



Notice of Meeting:

Health and Adult Social Services Scrutiny Panel

Meeting Location:

The Atrium - Perceval House

Date and Time:

Tuesday, 19 March 2024 at 7.00 pm

Contact for Enquiries:

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Telephone: 020 8825 6253

Chief Executive:

Tony Clements

Committee Membership:

A Brooks, F Conti, A Steed (Vice-Chair), V Alexander, G Murtaza, B Wesson (Chair), A Cook, K Crawford, M Iqbal, K Nagpal, K Dhindsa and C Duffy

AGENDA

1 Apologies for Absence

To note any apologies for absence and substitutions.

2 Urgent Matters

To consider any urgent matters that the Chair has agreed should be considered at the meeting.

3 Matter to be Considered in Private

To consider whether items contain information that is exempt from disclosure by virtue of Part 1 of Schedule 12A of the Local Government Act 1972.

4 Declarations of Interest

To note any declarations of interest made by members.

5 Minutes

(Pages 3 - 10)

To approve as a correct record the minutes of the meeting held on 12 December 2023.

6 Panel Work Programme

(Pages 11 - 18)

7 NWL Primary Care and Same Day Access to GP Primary Care

(Pages 19 - 40)

8 Ealing Safeguarding Board Annual Report 2022-23

(Pages 41 - 72)

9 Social Care and Community Choice

(Pages 73 - 80)

10 Health of the Borough

(Pages 81 - 140)

11 Date of Next Meeting

The date of the next meeting is 16 May 2024.

Published: Monday, 11 March 2024

Minutes of the meeting of the Health and Adult Social Services Scrutiny Panel

Date: Tuesday, 12 December 2023

Venue: The Atrium - Perceval House

Attendees (in person):

B Wesson (Chair), F Conti, A Steed (Vice-Chair), G Murtaza, K Crawford, M Iqbal, K Nagpal and K Dhindsa, A Cook and A Brooks

Attendees (virtual):

V Alexander

1 Apologies for Absence

There were no apologies for absence.

2 Urgent Matters

There were no urgent matters.

3 Matters to be Considered in Private

There were no matters to be considered in private.

4 Declarations of Interest

There were no declarations of interest.

5 Minutes

The minutes of the meeting held on 28 September 2023 were approved by the Panel.

6 Appointment of Co-optee Member

RESOLVED: Anthony Brooks from Ealing and Hounslow Community Voluntary Services was confirmed as a co-optee member of the Panel.

7 Ealing Safeguarding Adult Board Annual Report 2022-2023

Due to technical difficulties, which meant that the Panel was unable to hear from officers online, this item was deferred.

8 Finance Update on Adult Social Care

Kerry Stevens, Strategic Director, Adult Social Care and Public Health provided the Panel with an update on the position for quarter 2 of the financial year for the Adult Social Care Directorate.

The following points were highlighted:

- The quarter 2 position on a budget of £99.384m was an £11.7m overspend, which had reduced from a £15.4m overspend at the end of quarter 2. The drivers for the significant overspend were multiple and came from different directions in terms of how the pressures were being felt within the service. There had been significant inflationary increases in the cost of services being procured from the market, for example a 25% increase in the cost of care home beds for older people over the last 12 months.
- The service was seeing the impacts of the significant challenges that the NHS were facing in terms of waiting lists and the impact of that on the level of acuity of need of the people coming into the services. The service was also seeing increased demand in terms of the impact of the cost of living crisis on the communities being served. In effect there was an increase in the unit cost of services being procured, an increase in the level of needs, and in the number of people approaching the service for support.
- A range of actions had been taken to try and manage the spend position, including increased funding which was agreed with the Ealing Borough Based Partnership, for payments to carers to support them in their valuable roles. Increased resources had been put in to reducing waiting times for assessment so that people were coming into services quickly to receive support with their needs.
- The high level out turn position for quarter 2 had seen a £3.7m reduction in the overspend position between quarter 1 and quarter 2. The ongoing forecast overspend explanation was an increase in growth in the region of £9.4m, over £4m growth now in terms of inflation was expected for 2023/24. Further inflationary costs were included within that in terms of price of services procured directly from the market and the investments into the real living wage. There were also challenges in the inflation management for the four large private finance initiative care homes that Ealing had and additional money had been drawn down from the corporate centre to support that.
- In terms of spend by service area most of the activity sat within older adults, approximately 2,500 older people were in receipt of services and spend in that area was £38m. There were approximately 1,200 people with learning disabilities in receipt of services, which was a much smaller number, but spend was £43m. The number of people in receipt of services throughout the year had remained static whereas

the cost had gone up significantly. This was a testament to the work of the Better Lives Programme promoting independence and supporting people to remain in their communities.

- The Ealing trend of spend per head of population for adult social care showed a reduction in years 2018/19 and 2019/20 during which period London showed continued growth. Ealing spend per head of population for 2021/22 was £41m per 100k population, whereas the London average was £44m. Spend per head was bottom quarter relative to the rest of London and the lowest spend in London per head for people over the age of 65. Ealing also had the lowest spend on adult social care as a proportion of core spend in London. Ealing had started off with a much higher spend than the average across London boroughs, but saw a reduction in spend per head through the Better Lives Programme. A promotion of independence model which had been very effective.
- Ealing received a significantly lower rate of the Better Care Fund from NHS North West London, which was a shortfall of nearly £9m a year. It was important to recognise that within the North West London Health and Social Care System, Ealing had the largest number of care home beds. Significant numbers of people were placed in Ealing from central London boroughs. The health and social care system had experienced the financial pressures associated with this and not received the requisite funding to reflect that additional pressure.
- There were also differences in the way that the NHS funding was split between inner and outer London boroughs. Section 117 funding in Inner London was split 50:50 but in outer London was split 40:60, which was thought to cost Ealing just under a £1m per annum in terms of lost income. There had also been a variation in terms of how the winter pressures funding had been dealt with across North West London as a whole. As the largest borough Ealing had the largest proportion of discharges, however the funding through NHS North West London was disproportionately low relative to the level of activity.

