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**LEWISHAM PEOPLE’S PARTNERSHIP**

**Agenda for the meeting to be held on 23rd**

**April 2024 from 10.00am to 12 noon at the Civic Suite, Catford Road, London SE6 9SE.**

**(Online and face to face meeting)**

**AGENDA**

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| **Time** | **Activity** |

**09.45am - 10.00am Arrivals**

**10.00am - 10.15am What voices do we have at this meeting?**

**10.15am - 10.30am Presentation – Lewisham People’s Partnership - Year 1 Review – Draft (attached)**

**10.30am - 10.50am Discussion on the Review - What has gone well, challenges and what we learnt about how to engage**

**10.50am - 11.05am Break**

**11.05am - 11.50am Discussion on the Review – Ideas for how we can we build on the successes and address the challenges**

**11.50am - 12 noon Dates for 2024/25 Lewisham People’s Partnership meetings**

**Agenda item 1– Lewisham People’s Partnership - Year 1 Review - Draft**

**Introduction**

Following on from the programme of engagement early in 2023 with members of the Lewisham Health and Care Partnership and representatives of Lewisham diverse communities, the structure, objectives and mode of working for a new forum – Lewisham People’s Partnership - was agreed at the March 2023 meeting of the Lewisham Local Care Partners Strategic Board.

The first meeting of the Lewisham People’s Partnership was held on 11th May 2023 with further meetings on 25th July, 27th September, 6th December and 7th February 2024.

This is a draft of the Year 1 Review, and its purpose is to just pause for a moment and ask for your views and feedback. From all that you have told us over the past year, the Review highlights where the Lewisham People’s Partnership has had some success, what some of the challenges have been and what you have told us about how to engage. From this we have put together some initial ideas for discussion on how we could build on the successes and address the challenges.

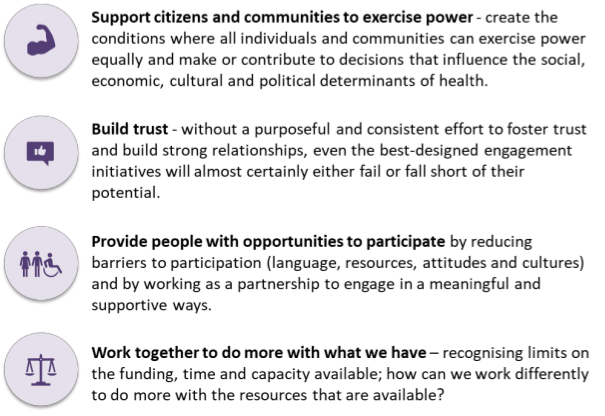
We would like to thank everyone who has come to Lewisham People’s Partnership meetings during the first year – you have brought a rich and valuable variety of voices, experiences, challenges and questions. We hope that you will be able to come along to the meeting on 23rd April but if you can’t make either the face-to-face or online meeting and would like to let us have your feedback please send to Anne Hooper, Chair, Lewisham People’s Partnership at anne.hooper@nhs.net.

