

Joint Health Overview and Scrutiny Committee (JHOSC) on Lambeth Hospital Redevelopment

Thursday 28 January 2021
6.00 pm
Lambeth will host Online via MS Teams

Membership

Cllr Joshua Lindsey
Councillor Maria Linforth-Hall
Councillor Nanda Manley-Browne
Cllr Marianna Masters
Councillor Victoria Olisa
Councillor Charlie Smith

Reserves

Councillor Darren Merrill
Councillor David Noakes

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Contact Julie Timbrell on 020 7525 0514 or email: julie.timbrell@southwark.gov.uk or contact Christian Scade on CScade@lambeth.gov.uk

Members of the committee are summoned to attend this meeting

Eleanor Kelly

Chief Executive

Date: 20 January 2021



Joint Health Overview and Scrutiny Committee (JHOSC) on Lambeth Hospital Redevelopment

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Date: 20 January 2021

**JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE (JHOSC) ON
LAMBETH HOSPITAL REDEVELOPMENT****Tuesday 30 June 2020 at 6.00 pm****MINUTES**

PRESENT: Councillor Joshua Lindsey, Councillor Maria Linforth-Hall, Councillor Nanda Manley-Browne, Councillor Marianna Masters and Councillor Charlie Smith

APOLOGIES: Councillor Victoria Olisa

1. APOLOGIES

Apologies for absence were received from Councillor Victoria Olisa and apologies for lateness were received from Councillor Maria Linforth-Hall.

2. DECLARATIONS OF PECUNIARY INTEREST

There were none.

3. MINUTES OF PREVIOUS MEETING

RESOLVED that the minutes of the meeting held on 28 May 2020 be approved as a correct record of proceedings.

4. CONSULTATION FEEDBACK / RECOMMENDATIONS FROM THE LAMBETH TOGETHER STRATEGIC BOARD

The Chair welcomed everyone to the meeting, including representatives from South London and Maudsley NHS Foundation Trust (SLaM), Lambeth Council, Southwark Council, NHS South East London CCG, Southwark Healthwatch, London Communications, and service user consultants.

Andrew Eyres, Strategic Director, Health and Care, Lambeth Council and CCG, informed the Committee that a presentation, concerning the reconfiguration of Lambeth Hospital mental health services, had been published with the agenda. This covered a range of issues in relation to consultation feedback and recommendations, including: the scope of the consultation; feedback and key metrics; feedback themes and recommendations; the decision making process; and further considerations arising from the consultation.

Jane Bowie, Director of Integrated Commissioning, Lambeth Council, highlighted that an independent consultation feedback report had been published via a supplementary agenda. In response to questions, David Orekoya, Assistant Director, Integrated Commissioning: Mental Health, Lambeth Council, provided further information on the consultation process, the methodology, the approach to the analysis and key findings from the independent report.

During the discussion the Chair invited service user consultants to provide feedback on their experiences. It was recognised that any relocation would lead to a significant improvement in the quality of the environment and therefore an improved service user experience. However, it was

also noted, as set out via the supplementary agenda, that there were concerns about not being able to access services within their own borough.

The Committee was asked to note key themes arising from the consultation feedback and recommendations relating to each thematic group, set out via the agenda. A wide range of issues were considered in relation to: Alternative options; Travel and access to the Maudsley; Reputation and familiarity; The Maudsley Hospital site; Clinical pathways; Clinical and non-clinical support services; and the future of the Lambeth Hospital site.

Adrian McLachlan, GP and Governing Body Member NHS South East London CCG, clinical lead for Lambeth Living Well Network Alliance provided an update on decision making following the Lambeth Together Strategic Board meeting held on 17 June. The following points were noted:

- The Strategic Board had reflected on the feedback and appraisals provided and was asked to support the proposed recommendations to be included in the Decision-Making Business Case for presentation to South East London CCG. The Strategic Board was also asked to provide their support to an overarching recommendation that South East London CCG approve the preferred option as described in the pre-consultation business case.
- The Strategic Board welcomed the consultation and proposals but had been unable to make a recommendation at that point since it was noted Black Thrive had sought further information on involvement from the BAME community. As a result, the Strategic Board agreed that further assurance be addressed on this issue in advance of a final recommendation to the South East London CCG Governing Body.