Panel members asked the following questions:

- Ealing had the lowest spend per head in London, should that be considered good or bad? Were people getting everything that they needed from their packages of care? Kerry Stevens replied that Ealing's comparative spend from 2018/19 for the following three years was significantly above the London average. At that point the Better Lives programme was implemented, which had a significant impact on the levels of spend within the borough. More people were being supported to live in the community with a very efficient and high quality home care offer. Assurance regarding the spend position relative to other boroughs was key. Ealing was not underspending but this was kept under constant review and it was also key that statutory duties were being met.

- Because of the initiatives being run, was the service saying that people were requiring less care than the same person in another borough? Kerry Stevens confirmed that this was the case, also as Ealing had such an efficient domiciliary care market it was one of the lowest costs in London for home care hours but top quality in terms of the offer. Supporting more people at home and promoting independence was more cost effective.
- How did the service and the staff cope with having to manage a deficit, keeping officers motivated must be quite challenging? Kerry Stevens replied that prior to the pandemic, adult social care came in at an underspend for the preceding two financial years because of the work that had been done promoting independence. There were now significant financial challenges that local government faced nationally. Staff were clear that they were in post to serve the local community and their drive within their professional responsibilities was to improve outcomes, that was what kept them committed to public service.
- As the service was not aware of the grants and one off income until the end of the year, how did that affect the financial forecast? Kerry Stevens agreed that it was difficult to make assumptions about what the income would be. The service started the year not making any assumptions and then building on that as the income became available. Grants and other funding for the service were generally known by the end of October. There were some significant variations year to year.
- Members suggested that it would be good to be clear on current demands against the budget allocations and performance. Kerry Stevens said that he could overlay activity against spend and if the scrutiny panel wanted to look at this on a regular basis, he could provide the information. The Chair agreed that this would be helpful.
- The quarter 2 position showed £2.3m savings as a red risk, how viable and safe were they? Kerry Stevens said that a red, amber, green rating system would often be used to monitor the plans to manage efficiencies through the system and identify risk. He offered to bring updates in the terms of the RAG rating of the savings plans to the Panel to see how they changed over time if that would be helpful.
- Could more detail be provided about the proposed surge review of packages? Kerry Stevens replied that in terms of the surge activity, there was a recognition that within the services there was limited staffing capacity, because of financial limitations and recruitment and retention issues, and there was increased demand. The service was having to look at different ways of using resources to respond to that demand. One of the pieces of work included focussing a cohort of staff on completing reviews, because there was a backlog and the service had a responsibility to ensure that people's care needs were being

met. Further surges were planned through January, February, and March to deal with waiting lists. A review of the impact of the surge approach would be carried out with the corporate transformation team, Kerry Stevens added that he would be happy to bring an update on that to the Panel in April or May.

- Learning Disabilities did not see a reduction in the forecast of variance in the last quarter. Was that because a lot of the schemes being run to try and reduce cost were not applicable or could not be used within that cohort? Kerry Stevens said that the service was examining the spend on services for people with a learning disability. Some of the challenges being experienced were because it was a relatively small market in terms of providers of services. There was a huge amount of work being done with young people with a learning disability transitioning in to adult services. That had been very successful in supporting independence and continuing health funding to meet people's needs rather than the council funding individual's needs.
- Were there any key criteria that lead to the view that the Better Lives Programme was having a beneficial effect? Kerry Stevens said that following the introduction of the programme and prior to the pandemic the service conducted a consultation with people about their experience of the programme and got some very positive responses. A report from Healthwatch was brought to the Panel and could be represented.

Due to technical difficulties the Chair asked questions on behalf of Roy Willis, Ealing Reclaim Social Care Action Group (ERSCAG) who was on line. They were:

- After the positive news last year of the roll out of the Real Living wage to Ealing's Home care workforce, it was difficult to understand how Ealing's average payment for one hour of home care was significantly lower than the Greater London average. In a BBC report, it was stated that the average hourly home care rate paid by Ealing was £16.04 while the average rate across other London Boroughs was £19.01. Was there an explanation for this discrepancy as it could adversely affect recruitment of home carers and the viability of local Home Care agencies?

Kerry Stevens replied that the report from the BBC was out of date. Ealing currently paid £17.65 per hour and was proud to be a real living wage payer in the domiciliary and community care sector, which was key in terms of the response to the recruitment and retention challenges. Ealing had been significantly investing and working with the care market for many years to support the quality of the offer and the council only commissioned new services from home care providers that were rated good and outstanding by the Care Quality Commission.

Sarah Boston, Save our NHS Ealing, asked what impact the Government's proposal to restrict the families of care workers from overseas from joining

them would have on recruitment and retention. Kerry Stevens replied that recruitment and retention was a significant challenge across the health and care sector. The council was actively working with its partners within the care sector to get an understanding of what the proposed changes would be and the impact within the market. Kerry Stevens proposed to bring any updates to the panel in the new year.

