's	1	Rick Henderson, Independent Advocacy Service	1
Jessica Bush, Head of Engagement and Patient Experience King's College Hospital KCH FT	1	Tom White, Southwark Pensioners' Action Group	1
		Fiona Subotsky, Healthwatch Southwark	1
		Sec-Chan Hoong, Healthwatch Southwark	1
		Kenneth Hoole, East Dulwich Society	
		Elizabeth Rylance-Watson	
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Councillor Helen Dennis			
Councillor Jon Hartley			
Councillor Eliza Mann			
Councillor Johnson Situ			