It was explained that the proposed recommendation remained Option 2 – to relocate four acute wards and the Psychiatric Intensive Care Unit to the Maudsley site. However, following the Strategic Board the CCG had engaged further with Black Thrive to understand the issues that had been raised and to provide clarification on the engagement process undertaken. Neil Robertson, (Interim) Chief Operating Officer, SlaM, highlighted that these meetings, together with the independent analysis of the consultation, had reassured Black Thrive who had since confirmed they were happy to proceed to the next stage. In response to questions it was noted that a formal decision was expected from South East London CCG on 16 July.

The Committee noted that the focus of the public consultation was the suitability of relocating services for Lambeth's patients to a site outside of the borough. There were, however, a number of issues raised for Southwark. The Committee was disappointed at the inadequate response to the consultation and suggested that: the process of engagement in Southwark be continued; and that plans be put in place, with a clear timeframe for action, to address issues raised in relation to concerns about (i) there not being enough inpatient capacity available for Southwark service users and (ii) possible financial implications for Southwark.

RESOLVED:

That the proposal to relocate four acute wards and the Psychiatric Intensive Care Unit (PICU) from Lambeth Hospital to the Maudsley site be supported, subject to the following clarifications and recommendations:

- a. That clarification be provided by the NEL Healthcare Consulting Team to confirm the exact number of respondents, and percentage of survey responses, from Lambeth and Southwark.
- b. That steps be taken, with a clear timeframe for action, to monitor and proactively address the following concerns raised by stakeholders during the consultation:

Stakeholders	Concerns / Action Required
Service users and carers	There were concerns about no longer being able to access services within their own borough. Carers identified strong concerns about the increased travel times to visit loved ones.
Black and Minority Groups	Particular challenges for this group centred around concerns over being close to a busy road and hospital. The increased noise and activity were not felt to be conducive for recovery. There was a desire to see a discrete entrance to the building as this group expressed stigma and shame around accessing mental health services. Please include information to reassure this group in the 'Welcome Pack'.
Staff	It was noted that the potential relocation of services could mean an increase in commuting time for some staff. Please monitor this by further consultation with staff and report back on the reality of commuting and whether this objection has been handled. Staff commented that the Maudsley Hospital site already feels quite full and there were concerns over available clinical and non-clinical space to ensure a high-quality service for patients, as well as ensuring staff have appropriate working spaces. Please include details in 'Welcome Pack'.
Lambeth residents	Primary concerns were about the future use of the site (both moving away from NHS use and what it would be used for) and retaining services within Lambeth. Please integrate this information in the 'Welcome Pack'. Travel concerns featured heavily amongst residents with reference being made to additional costs. Please clearly give most cost-effective directions in the welcome pack and address with ongoing engagement measures.
Southwark residents	A need to reinforce the message, through ongoing engagement, that there would be no reduction in Southwark Services as a result of the service change for Lambeth
Members of the public	Members of the public, alongside Lambeth residents, were most concerned with the future use of the site (both moving away from NHS use and what it would be used for) and retaining services within Lambeth. Ongoing engagement needed to address concerns.

- c. That a detailed action plan, with clear timeframe, be developed should the decision making business case be approved, to address each of the key themes arising from the consultation, and that this be reviewed by the JHOSC 6 months (approx.) after a decision is made by SEL CCG:

Thematic Group	Themes to be addressed
Alternate plans	The JHOSC did not raise any issues concerning alternate arrangements to the recommended redevelopment at the Maudsley but agreed a clear communications plan was required to allay concerns as part of the next steps in the project.