Concluding the item, the Chair said that he recognised the difficult financial position that the service continued to grapple with. He confirmed that the Panel would like to review the activity and spend information along with the RAG rating demonstrating the progress and the challenges. An update on the surge approach would also be welcome.

RESOLVED: That the Panel notes the report and makes the following recommendations:

1. Further reports on activity and spend to include the RAG risk assessment rating.
2. An update on the surge approach for responding to backlogs to be included in the Panel's work programme.

9 Review of Ealing Adult Social Services Partnership Boards - Update on Progress

Kerry Stevens, Strategic Director, Adult Social Care and Public Health presented this report which provided the Panel with an updated position on the implementation of co-production boards. The aims of the initial review, the key findings, and the outcome from the options appraisal were highlighted for members.

The proposals were to merge the learning disability and autism partnership boards, split the older adults and long term conditions and disabilities board, and to create a carers partnership board. There was discussion about whether partnership boards should be developed to reflect the seven towns model but this was not seen as something to progress at this stage. There were ongoing discussions regarding recompense and support for individuals taking more formal roles within the boards. The strategic co-production boards would be in place by the end of March 2024 and the voice of the user and the community would have a much greater role in the decision making within the Health and Wellbeing Board.

The Chair commented that he would like the Panel to have the opportunity to feed into any further consultation on the strategy and asked what pressure this work might be adding to the service's budget. Kerry Stevens replied that the costs associated with the implementation of the new structure for co-production boards was minimal. The ongoing function of the boards was currently being looked at in terms of any remuneration for chairs and support for the board. The strategic co-production board would probably want to engage with the Panel on the development of the strategy.

Due to the technical difficulties, the Chair asked a question on behalf of Roy Willis, from Ealing Reclaim Social Care Action Group (ERSCAG).

ERSCAG welcomed the focus in the report on engaging directly with people most affected by social care policies and experts by experience but what additional resources and support were envisaged to support the equal participation of these people in the newly reformed co-production boards? Kerry Stevens replied that it was going to be important that the experts by experience voice and role within the co-production process was front and centre. The service would need to be clear in terms of how those costs were met within the organisation, efficiencies elsewhere might make up for any minimal cost for supporting the co-production boards.

Resolved:

The Panel noted the report.

10 Panel Work Programme

The Chair took this item earlier in the meeting commenting that having the work programme at the end of the agenda meant that it did not always get the due attention it deserved. It would therefore be considered earlier in the agenda in future.

The Chair drew the Panel's attention to the Joint Health Overview and Scrutiny Committee (JHOSC) held on 5 December 2023. There was an update at the meeting from the NHS North West London Integrated Care Partnership on its plan to reduce its running costs by 30%. This would impact staffing with a possible reduction of 100 posts across North West London. Members of the JHOSC had raised concerns about the impact that the cuts would have on borough based partnerships. Panel member, Councillor Murtaza commented that it would be very difficult to deal with these cuts. The prescribing budget had also been cut and GPs were being asked not to prescribe certain items which patients expected.

The Chair invited comments from members on the panel's work programme.

Councillor Kate Crawford suggested that the Panel should consider returning to look at adult acute mental health beds and provision for young adults. The Chair advised that the Children's Scrutiny Panel would be considering the provision of Child and Adolescent Mental Health Services at its March meeting at which the members of this panel would be invited to. Regarding acute mental health beds he would review the work programme to see if this could be included.

Resolved:

The Panel noted the work programme.

11 Date of Next Meeting

The date of the next meeting was noted as Tuesday 19 March 2024.

Meeting commenced: 7.00 pm

Meeting finished: 8.18 pm

Signed:

Dated: Tuesday, 19 March 2024

B Wesson (Chair)



Report to Scrutiny

Item Number:

Contains Confidential or Exempt Information	No
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Subject of Report:	Panel Work Programme
Meeting:	Health and Adult Social Services Standing Scrutiny Panel 19 March 2024
Service report author:	Anna-Marie Rattray, Scrutiny Review Officer RattrayA@ealing.gov.uk 0208 825 8227
Scrutiny officer:	As above
Cabinet Responsibility:	Councillor Josh Blacker, Healthy Lives Councillor Jasbir Anand, Tackling Inequality
Director Responsibility:	Helen Harris, Director of Legal and Democratic Services harrish.gov.uk 020 8825 8615
Brief:	The work programme is the way the Panel manages its priorities. It comprises issues the Panel needs to consider as part of the oversight role in monitoring NHS and Council performance and policy implementation. The Panel reviews the work programme at each meeting to ensure flexibility to cover new issues as they arrive.
Recommendations:	That the work programme is agreed.

1. Panel Work Programme

This report provides an update on the Panel Work Programme at **Appendix 1**.

2. North West London Joint Health Overview and Scrutiny Committee (JHOSC)

The JHOSC is due to meet on 14 March 2024, with the meeting being hosted by the London Borough of Brent. Councillor Ben Wesson, Chair will be attending.

The agenda papers are available from this link [Agenda for North West London Joint Health Overview & Scrutiny Committee \(JHOSC\) on Thursday, 14 March 2024, 10.00 am \(moderngov.co.uk\)](https://www.moderngov.co.uk/agenda/2024/03/14/jhosc)

The meeting will be considering:

- Primary Care Access following Changes to GP Contracts and Announcement of the Same Day Access Model (The report for the JHOSC is reproduced in this agenda.)
- Obesity and Preventative Services
- Update on Community Based Specialist Palliative Care Improvement Programme
- Update on potential change of control at AT Medics Ltd

3. Panel Visit

The next meeting of the Panel on 16 May 2024 will be considering a report on Sexual Health Services in Ealing. To support the scrutiny of that item a visit has been arranged for Panel members to the Sexual Health Service at Mattock Lane Health Clinic. Details will be circulated shortly.

