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**LEWISHAM PEOPLE’S PARTNERSHIP**

**Agenda for meeting to be held on 6th December 2023.**

**This meeting will be held twice on that day:**

* **In person from 10.00 to 12 noon at Lewisham Local, Unit C, PLACE/Ladywell, 261 Lewisham High Street, SE13 6NJ**
* **On line from 2.00pm to 4.00pm**

**AGENDA**

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

**09.45 – 10.00am Arrivals**

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

**10.15 – 11.00am Engagement programme for Same Day Urgent Care – Improving Access to Primary Care**

**11.00 – 11.15am Break**

**11.15 – 11.55am Update on Lewisham Health and Care Charter**

**Agenda item 1 – Engagement programme for Same Day Urgent Care – improving access to primary care**

**Context**

In May 2022 a report called the Fuller Stocktake was published. This work was undertaken by a GP, Dr. Claire Fuller, and her report identified a new vision integrating the four key parts of primary care – general practice, community pharmacy, dentistry and optometry. You can find the introduction to the report in Appendix 1 of these papers and the complete report can be found at [www.england.nhs.uk/publication/next-steps-for-integrating-primary-care-fuller-stocktake](http://www.england.nhs.uk/publication/next-steps-for-integrating-primary-care-fuller-stocktake)

At the heart of this new vision is the need to improve the access, experience and outcomes for all our communities which centres around three essential offers:

* Streamlining access to care and advice for people who get ill but only use health services infrequently: providing them with much more choice about how they access care and ensuring care is always available in their community when they need it
* Providing more proactive, personalised care with support from a multidisciplinary team of professionals to people with more complex needs, including, but not limited to, those with multiple long-term conditions
* Helping people to stay well for loner as part of a more ambitious and joined-up approach to prevention

**Actions for this meeting**

Lewisham Health and Care Partnership *(see note 1 on the next page)* have been working together, and with partners such as Healthwatch, to bring the voices of Lewisham’s people and communities to this work.

They are holding events throughout December 2023 and January 2024 and using short questionnaires to gather experiences and learning. They are keen for people and communities to help with the following questions:

* How do people access services?
* What is your understanding of what is available to you?
* How can Lewisham Health and Care Partnership support people and communities to access same day services effectively?

**Note 1 – Lewisham Health and Care Partnership**

Lewisham Health and Care Partnership consists of the organisations and people who are working together to change health and care in Lewisham for the better – Lewisham Council, Lewisham and Greenwich NHS Trust, South London and Maudsley NHS Hospital Trust, One Health Lewisham, General Practice, Lewisham Healthwatch, commissioners and support teams.

Lewisham health and Care Partnership aims to achieve a sustainable and accessible health and care system, to support people to maintain and improve their physical and mental wellbeing, to live independently and have access to high quality care when they need it.

**Agenda item 2 – Update on the development of the Charter for Health, Care and Wellbeing Services in Lewisham**

**Where have we got to so far?**

The Lewisham People’s Partnership has discussed the development of a Lewisham Health and Wellbeing Charter at meetings in May and July 2023.

At the May meeting there was a consensus that the Charter needed to acknowledge and take into account the diversity of Lewisham, how inequalities and inclusion are addressed, be meaningful and able to be held to account, relate to what is important to people and communities in Lewisham and have specifics and metrics not generalities. This consensus was taken back to the June 2023 Lewisham Healthier Communities Select Committee for discussion. That meeting gave a clearer understanding that the Charter will be a companion to the revised Lewisham Joint Health and Wellbeing Strategy. The new strategy will respond to the recommendations in the two Marmot reports and will focus on the wider determinants of health and health services. In that context, it will identify the needs of people in Lewisham and then the actions needed to meet these needs will be influenced by the Charter.

There were further discussions on the development of the Charter at the July 2023 meeting of the Lewisham People’s Partnership which concentrated on what were the most important issues to be included in the Charter and what are the responsibilities of Lewisham people and communities towards health and care services and what, as individuals and communities, can we do to support ourselves and others in living healthier lives and improving our health outcomes? The consensus from the meeting was that the important issues to be included in the Charter were equal and easier access to health and care services for all people and communities, ensuring that access is the same whether using digital or non-digital means, clear and accessible communications, single points of access to holistic health and care services and increased health promotion, commitment to reducing inequalities, sustainable and long term VCSE sector strategy and support, and clarity on how the wider determinants will be integrated into health and care strategies and plans.

The discussions on the Charter also highlighted a consensus on what would support people and communities to live healthier lives and improve health outcomes - peer to peer services, one stop shop fronts, sharing health and care information across communities, using the right service and keeping appointments, working smarter together, and utilising and expanding what is already working within our communities.