Travel and access to the Maudsley	<p>The predominant feedback related to travel from a minority of postcodes in areas near Streatham and Norwood who were concerned that they may be adversely affected by the proposed move to the Maudsley. Further analysis should be undertaken as to the historic and projected demand relating to access to inpatient services to test the likely frequency of impact in advance of looking at remedial measures. Where the issue is deemed to be significant then further actions should be taken to look at potential changes to the current transport options with providers.</p>
Reputation and familiarity	<p>Within the consultation responses concern was raised as to the reputation of the Maudsley Hospital and unfamiliarity with the local area which might deter those service users and carers from accessing services.</p> <p>The JHOSC agreed that the Trust should develop a welcome pack for all wards offering simple induction materials such as how to find and access the on-site facilities and also, where the care plan allows, how to access those services more broadly such as local shops, community groups, third sector support organisations and spaces such as Ruskin Park.</p> <p>It is recommended that as part of the transitional process from Lambeth inpatient wards to those at the Maudsley that current service users are allowed a period of familiarisation in the new environment and introduction to the local area before they move to the new accommodation.</p>
The Maudsley Hospital	<p>The predominance of feedback was based on the perceptions that the Maudsley Hospital site was too dense for the development of another ward block to be reasonable. Further to this there was a feeling that there was insufficient green space available on the site relative to that at the Lambeth Hospital site. It was agreed that information should continue to be provided on the green space potential during the continued process of engagement.</p>
Clinical Pathways	<p>It was noted that the predominance of responses relating the clinical models and pathways focussed on ensuring that the service model provided on the wards was refreshed to be appropriate for the case mix and demographic mix of service users frequenting the services. Members of the JHOSC were encouraged by the proactive steps that had already been piloted at Lambeth Hospital which included a voluntary community service in reach offer to people receiving inpatient care. It was noted that Mosaic and Thames Reach had been providing regular inreach to the wards, which included meaningful activity in the care setting, supporting people with leave from the ward and connecting people with local community offers. It was agreed that the next scrutiny report (in 6 months time) should provide detail on progress in expanding this to the new services opened. Members were also impressed at the important work being carried out to developing cultural appropriate future models of care and care pathways that were cognisant of the high level of representation of the black community within the ward setting at Lambeth. It was noted that SLAM would be working with Black Thrive to engage with the black community to set a best standard offer for culturally appropriate inpatient care, with testing and learning built into it. The JHOSC requested more details on this with a clear timeframe for action.</p>

The Future use of Lambeth Hospital	<p>Like the respondents to the consultation the JHOSC raised concerns relating to the future of the Lambeth Hospital site which focused around the loss of its use for NHS services and apprehension of what the site may be used for in the future. Members requested more detail regarding the commercial aspect and made the following suggestions:</p> <ul style="list-style-type: none"> • SLaM should hold a detailed and robust planning consultation on the future of the site with a range of stakeholders covering local residents, the local authority, Lambeth Together and other representative groups to ensure a broad range of views could be taken into account about what the local area would benefit from when looking at the future development of the site. • A scheme for the Trust and partners to develop approximately 575 homes, of which 50% would be classed as affordable, would have a significant benefit to the public and also importantly to key workers within SLaM and other local organisations who have a real issue with recruitment and retention given the high cost of living in the area. • Clarification concerning the definition of 'affordable' and requested detailed information on the mix of affordable units with a breakdown of units subject to: Affordable rent; Shared ownership; and Discounted market sale price for those that met S106 key worker requirements. <p>It was also agreed that further assurances were needed to ensure that there was an effective mix of risk and reward given that there were a number of options being evaluated as to whether the site should be sold for a fixed fee or whether elements of the site were retained from which the NHS could continue to benefit from future income from the site. Members of the JHOSC highlighted the Treasury / DHSC/ NHSE / NHSI needed to develop a business case to evaluate the most effective route to take.</p>
Clinical and non-clinical support services	<p>Feedback in this area focussed on several key clinical and non-clinical support services and concerns over where their future locations may be should the Lambeth Hospital site be closed. Specific services mentioned included: Home Treatment Team; Pharmacy; Community Services / Outpatients; Library; and Training Suites. As set out in the presentation the JHOSC wanted to ensure a full business case for all clinical and non-clinical support services was included as supporting information to the main investment objectives so that there was clarity as to the future position of these services.</p>
Southwark concerns	<p>The Committee was disappointed at the inadequate response to the consultation and suggested that: the process of engagement in Southwark be continued; and that plans be put in place, with a clear timeframe for action, to address issues raised in relation to concerns about (i) there not being enough inpatient capacity available for Southwark service users and (ii) possible financial implications for Southwark.</p>