4. Legal Implications

There are none arising directly from this report.

5. Financial Implications

Support to the scrutiny panels is contained within allocated budgets. Value for money will be achieved through early and effective planning of the Panel's work programme.

6. Other Implications

There are none.

Pre-publication sign-off

Name	Department	Date sent	Date response received	Comments appear in report paragraph:
Internal				
Cllr Ben Wesson	Panel Chair	23/02/2024	23/02/2024	
Cllr Andrew Steed	Panel Vice-chair	23/02/2024	23/02/2024	

Report History

Decision type: Non-key decision	I. Urgency item? No
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Authorised by Cabinet member:	Date report drafted:	Report deadline:	Date report sent:
Not applicable			

Report no.:	Report author and contact for queries:
	Anna-Marie Rattray, Scrutiny Review Officer. Ext 8227

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Health and Adult Social Services Scrutiny Panel Draft Work Programme 2023-24

Meeting Date		Agenda Items	Report Author	Possible Visits/External Witnesses
1	13 Jul 23	<ol style="list-style-type: none"> 1. Panel Draft Terms of Reference and Work Programme 2. West London NHS Trust – Results of Enhanced Public Engagement Adult Acute Mental Health Beds 3. LGA Adults Peer Review 	Overview and Scrutiny Officer West London Trust Strategic Director Adult Social Care	Visit to Lakeside Hounslow.
2	28 Sep 23	<ol style="list-style-type: none"> 1. LGA Adults Peer Review – Progress Update 2. System Performance Framework KLOE Adult Social Care and Public Health including Addiction Services 3. GP Services – Access, Future Planning, Resilience, Role of Pharmacy and NHS Dentistry 	Strategic Director Adult Social Care NHS NWL – Borough Director	
3	12 Dec 23	<ol style="list-style-type: none"> 1. Progress of Partnerships Boards Reviews 2. Adult Social Care Budget Deep Dive 3. Safeguarding Adults Annual Board Report (Deferred to March) 	Strategic Director Adult Social Care Chair – Ealing Adults Safeguarding Board	Meeting with ERSCAG (DP)

Meeting Date		Agenda Items	Report Author	Possible Visits/External Witnesses
4	19 Mar 24	<ol style="list-style-type: none"> 1. Same Day Access to GP Primary Care 2. Safeguarding Adults Annual Board Report 3. Choice Agenda (Direct Payments) 4. Health of the Borough Report – Population Health/ Health Inequalities 	NHS North West London Chair – Ealing Adults Safeguarding Board Strategic Director Adults Services Director Public Health	
5	16 May 24	<ol style="list-style-type: none"> 1. Update on Dental, Ophthalmology and Pharmacy Services 2. Progress on the Health and Wellbeing Strategy Action Plan 3. Sexual Health Services 4. Screening and Immunisations – Brief Update 5. CQC Inspection of Adult Services – Verbal Update 	NHS NWL – Borough Director Director Public Health Director Public Health Director Public Health Director Adult Services	Visit to Sexual Health Clinic

Possible Agenda Items

- Update on Ealing Hospital – Community Diagnostic Centres and Long Term Strategy for Meadow House Hospice (Item moved to July 24)
- Impact of Adult Social Care Surge Work
- Adult Social Care Focus / Quality of Adult Social Care
- Mental Health Services /CAMHS/ NWL Mental Health Strategy – Ealing focus/ Outpatient Mental Health Services
- Community Physical Services (possibly 2024/25)
- Role of Voluntary Sector within Health Services
- Role and Work of the Integrated Neighbourhood Teams
- Maternal Health within the BAME Community

- Local Pandemic Preparedness Plan
- Adult Social Care Budgets
- Screening and Immunisations - Detailed Reports

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Report to Scrutiny

Item Number:

Contains Confidential or Exempt Information

No
(If yes, state which paragraph of the Access to Information rules the exemption relates)

Subject of Report:

North West London Primary Care and Same Day Access to GP Primary Care

Meeting:

Health and Adult Social Services Scrutiny Panel
19 March 2024

Service Report Author:

Javina Seghal
Director of Primary Care, NHS NWL Integrated Care Board

Scrutiny Officer:

Anna-Marie Rattray
Overview and Scrutiny Officer
Email: rattraya@ealing.gov.uk
Tel: 020-8825 8227

Cabinet Responsibility:

Not applicable

Director Responsibility:

Not applicable

Brief:

As part of its focus to improve access to primary care, NHS NW London are proposing the introduction of 'same day' access hubs across North West London.

Recommendations:

To consider the report and comment on the proposal.

1. North West London Primary Care and Same Day Access to GP Primary Care

- 1.1 NHS North West London is proposing the introduction of same day access hubs' across North West London. Patients contacting their GP surgery either online or by telephone may be directed to the same day access hub for triage to the right service for their needs. This is an approach, that NHS NWL says will evolve over time but ultimately, patients may have telephone, online, video or face to face contact with staff at the hub, who will direct them to the right place.
- 1.2 Attached as **Appendix 1** is the report 'North West London Primary Care and Same Day Access to GP Primary Care', which sets out the proposal and was presented to the North West London Joint Health Overview and Scrutiny Committee at its meeting on Thursday 14 March.
- 1.3 Lynelle Hales, Lead, Access and Primary Care Strategy, NW London Integrated Care Board will be attending the Health and Adult Social Services Scrutiny Panel meeting to answer questions regarding same day access.