**LEWISHAM PEOPLE’S PARTNERSHIP (LPP) - YEAR ONE REVIEW – DRAFT**

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| **What has gone well** | |
| * 73 people have attended the first five meetings - representing either their own voice or the voices of communities and organisations in Lewisham * Key areas of the Lewisham Health and Care Partnership (LHCP) strategic intentions have been discussed e.g., Improving access to Primary Care, LHCP System Intentions 24/25 and the Development of a Community Space in Lewisham Shopping Centre | * The development of the Lewisham Health and Wellbeing Charter has been significantly influenced by the responses of people attending the LPP * Offering both in person and hybrid meetings has been received positively * We have gained valuable intelligence about what is important to people * We have started to gain some trust in what we are aiming to achieve |
| **Challenges** | **What we learnt about how to engage** |
| * There is still some way to go to prove that engagement in all our communities is meaningful, valued and appropriately supported * Direct engagement with voluntary, community, social enterprise (VCSE) organisations needs to be done in a way that is respectful, transparent, accessible, considers and values participants time and commitments * We need to find more effective ways to access people/communities not traditionally been part of the LHCP systems engagement processes * The majority of LPP agenda items in Year 1 have been in the informing/involving category * Power is still coming from the LHCP system in deciding what gets taken to LPP meetings * LPP is often working in a vacuum and has limited access to LHCP decision makers to get in early on issues that need the voice of people and communities * How to demonstrate that what people have told us makes a difference * The lack of a reimbursement policy has meant we have lost participation from some individuals and service users * Increasing access to people and communities who have not traditionally been part of the LHCP engagement processes * Limited knowledge of engagement in other parts of the LHCP system and VCSE organisations means limited opportunity to co-ordinate engagement activity, share intelligence and learning and risks duplication of activities | * We need a strategic and focused approach and commitment to how people and communities influence decisions about their local health and care services * That approach and commitment to be demonstrably inclusive and equitable, timely and supporting long-term conversations which are joined up and demonstrate partnership working across LHCP and VCSE * Demonstrate how the influence and views of people and communities has influenced decisions and plans * We should not be re-inventing wheels – learn from the excellent work being done in the North Lewisham Hub, VCSEs, health and wellbeing champions and Healthwatch – experiences and lessons learnt from all this work should be widely disseminated and demonstrably utilised in future planning * Utilise the work currently being undertaken by BLACHIR and health equity fellows to reach into communities * Re-visit previous work with people/communities for lessons learnt and how we can improve joining up engagement and co-production activities to increase trust by demonstrating inclusivity and the difference made * Encourage the development of Patient Participation Groups to expand their knowledge and ability to influence primary care planning and decision making * Approach – and renumerate - a broader range of service users as they will have different experiences, especially carers, people who use mental health services and those who use the services on a regular basis |
| **Ideas for how we can we build on the successes and address the challenges** | |
| * **The Lewisham People’s Partnership (LPP) to be part of the programme developing a deeper partnership between the local NHS, local authority and VCSE** and how best to involve those groups and organisations who work with and represent people and communities that the LHCP find hard to reach. * **Discuss with LPP and Lewisham Place Executive Group (PEG) options for strategic focus** – for example – **working to reduce health inequalities – using strategic frameworks such as CORE20PLUS5 or Lewisham System Intentions?** – relating choices back to what we have learnt from people and communities over the past year and reviewing whether there is any previous community work that we could utilise. * **If we have agreement on where the LPP strategic focus is, we can then work together with the VCSE sector (including Healthwatch) and the LHCP** to identify who can best access and work with the people and communities identified within the strategic focus. If those long-term conversations are best approached through VCSE organisations, to identify whether there are long term financial requirements to demonstrate that their contribution and time is valued and respected. * **Form a LPP Development Group/Hub to support integrated engagement across LHCP and VCSE providers –** thiswould include VCSEs, Healthwatch, public health, health and wellbeing champions, health equity fellows and be focused on identifying trusted advisors and trusted organisations working with people and communities in the strategic focus areas to share data, engagement activity, intelligence and learning, build on community strengths, avoid duplication of effort and identify funding opportunities. * **Agree and co-develop with the Lewisham PEG an outcomes framework** for feeding into LHCP and the LCP Strategic Board the views of the LPP and to be able to demonstrate how those views have influenced decisions – operational, development and financial. * **Work with LHCP leaders** to identify what they need from LPP, co-ordinate engagement activities, share outcomes and future priorities. * **Discuss with the Lewisham PEG if there is a clearer way that LHCP can demonstrate willingness** **to discuss how, when and where power** could be handed over, whether it wants to encourage participation in budgeting where appropriate (and to identify where it would be appropriate) and to work towards the principle of shared ownership and participation through shared strategic direction. * **Agree a reimbursement policy** for people, communities and organisations attending LPP meetings and supporting its work. To ensure previously seldom-heard voices are increasingly heard, there needs to be a level of reciprocity and recognition. Without this, there is a danger people will feel their time is not valued or respected or will not have the means to attend and contribute. Appropriately reimbursing people for their “time as labour” will help to ensure everyone can participate and help to shift the balance of power within engagement relationships. It may also be necessary to consider alternative settings and timings to reach a wider range of views. | |

**APPENDIX 1**

**Lewisham’s key principles of engagement**



**Lewisham People’s Partnership objectives:**

* Be an equal partner within Lewisham Health and Care Partnership and a key part of the leadership structure
* Empower local people and remove the power imbalances that exists between statutory bodies and people and communities in Lewisham
* Make sure that Lewisham Health and Care Partners is engaging people and communities in line with our shared model of engagement and engagement objectives
* Make sure that local people and communities are involved in Lewisham Health and Care Partnership’s work - from service design to delivery – and have the evidence to show this
* Make sure that the lived experiences and needs of people and communities in Lewisham drive local partnership decision making

**Appendix 2**

**Year One Activity**

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| Meeting date | Attendees[[1]](#footnote-1) | Agenda | Type of engagement | Outcomes |
| 11/5/23 | 16 | Lewisham Health and Wellbeing Charter  LHCP Joint Forward Plan | Collaborating  Informing | Final draft of Charter to go to HCSSC Mar24 for approval |
| 25/7/23 | 20 | Lewisham Health and Wellbeing Charter  LPP priorities | Collaborating  Involving |  |
| 27/9/23 | 14 | Development of a community space in Lewisham  Co-production in Adult Social Care | Involving  Informing | Need feedback |
| 6/12/23 | 13 | Same day urgent care – improving access to primary care  Lewisham Health and Wellbeing Charter | Involving  Collaborating | Need feedback |
| 7/2/24 | 10 | LHCP System Intention for 2024/25 | Involving | Ongoing involvement/Board response |

**Common themes from 23/24 LPP meetings**

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| --- | --- |
| What is important to people matters | Accessibility - equity of access – easy access – digital and non digital |
| Equality respect and inclusion | What stops good health – barriers to improving health – health promotion – need strong emphasis on health promotion |
| Accountability and power | Granular with diversity – consistent focus across all areas – population profiles need to influence planning, commissioning, decision making and co-production |
| Impact of wider determinants | Lack of trust – lack of diversity – people who understand both need to be at the top table |
| Capacity and priorities | Participation in budget setting and funding decisions – integrated commissioning is at the centre of understanding inequality – focus on needs of population – deliver services that reduce health inequalities |
| Reducing health inequalities | Voice and influence |
| Specifics and metrics – not generalities | Asset based approaches work in involving people and communities in how money is spent |
| Community assets | Language matters – clear consistent and better communications with population re change |
| Integration and what it means to people | Trusted advocates/organisations reach people and communities that the system doesn’t - use and fund community, voluntary and social enterprises to access the many diverse communities – they have greater reach into these sectors than the stat sector does |
| Lack of knowledge – what is available – how to access | System works for the people not itself – system needs to demonstrate willing to change |

**Agenda item 2 – Dates for Lewisham People’s Partnership meetings in 2024/25**

The dates for the 2024/25 LPP meetings are:

26th June 2024

11th September 2024

13th November 2024

15th January 2025

We are just confirming times and locations for these dates which we will circulate.

1. Not including LHCP staff [↑](#footnote-ref-1)