CLOSE OF MEETING

The meeting ended at 8.30 pm

CHAIR

Date of Despatch: 15 July 2020

Contact for Enquiries: Christian Scade

Tel: 020 7926 0045

E-mail: cscade@lambeth.gov.uk

Web: www.lambeth.gov.uk

Improving Inpatient Mental Health Services for Lambeth

DSC Session 5: progress update – January 2021

Agenda Item 4



Purpose of today's session

To update on the progress of the overall programme since the last JHOSC meeting in June 2020

To provide an update as requested on the progress against the action plan developed in response to the JHOSC recommendations

The drivers for change remain compelling

The changes are driven by the critical need to improve the quality and safety of our inpatient wards to meet the most basic needs of our patients

This was reflected in the clear support for the proposed changes coming out of the public consultation

It was also strongly supported at a system level and approved in July 2020 by the SEL CCG Governing Body

Redeveloping Lambeth Hospital meets local, council and London-wide needs for more homes, with significant affordable housing, and helps fund better facilities and services for local people

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An architectural rendering of a modern building with a courtyard. The building is a multi-story structure with a light-colored, textured facade and large windows. It features a prominent glass-enclosed section on the left side. The courtyard in the foreground is paved with light-colored gravel and contains several trees and people walking. A wooden fence is visible on the left side of the courtyard. The overall scene is bright and clear.

Programme update

Programme update

Build

Guaranteed Maximum Price agreed
Stage 4 of the contract signed
Construction of the building has started (not just ground works)
Go live date is estimated to be the beginning of 2023

Operations

Draft operational policy completed
APSA and Culturally Appropriate Inpatient Care Model steering group commenced
Enablers working group commenced (digital, portering, hotel services, security etc)
Decant planning group commenced

Stakeholders

Communication and engagement team appointed
Additional governance introduced to support engagement
Communication and engagement plans drafted and under implementation for:

- Service users and carers
- Staff
- External stakeholders

An architectural rendering of a modern, multi-story building with a light-colored stone or brick facade and large glass windows. The building is situated around a central courtyard with a gravel path, green lawn, and several trees. People are shown walking on the path, suggesting a pedestrian-friendly environment. The overall scene is presented in a semi-transparent, faded style.

Progress on JHOSC recommendations

OSC recommendations: overview

The JHOSC meeting in June 2020 made 15 recommendations across the Themes from the public consultation feedback – these spanned actions required immediately as well as throughout the course of the programme

An action plan has been jointly developed to deliver the recommendations, with progress overseen monthly by a new Lambeth and Southwark Hospitals Oversight Group jointly chaired by SLaM and the NHS South East London CCG Southwark and Lambeth borough teams

Other governance has been put into place to strengthen engagement in both Lambeth and Southwark, and across boroughs, including: Estate Development Sub Groups for both boroughs, and a Lambeth and Southwark Communications and Engagement Steering Group

Overall good progress has been made to date across the immediate actions, and planning work is underway for those which come later in the programme

OSC recommendations: overview

The 15 recommendations made by the JHOSC in June 2020 were:

Theme	Recommendation
Interim Plans	1. A clear communications plan required to allay concerns as part of the next steps in the project
Level and access to Maudsley	2. Further analysis should be undertaken as to the historic and projected demand relating to access to inpatient services to test the likely frequency of impact in advance of looking at remedial measures
	3. Where the issue is deemed to be significant then further actions should be taken to look at potential changes to the current transport options with providers.
Reputation and Familiarity	4. The Trust should develop a welcome pack for all wards offering simple induction materials
	5. As part of the transitional process from Lambeth inpatient wards to those at the Maudsley, current service users are allowed a period of familiarisation in the new environment and introduction to the local area before they move to the new accommodation
The Maudsley Hospital	6. Information should continue to be provided on the green space potential during the continued process of engagement

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OSC recommendations

Name	Recommendation
Cultural Pathways	7. Mosaic and Thames Reach had been providing regular in-reach to the wards, which included meaningful activity in the care setting, supporting people with leave from the ward and connecting people with local community offers. Provide detail on progress in expanding this to the new services opened
	8. Further details on and timeframes for development and implementation of culturally appropriate inpatient care model with Black Thrive
Future of Lambeth Hospital	9. More detail required on commercial aspect
	10. SLAM should hold a detailed and robust planning consultation on the future of the site
	11. A scheme for the Trust and partners to develop approximately 575 homes, of which 50% would be classed as affordable, would have a significant benefit
	12. Clarification concerning the definition of 'affordable' and requested detailed information on the mix of affordable units with a breakdown of units subject to: Affordable rent; Shared ownership; and Discounted market sale price for those that met S106 key worker requirements.
	13. Further assurances were needed to ensure that there was an effective mix of risk and reward given that there were a number of options being evaluated