2. Legal Implications

- 2.1 Not applicable.

3. Financial Implications

- 3.1 Not applicable.

4. Other Implications

- 4.1 Not applicable.

Consultation

Name of Consultee	Department	Date Sent to Consultee	Date Response Received from Consultee	Comments Appear in Report Para:
Internal				
Not applicable				
External				

Report History

Decision Type: Non-key Decision		Urgency item? No		
Authorised by Cabinet Member:	Date Report Drafted:	Report Deadline:	Date Report Sent:	
Report No.:		Report Author and Contact for Queries:		

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**Request for Report to the North West London Joint Health Overview
Scrutiny Committee**

14 March 2024

Report Title:	North West London primary care and same day access (SDA) to GP primary care
Report Author:	Javina Seghal – Director of Primary Care
Committee Date:	14 March 2024
Report Deadline:	04 March 2024
Purpose	
To receive a report on the current state of Primary Care Access across North West London following recent changes to GP Contracts.	
Highlighting details of same day access to GP primary care	
<ul style="list-style-type: none">• The scope and rationale for identifying the SDA initiative as an effective method for access to GP Primary Care• A comprehensive timeline providing information from the initial decision taken to go ahead with this initiative to the recent announcement to roll out across NW London in April• Details on the consultation and engagement that has taken place with GPs, medical professionals, patients and residents across NW London, local government, NHS clinical senate, Mayor of London, and other partners• Details of all the pilots taken place, including locations, durations, and evaluations• Information on the consultants or agencies used by the NHS and ICS to advise them on this initiative and what actual recommendations were made• Financial, estate, staff, equality, and other implications on delivering the initiative• The risks that have been identified through consultation and advice sought and what mitigations are in place to address these.	
Background:	
Current state of Primary Care Access across North West London following recent changes to GP Contracts.	
Each year the ICB receive a summary of the changes to the GP contract, the attached letter sets out these for 23/24. The summary changes for 24/25 have not yet been issued.	
The Investment and Impact Fund (IIF) and quality outcomes framework (QOF)- incentives are being consulted on and there are currently no changes to what was proposed since last year. More details on IIF and QOF can be found here: Report template - NHSI website (england.nhs.uk) IIF 23-24 NHS England » Quality and outcomes framework guidance for 2023/24	
Our current main focus in primary care is improving access and this paper focuses on our same day access work.	
Detail - What is same day access?	
NHS North West London is introducing a Page 23 but achievable plan to improve same day access to primary care for patients.	

This approach was co-developed by 10 primary care networks (PCNs-6 individual PCNs and 1 whole borough) between August and December 2023. The approach is aligned to the recommendations set out in the national 'Fuller Stocktake' review of primary care.

The new approach sees the introduction of 'same day access hubs' across North West London. Patients contacting their GP surgery either online or by telephone may be directed to the same day access hub for triage to the right service for their needs. This is an approach that will evolve over time but ultimately, patients may have telephone, online, video or face to face contact with staff at the hub, who will direct them to the right place.

This could be a community pharmacy, a routine appointment with their GP or an urgent appointment with their GP. Where appointments are not available with their own GP or the patient will get easier access, they may be directed to a neighbouring practice.

Hubs can be either physical or virtual and will usually be managed through the local PCNs, with each hub including a senior GP. All clinical decisions will have a senior clinical decision making and GP lead, with support from a multi-disciplinary team.

How the hubs work

Same day access hubs bring GP practices together in networks, making it easier to arrange appointments the same day and to support patients in finding the care that is best suited to their needs. Patients who need a GP appointment that day are more likely to get one and GPs will be able to focus on providing proactive care to patients who need it. Where appropriate, patients may be referred to other services best suited to their needs, such as community pharmacists, physiotherapists or nurses. GPs will continue to see patients who need to see them and will be able to offer proactive continuity of care to people with long term conditions and others who need it.

This approach ensures patients needing primary care services that day are more likely to be looked after in the quickest way. The plan is for this to apply to same day cases only.

Primary care access is the issue most consistently raised by North West London residents we speak to about health services. We have launched a public information campaign called *We Are General Practice* in order to explain how primary care is changing, the challenges it faces and some of the new roles and proposed solutions to improve access and care for patients.

Same day access hubs form part of our 'single offer' to general practice, which aims to introduce a consistent approach to enhanced care across North West London. If practices are not part of same day access hubs, their patients may not be able to access other parts of the single offer, such as specialist diabetes and mental health care. Same day access hubs are not mandated, but we are recommending them to practices and they are part of our single offer as this will help them deliver better access for all the PCNs patients.

Clinical decision making

All clinical referrals and clinical decisions will be made by clinicians and patients will still be able to see their GP.

Staff in supporting roles like care navigators and co-ordinators will signpost patients to the right care for them. They will work in an identical way to how they work in practices now, but with greater clinical oversight as the same day access hubs will all include senior GPs and multi-disciplinary teams and with a better understanding of the types of services that might support their population's needs.

Decisions made by the same day access hubs will happen with the oversight of the senior clinical decision maker.