**Actions for this meeting**

The outcomes of these discussions were included in the latest draft of the Health and Wellbeing Charter presented to Lewisham’s Healthier Communities Select Committee meeting on 6th September 2023.

At that meeting the Committee agreed that the Charter needed to be more relevant and meaningful to residents. The Committee advocated further engagement with people and communities in Lewisham and for the Charter to:

* centre on empowering people to take proactive steps
* reflect what people and communities could do themselves for their health and wellbeing and
* what people and communities could expect from health and care partners

. **The Lewisham People’s Partnership has discussed two early versions of the Charter for Health, Care and Wellbeing in Lewisham**

**It has been discussed at Lewisham’s Healthier Communities Select Committee which is a Committee of Lewisham Council**

**The Select Committee wanted further engagement with people and communities in Lewisham to ensure the Charter was relevant and meaningful to them and how the Charter could:**

* **Support people and communities to improve their health and wellbeing**
* **What could you do for ourselves to improve our health and wellbeing – how can we support each other and our communities – do you want to do this – what stops you doling it?**
* **What would you include in the Charter to demonstrate how we can support ourselves and others to improve our health and wellbeing?**

**The NHS is under pressure** – waiting lists are increasing – people have complex and sometimes long term health issues – industrial action hasn’t helped NHS services get back on track after COVID

* How can we all help the NHS cope?
* How can we help take the pressure off the NHS?
* How can we all help improve our health and wellbeing?
* Healthier lifestyles – taking part in screening programmes such as breast and bowel – diabetes prevention - high blood pressure – healthy walks programme – health checks – weight management -

**APPENDIX 1 – NEXT STEPS FOR INTEGRATING PRIMARY CARE: FULLER STOCKTAKE REPORT**

**INTRODUCTION FROM DR. CLAIRE FULLER**

“For generations, primary care has been at the heart of our communities. Health visitors, community and district nurses, GPs, dentists, pharmacists, opticians, and social care workers are among the most recognisable of a multitude of dedicated staff delivering care around the clock in every neighbourhood in the country.

Every day, more than a million people benefit from the advice and support of primary care professionals – acting as a first point of contact for most people accessing the NHS and also providing an ongoing relationship to those who need it. This enduring connection to people is what makes primary care so valued by the communities it serves.

Despite this, there are real signs of genuine and growing discontent with primary care – both from the public who use it and the professionals who work within it.

Inadequate access to urgent care is having a direct impact on GPs’ ability to provide continuity of care to those patients who need it most. In large part because of this, patient satisfaction with access to general practice is at an all-time low, despite record numbers of appointments: the 8am Monday scramble for appointments has now become synonymous with patient frustration.

At the same time, primary care teams are stretched beyond capacity, with staff morale at a record low. In short, left as it is, primary care as we know it will become unsustainable in a relatively short period of time. It is against this backdrop that the Chief Executive of the NHS, Amanda Pritchard, asked me to lead this major stocktake of integrated primary care from the ground up.

I want to start by thanking all primary care staff – and staff right across the health and care system – for their magnificent efforts during the pandemic. Since the inception of the NHS, there has not been a generation of leaders and staff who have faced the kind of overwhelming challenges as those working in our system today, and despite the very real toll COVID-19 may have taken on them personally and professionally, they will forever be able to wear their contribution as a badge of honour.

When I agreed to lead this work in November 2021, I don’t think I fully appreciated the amount I would personally gain. As a GP for over 25 years, a clinical commissioning group (CCG) chair, a CCG accountable officer and an integrated care system (ICS) CEO designate, I have been involved in numerous system reviews and reforms. However, I do not think I have ever had such an opportunity to share ideas, listen and learn from others, build relationships, and challenge my own understanding, as I have during this process. It’s been a pleasure to have met and worked with so many fantastic colleagues during the past six months.

During that time, we have had over 12,000 individual visits to our engagement platform, over 1.5 million Twitter impressions of *#FullerStocktake*, and close to 1,000 people directly involved through workstreams, roundtables and one-to-one meetings. The levels of engagement have been unlike anything I have seen for many years – all driven by a collective desire to create the conditions by which primary care can be supported to thrive in the future”.

The complete report – Next steps for integrating primary care: Fuller Stocktake Report can be found at [www.england.nhs.uk/publication/next-steps-for-integrating-primary-care-fuller-stocktake](http://www.england.nhs.uk/publication/next-steps-for-integrating-primary-care-fuller-stocktake)