OSC recommendations

Theme	Recommendation
Clinical and non-clinical support services	14. Ensure a full business case for all clinical and non-clinical support services was included as supporting information to the main investment objectives so that there was clarity as to the future position of these services
Further assurance	15. Additional assurance around: (i) The process of engagement in Southwark (ii) Financial implications of the changes for local authorities (iii) Inpatient capacity for Southwark residents

Theme: Alternative plans

Recommendation

A clear communications plan required to allay concerns as part of the next steps in the project

Progress to date

A communications and engagement plan covering the Lambeth Hospital changes and the future of the Lambeth Hospital site, as well as capital projects on the Maudsley site has been developed, and implementation has started

The communications and engagement plan is overseen by the Lambeth and Southwark Hospital Oversight Group, which is jointly chaired by the NHS South East London CCG Southwark and Lambeth borough teams and SLaM Estates Development Sub Groups for both the Lambeth site and the Southwark site have been established.

In Lambeth this is co-chaired by the Director of Estates in SLaM and the Regeneration Director for Lambeth Council. In Southwark this is co-chaired by the Director of Estates in SLaM and the Estates Programme Director for South East London CCG, Southwark, with the Head of Regeneration for Southwark Council in attendance.

Membership for both includes local Healthwatch's and key stakeholders

SLaM have established a new communications teams for capital projects to support effective communication and engagement across its major capital projects

Communication with service users and carers is monthly through the separate Lambeth and Southwark service user and carer engagement groups. A service user and carer communications plan has been developed, and engagement opportunities around the programme (e.g. on design) will be publicized to both Southwark and Lambeth service users

Issue: Travel and access to the Maudsley

Recommendations

2: Further analysis should be undertaken as to the historic and projected demand relating to access to inpatient services to test the likely frequency of impact in advance of looking at remedial measures (this related to access from postcodes in Streatham and Norwood)

3. Where the issue is deemed to be significant then further actions should be taken to look at potential changes to the current transport options with providers.

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Progress to date

A demand and capacity analysis has been completed for Lambeth which has projected inpatient bed requirement across a ten year period. Remedial measures are factored into the Lambeth community transformation plans which are supported by transformation monies across 3 year period from 2021

Analysis is being undertaken to establish the level of demand for inpatient beds from Streatham and Norwood and this will be complete by March 2021

Once the analysis for R2 is complete, discussions will be undertaken with Transport for London as required to fulfil recommendation 3

As suggested by the JHOSC the welcome pack for the new Douglas Bennett House will include information on the most cost effective directions and transport options

1

eme: Travel and access to the Maudsley – continued

Work on Denmark Hill station has commenced to create a second entrance / exit to address the overcrowding on the station at peak hours:

- In collaboration with Sustrans and King's, SLaM will provide an 85-space cycle public storage facility, free to use
- Additional canopies, new customer information screens, more seating and upgraded PA systems will all encourage passengers to use the full length of platforms, easing crowding.
- When the walking route through the Maudsley Hospital reopens (in 2023), the new entrance will become the main route to King's College Hospital and our site. Local community and stakeholders have helped develop the plans.

Theme: Reputation and familiarity

Recommendations

The Trust should develop a welcome pack for all wards offering simple induction materials

As part of the transitional process from Lambeth inpatient wards to those at the Maudsley, current service users are given a period of familiarisation in the new environment and introduction to the local area before they move to the new accommodation

Progress to date

Douglas Bennett House is due to open in early 2023. The operational transitional planning will be completed by March 2022, and will include both the development of the welcome pack, and a clear plan for supporting current service users to familiarize themselves with the new environment and local area before the move

We will be using a variety of established service user and carer forums to develop the welcome pack. Related learning from the work on the culturally appropriate inpatient model will be used to support the development of the induction pack

A request was made during the consultation to provide a separate and discreet entrance due to concerns regarding stigma. We have recognized this concern and designed the entire environment externally including the entrance space with the clear aim of 'mainstreaming' the building into the overall public realm and aiming to destigmatize the experience.