By streamlining the way patients achieve access we aim to enable more patients to seek advice and treatment, improving the care patients receive.

Experience of early adopters

The primary care networks who were early ('wave 1') adopters reported that they have been able to provide their most complex patients with increased access and time with their GPs as the simpler requests have been managed by signposting to other parts of the system. Patient experience reports have been positive.

KPMG provided programme management support and shared good practice from elsewhere, supporting PCNs and NHS North West London as they developed their approach, which is closely aligned to the recommendations of the national 'Fuller Stocktake' of primary care, led by Dr Claire Fuller.

The primary care networks are:

- Northolt PCN – Ealing - went live 13 November 2023
- Harness North and South PCNs – Brent – went live 11 December 2023
- Harrow East PCN – Harrow – went live 18 December 2023
- Healthsense PCN – Harrow – went live 30 October 2023
- North Connect PCN – Hillingdon – went live January 2024
- Westminster borough (Central London boroughs 4 PCNs)

Engagement

As part of the on-going programme both with wave 1 and wider PCNS we are working with the community and stakeholders and taking learning forward. We are only just starting work with the remaining PCNs so it is very early days and our engagement will be on-going.

Our primary care work is informed by insights from our ongoing community engagement programme. The 'We are General Practice' Communications campaign in 2023 was designed to support residents to understand how they can access general practice services.

A briefing on same day access has been shared with residents and stakeholders and is available on the ICB website.

[Improving same day access to primary care :: North West London ICS \(nwlondonicb.nhs.uk\)](https://www.nwlondonicb.nhs.uk)

Primary care networks are asked to work with patients and carers as they implement same-day access from April 2024, and we will continue to support them with insights from general and targeted engagement with residents. The ICB is setting up a residents' forum in March when this topic will be on the agenda. It is also planning targeted community engagement with visually impaired people, people with learning disabilities and with traveller communities to ensure understanding of particular issues for these groups in relation to same-day access plans.

What will happen on 1 April

There is a misapprehension that everything will change on 1 April, whereas our intention is to introduce new ways of working gradually, managed at local level by PCNs. The aim is that practices and PCNs are given time to co-~~Page 25~~ collaborate with colleagues and patients to help this way of working improve primary care access. We know that this will take

time and will be a gradual process as each PCN profile is different. There will be no expected radical change but an adopting of new ways of working over time.

Practice workforce

We are flexible about how the plan is delivered. Care coordinators will be trained to signpost patients to the right care; this could be from their own practice in a virtual hub if that is the preferred local approach, or from a physical hub at an agreed location. The means of delivery is a matter for PCNs to decide locally and in a way that works best for local people.

Practices are already working collaboratively at scale to deliver out of hours care or that patients are already being signposted to other members in the primary care systems

Timeline

- Fuller Stocktake review May 2022

Throughout 2023:

- NHS delivery plan - recovering access to primary care
Good practice in primary care – collated national and local examples of good practice
- Current state analysis – extensive stakeholder engagement, identifying key challenges, opportunities and enablers across the system
- We are general practice public campaign launch
- System-wide access workshop
- Wave 1 programme – co-design/trial across 10 PCNs – lessons learned informing future implementation planning.

Member Request:

Cllr Ketan Sheth, Committee Chair, January 2024

To: • All GP practices in England
• Primary Care Network Clinical Directors

NHS England
Wellington House
133-155 Waterloo Road
London
SE1 8UG

cc. • ICB Primary Care Leads
• ICB Chief Executives
• Regional Directors
• Regional Directors of Commissioning
• Regional Directors of Primary Care and Public Health
• Regional Heads of Primary Care

6 March 2023

Dear colleagues,

Changes to the GP Contract in 2023/24

1. We recognise and appreciate the incredibly hard work of general practice during this period of sustained significant pressure. The past few years have demonstrated the dedication of practice and Primary Care Network (PCN) teams in innovating and responding to the needs of their populations. In January 2023 General Practice delivered 30m appointments, an increase of 11% on January 2020, a testament to the incredible work of GP teams.
2. 2023/24 is the final year of the 5-year framework agreement which was set out in *Investment and Evolution*. Over the course of 2023/24 NHS England will engage with the profession, patients, ICSs, government and key stakeholders, building further on the [Fuller Stocktake](#) from May 2022 which set out the next steps towards integrating primary care. In response to feedback from practice teams, GPC England and the Health and Care Select Committee on the Future of Primary Care, in 2023/24 the profession and representative patient groups will be consulted on the Quality and Outcomes Framework (QOF) and its future form.
3. The Chancellor in his Autumn Statement set out a commitment to publish a recovery plan for General Practice access in early 2023. The Delivery Plan for Recovering Access to Primary Care will be published shortly and sets out how practices and PCNs can be supported to improve access during 2023/24 building on the contract changes outlined in this letter and expanded in Annex A.
4. The changes to the GP contract in 2023/24 set out the requirements of General Practice and PCNs with the goal of improving patient experience and satisfaction and we recognise that this will require both time and support to assess, review and implement changes. We intend to provide this support in a number of ways outlined below including freeing up workforce capacity through significant changes to the Impact and Investment Fund (IIF) and through the QOF Quality

Improvement (QI) modules. Further support for practices and PCNs will be outlined in the recovery plan.