Theme: The Maudsley Hospital

Recommendation

Information should continue to be provided on the green space potential during the continued process of engagement

Progress to date

A Southwark Estates Development Sub Group has been established to ensure effective engagement with stakeholders and local residents around the developments on the Maudsley Hospital site

This group meets bi-monthly and is jointly chaired by the Director of Estates and Facilities, SLaM and the Estates Programme Director for the NHS South East London Southwark borough team, and is attended by the Director of Regeneration for Southwark Council

Information provided to the meeting for discussion has included the overall master plan for the site which includes green space potential, and covers the three main developments on site: Douglas Bennett House, the Pears Maudsley Centre for Children and Young People and the redevelopment of the Michael Rutter Centre and Mapother House

Plans have also been presented to children and young people and their families/carers in a service user group with the architect and SLaM staff outlining plans and taking questions on a range of issues including including green spaces on the site

Theme: Clinical pathways

Recommendations

Mosaic and Thames Reach had been providing regular in-reach to the wards, which included meaningful activity in the care setting, supporting people with leave from the ward and connecting people with local community offers. Provide detail on progress in expanding this to the new services opened

Further details on and timeframes for development and implementation of culturally appropriate inpatient care model with Black Thrive

Progress to date

Recommendation 7:

The pilot project has been reviewed and agreement made, by the Alliance Management Team, to mainstream within the CLaSS team.

This means that the peer support roles that are part of the CLaSS team will be made substantive and permanent recruitment to the posts has begun

As part of the Lambeth adult community MH services transformation, over the next three years, there will be an increase in the peer workforce. These roles will play a pivotal role in supporting people to stay well within the community, reduce the need for inpatient admission and make a meaningful link back into the community for those who do require an inpatient stay.

Theme: Clinical pathways – continued

Recommendation 8:

SLaM and Black Thrive have agreed a Memorandum of Understanding to support the development and implementation of the culturally appropriate inpatient care model, and funding has been provided by SLaM. A Steering Group has been established to oversee the project, which is jointly chaired by the Director of Black Thrive and the Interim Chief Operating Officer for SLaM, and includes community membership. The goal is for the new model to have been tested and measured for a year before it is implemented in the new Douglas Bennett House. It will also then be rolled out as a Trust-wide approach.

The key phases of the project are as follows:

Phase	Timing	What	Lead
	Sept 20 to June 21	Engagement and co-design	Black Thrive
	June 21 to June 22	Testing, review, measurement of impact	Black Thrive and SLaM
	June 22 to Jan 23	Model refinement and Implementation	SLaM

Theme: Future of Lambeth Hospital

Recommendations

More detail required on commercial aspect

0: SLaM should hold a detailed and robust planning consultation on the future of the site

1: A scheme for the Trust and partners to develop approximately 575 homes, of which 50% would be classed as affordable, would have a significant benefit

2: Clarification concerning the definition of 'affordable' and requested detailed information on the mix of affordable units with a breakdown of units subject to: Affordable rent; Shared ownership; and Discounted market sale price for those that met S106 key worker requirements.

3: Further assurances were needed to ensure that there was an effective mix of risk and reward given that there were a number of options being evaluated

Progress to date

The Trust has undertaken an option appraisal of commercial approaches that would support its aim of taking a proactive role in the development and delivery of the housing developments to maximise value and control for the public good:

The assessment assessed a number of risk and control factors, including Trust risk exposure, implementation complexity, retained control and residual interest.

The preferred commercial arrangement is likely to be in the form of a partnership involving a developer and other partner/s through a Special Purpose Vehicle (SPV).

eme: Future of Lambeth Hospital – continued

the due diligence work that will clarify and apportion risk and finalise the detailed approach is being undertaken and is due to complete April 2021.

Formal market engagement will then be undertaken that may include a limited number of options with different risk and reward structures

0:

Planning application submitted in November 2020 to Lambeth Council following extensive pre-application planning consultations and public engagement events, including one led by Black Thrive. Stakeholders informed by email including all residents and community groups previously registering from the previous events, submitting responses to SLaM consultation and who have corresponded with SLaM, plus community groups, VCSE, MP, elected members and officers. Statutory consultation starts when live on Council website. Offer of meetings/responses to queries etc. to a Engagement with stakeholders continues.

11 to 13:

The proposed masterplan delivers 558 units, 305 will be private units and 253 will be affordable units, representing 50% affordable housing provision (in accordance with policy is by habitable rooms), with a 70:30 split of low-cost rental to intermediate tenure housing.

The affordable units are located in individual blocks but are spread across the scheme to promote cohesion between the various tenures. In response to feedback during preapplication consultation the family unit provision has been increased in the affordable units.

We have increased the number of three-bedroom properties to meet local families' needs. 77.5% of affordable homes will now comprise 2, 3 and 4-bed units. See table on next slide.

Theme: Future of Lambeth Hospital – continued

Private Housing					
Studio	1-bed	2-bed	3-bed	4-bed	Townhouse
19	129	152	2	-	3
6.2%	42.3%	49.8%	0.7%	-	1.0%

Affordable Housing					
Studio	1-bed	2-bed	3-bed	4-bed	Townhouse
6	51	149	37	6	4
2.4%	20.1%	58.9%	14.6%	2.4%	1.6%

Low Cost Rented					
Studio	1-bed	2-bed	3-bed	4-bed	Townhouse
0	23	102	36	6	3
0.0%	13.5%	60.0%	21.2%	3.5%	1.8%

Intermediate					
Studio	1-bed	2-bed	3-bed	4-bed	Townhouse
6	28	47	1	0	1
7.2%	33.7%	56.6%	1.2%	0.0%	1.2%

Table 1: Proposed Private and Affordable Unit Mix

Table 2: Proposed Low-Cost Rented Unit Mix

Table 3: Proposed Intermediate Unit Mix

Theme: Clinical and non—clinical support services

Recommendation

4: Ensure a full business case for all clinical and non-clinical support services was included as supporting information to the main investment objectives so that there was clarity as to the future position of these services

Progress to date

Enablers workstream has been set up and is meeting every fortnight with representatives from admin, hotel services, security, portering etc

All clinical and non clinical support services currently on the Lambeth Hospital site will continue and their future location is being mapped at present.

A digital workstream has been set up to begin planning and procuring digital systems to support the clinical systems for staff, service users and carers as well as the actual building

eme: Further assurance

Recommendations

5. Additional assurance around:

- The process of engagement in Southwark
- Financial implications of the changes for local authorities
- Inpatient capacity for Southwark residents

Progress to date

The process of engagement in Southwark

Governance fora have been established to strengthen engagement including the Lambeth and Southwark Hospital Oversight Group; Southwark Estates Development Sub Group; Lambeth and Southwark Communications and Engagement Steering Group to ensure ongoing communication with all partners.

Engagement with service users about the programme will be conducted primarily through existing structures with other engagement processes added as and when needed i.e. the Maudsley site meeting with the architects.

A briefing being arranged with Southwark Leader and Deputy and SLaM Chief Executive which will also consider how engagement can be best taken forward

Ongoing communication between SLaM Chief Executive and Council Chief Executive, as well as engagement with the Director of Regeneration at Southwark Council.

Southwark Estates Development Sub Group supports ongoing engagement on the development of the site as a whole

eme: Further assurance

Financial implications of the changes for local authorities

The development of a memorandum of understanding around Section 117 responsibility has moved at pace, led by the Director of Social Care for SLaM.