Access requirements

5. **Offer of assessment will be equitable for all modes of access:** To ensure consistency in the access that patients can expect, the GP contract will be updated to make clear that patients should be offered an assessment of need, or signposted to an appropriate service, at first contact with the practice. Practices will therefore no longer be able to request that patients contact the practice at a later time. The IIF focus on access will support practices and PCNs working towards achieving this during 2023 recognising the changes that will need to be made.
6. **Prospective (future) record access to be offered by 31st October 2023:** To make it easier for patients to access their health information online without having to contact their practice, the GP contract will be updated so new health information is available to all patients (unless they have individually decided to opt-out or any exceptions apply) by 31 October 2023 at the latest. This builds on the 1,400 practices that are already automatically offering this access, with 6.5 million patients already able to see their prospective records. NHS England will continue to provide support to practices as more patients gain online access to their records. Support will continue nationally and through commissioners to enable practices to make this offer to all their patients.
7. **Mandate use of the cloud based telephony (CBT) national framework:** All practices need to be aware, that from the end of 2025, all analogue ISDN and PSTN lines will be removed for use in all home and business settings. From this point, only cloud-based platforms will be supported. Digital telephony (CBT) provides greater functionality for practices and patients. This includes call queueing or call back which provide a better patient experience when the lines are busy as well as management information and data to support practices gain insight and improve their responsiveness further.
8. Background research and pilot studies have demonstrated how challenging it can be to navigate the telephony market for practices and understand the offers. A Better Purchasing Framework (BPF) has been developed by NHS England to provide recommended suppliers and assure value for money. As part of the 2023/24 GP contract changes, practices will be required to procure their telephony solutions only from the framework once their current telephony contracts expire. The Delivery Plan for Recovering Access to Primary Care will describe further support available for practices who indicate they are interested in making this move in 2023/24.

Changes to Impact and Investment Fund and QOF QI modules

9. The number of indicators in the IIF will be reduced from 36 to five (worth **£59m**) and will focus on a small number of key national priorities: two indicators related to flu vaccinations, learning disability health checks, early cancer diagnosis and 2-week access indicator.
10. The remainder of the IIF will now be worth £246m and will be entirely focused on improving patient experience of contacting their practice and receiving a response with an assessment and/or be seen within the appropriate period (for example same day or within 2 weeks where appropriate, depending on urgency). 70% of the total funding, equating to £172.2m, will be provided as a monthly payment to PCNs during 2023/24 via the Capacity and Access Support Payment.
11. The remaining 30% of the total funding, equating to £73.8m, will be assessed against an access improvement plan agreed with the commissioner in quarter 1 of 2023/24. At the end of March 2024 ICBs will assess for demonstrable and evidenced improvements in access for patients and then award funding. ICBs will be provided with guidance to assist in determining the appropriate payment.
12. In 2023/24, all the QOF register indicators points will be awarded to practices, based on 2022/23 outturn once finalised, releasing £97m of funding and reduce the number of indicators in QOF from 74 to 55 (a reduction of 25%). Two new cholesterol indicators (worth 30 points~£36m) will be added to QOF along with a new overarching mental health indicator. One indicator (AF007) will be retired and replaced with a similar indicator from IIF in 2022/23.
13. This year's QOF QI modules will focus on workforce wellbeing and optimising demand and capacity in General Practice with an emphasis on using data to analyse potentially avoidable appointments and build on care navigation and use of wider workforce or local services to reduce pressure on General Practice.

Increased flexibility of ARRS

14. Recruitment through the Additional Roles Reimbursement scheme (ARRS) has been strong, and as of 31 December 2022 stands at 25,262 additional FTE. PCNs are on track to meet the 26k target for March 2024 over a year early. Staff are providing significant numbers of additional appointments, improving patient access to general practice, and providing personalised, proactive, care for the populations that they serve. To support PCNs to recruit the teams that they need, there are a number of changes to the ARRS, including adding Advanced Clinical Practitioner Nurses to the reimbursable roles, increasing the cap on Advanced Practitioners to three per PCN and removing the caps on Mental Health Practitioners.
15. During 2023/24 NHS England will review the ARRS to ensure that it is tailored to deliver future ambitions for general practice. Staff employed through the scheme will be considered part of the core general practice cost base beyond 2023/24 as previously [confirmed](#), and PCNs can offer permanent contracts where appropriate. We encourage PCNs to continue to recruit, making full use of their ARRS entitlement.

Immunisations and Vaccinations

16. Following feedback from PCNs and GPC England, there will be changes to childhood vaccinations. These include the removal of the vaccination and immunisations repayment mechanism for practice performance below 80% coverage for routine childhood programmes along with changes to the childhood vaccination and immunisation indicators within QOF which will see the lower thresholds reduced to 81% - 89% (dependent on indicator) and the upper thresholds raised to 96%.
17. In recognition of the current workload pressures in general practice, no additional requirements will be added to the PCN service specifications in 2023/24. NHS England will instead publish guidance which will suggest best practice to PCNs.
18. Further details on the 2023/24 changes will be published ahead of April including a revised Network Contract DES specification. If any changes are required to commissioner allocations, we will adjust this through the regular allocations update process.

Yours sincerely,



Dr Amanda Doyle OBE, MRCGP

National Director for Primary Care and Community Services

NHS England

Annex A – changes to the GP Contract in 2023/24

Changes to the GP Contract Regulations

Access

1. To ensure consistency in the access that patients can expect, the GP contract will be updated to make clear that patients should be offered an assessment of need, or signposted to an appropriate service, at first contact with the practice.