A draft S117 dashboard and register has been developed and implemented

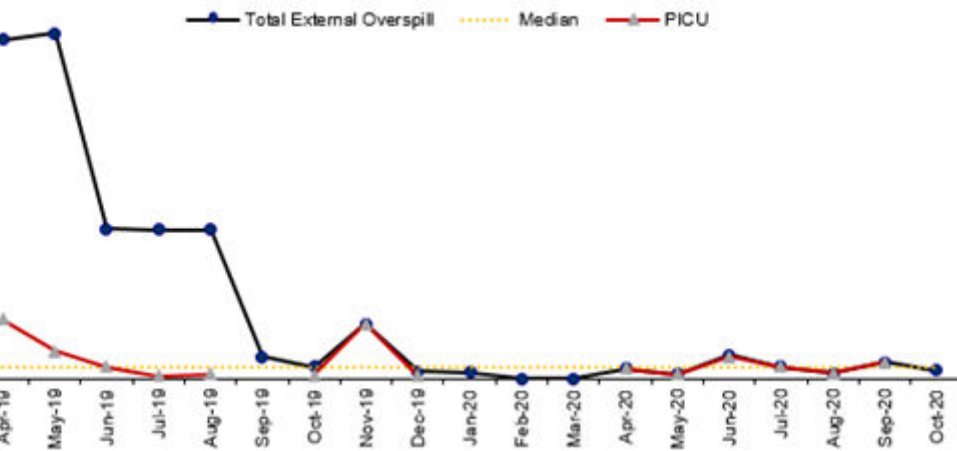
Engagement has taken place with Heads of Social Care and Directors of Adult Social Care (DASS's) across SLaM boroughs. The draft MOU was presented at the SEL and South west DASS's meeting on 10th November for their input and discussion

Next steps:

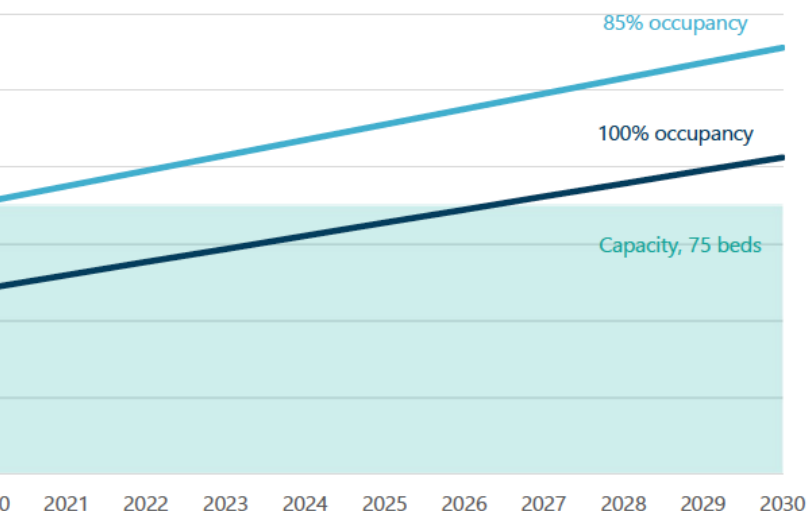
- Joint review and quality improvements on the implementation of jointly agreed SLAM and 4 Borough Section 117 Policy, and S117 register.
- Further engagement is being facilitated with Lambeth and Southwark Councils.

Theme: Further assurance

Southwark External Overspill OBDs per Month



Future demand for inpatient capacity



- The SLAM Right Care, Right Time programme has reduced the Trust’s reliance on external capacity to meet the needs of Southwark residents for inpatient care
- The Trust still uses a limited amount of independent sector capacity for psychiatric intensive care unit (PICU) beds for a small number of people with very complex needs although the use of this provision has reduced throughout 2019/20
- We are currently confident that we have sufficient inpatient capacity for Southwark residents in all but exceptional cases.
- The Trust’s modelling of future demand for inpatient capacity indicates that the existing Southwark capacity of 75 beds will continue to meet local needs until 2027
- However, increasing population pressures will mean that these beds will be above the occupancy rate of 85% that is considered optimal for managing peaks in demand
- We have a number of initiatives in place to manage demand in line with projected growth through to 2030. This includes working more closely with Primary Care Networks with partners to prevent inpatient admissions, strengthening our Home Treatment Team services and developing a range of step down and crisis housing options.

Summary

Since the last JHOSC in June 2020, significant progress has been made on the programme, including governance approval, financial sign off and the start of construction

The Trust and CCG/Local Authority welcomed the recommendations from the last JHOSC and an action plan has been developed and implemented to take these forward. This is jointly owned and overseen by SLaM and NHS South East London CCG Southwark and Lambeth borough teams.

Good initial progress has been made against the recommendations, particularly around the completion of the planning consultation; set up of the culturally appropriate inpatient care model project with Black Thrive; strengthening engagement; and work on the MOU for S117. Planning work is underway for the longer term actions. However we are continuing to manage the effect of COVID and additional surges, which means timing within the plan may need to flex accordingly for some actions, though stay within the overall timing of the programme