Patient access to their medical records

2. The GP contract regulations will be amended so that patients have online access to their prospective medical records (unless they have individually decided to opt out or any exceptions apply) by 31 October 2023 at the latest.
3. The existing requirements in the GP contract regulations relating to providing online access to historic coded and full records will also be amended so that they are consistent with access to information under the GDPR. Amendment of these existing requirements will also provide clarity on how practices are required to offer, promote and provide online access to patient records.

Supporting Cloud Based Telephony

4. Practices will be required to procure their telephony solutions only from the Better Purchasing Framework once their current telephony contracts expire.

Simplification of GP registration requirements

5. In order to support the simplification of GP registration requirements, the term 'medical cards' will be removed from the GP contract regulations.

GP retention scheme

6. The four-session cap within the GP retention scheme was lifted during the pandemic and will now be removed permanently. Sessions worked above the cap will be funded by the employing general practice. Any further potential changes to the scheme will be picked up as part of the current review of GP recruitment and retention scheme being led by NHS England.

The Additional Roles Reimbursement Scheme (ARRS)

7. In 2023/24 the following changes will be made to the ARRS:
 - a. increasing the cap on Advanced Practitioners from two to three per PCN where the PCN's list size numbers 99,999 or fewer, and from three to six where the PCN's list size numbers 100,000 or over.
 - b. reimbursing PCNs for the time that First Contact Practitioners spend out of practice undertaking education and training to become Advanced Practitioners.
 - c. including Advanced Clinical Practitioner Nurses in the roles eligible for reimbursement as Advanced Practitioners (APs).
 - d. introducing apprentice Physician Associates (PAs) as a reimbursable role.

- e. removing all existing recruitment caps on Mental Health Practitioners, and clarifying that they can support some first contact activity.
 - f. amending the Clinical Pharmacist role description to clarify that Clinical Pharmacists can be supervised by Advanced Practice Pharmacists.
8. During 2023/24 the ARRS will be reviewed to ensure that it remains fit for purpose and aligned to future ambitions for general practice.

Changes to the PCN service specifications

9. In recognition of the current workload pressures in general practice, no additional requirements will be added to the PCN service specifications in 2023/24. NHS England will instead publish guidance which will suggest best practice to PCNs.

Enhanced Access

10. Following feedback from GPC England, NHS England has agreed to review the enhanced access requirements in 2023/24 once PCNs have had the opportunity to operate for several months, and to enable links into the wider conversations on urgent and emergency care.

Investment and Impact Fund (IIF)

11. The following changes will be made to the IIF in 2023/24:
- the number of indicators will be reduced to five to support a small number of key national priorities: flu vaccinations, learning disability health checks, early cancer diagnosis and 2-week access indicator. The value of these indicators will be £59m.
 - the remainder of the IIF will now be worth £246m and will be entirely focused on improving patient experience of contacting their practice and being assessed and/or seen within the appropriate timeframe (for example same day or within 2 weeks where appropriate).
 - 70% of the total funding, equating to £172.2m, will be provided as a monthly payment to PCNs during 2023/24, similar to monthly QOF aspirational payments.
 - the remaining 30% of the total funding, equating to £73.8m, will be assessed against 'gateway criteria' at the end of March 2024 by ICBs and paid to PCNs for demonstrable and evidenced improvements in access for patients.
12. The Learning Disability Health Checks Indicator will be amended by adding a requirement to record the ethnicity of people with learning disabilities.
13. A Personal Care Adjustment (PCA) will be added to the indicator on FIT testing (CAN-02) so that PCNs are not being incentivised to refer for FIT testing when there is rectal bleeding. Additional support will be provided where practices are struggling to access tests. This will involve setting up a national 'supply chain' escalation system that any GP practice can contact if local supply issues arise.

Additional support is available from the regional cancer alliance to fund FIT kits where needed.

Quality and Outcomes Framework (QOF)

14. QOF will be streamlined in 2023/24 by income protecting all register indicators. This will release £97m of funding and reduce the number of indicators in QOF from 74 to 55 (a reduction of 25%). Funding will be paid to practices based on 2022/23 performance monthly once the 2022/23 QOF outturn is finalised.
15. Two new cholesterol indicators (worth 30 points~£36m) will be added to QOF along with a new overarching mental health indicator. These will be funded by retiring indicator RA002 (the percentage of patients with rheumatoid arthritis, on the register, who have had a face-to-face review in the preceding 12 months) and reducing the value of DEM004 (annual dementia review). The mode of review of DEM004 will also be amended to be determined through shared decision making with the patient.
16. Indicator AF007 will be retired and replaced with the indicator below (which was in the IIF as CVD-05 in 2022/23):
 - AF008: Percentage of patients on the QOF Atrial Fibrillation register and with a CHA2DS2- VASc score of 2 or more, who were prescribed a direct-acting oral anticoagulant (DOAC), or, where a DOAC was declined or clinically unsuitable, a Vitamin K antagonist (12 points, LT 70%, UT 95%).
17. There will also be a number of other small changes to indicator wordings and values in 2023/24.
18. The QOF QI modules in 2023/24 will focus on:
 - workforce and wellbeing
 - optimisation of demand and capacity management in general practice.
19. Work will need to be undertaken during 2023/24 to review QOF in its current form with the aim of making it more streamlined and focussed. The profession, patients and the broader system will be consulted to determine the most appropriate form in 2024/25.

Childhood immunisations

20. The following changes will be made to childhood vaccinations:
 - the removal of the V & I repayment mechanism, removing the payment clawback for practice performance below 80% coverage across the routine childhood programmes.
 - changes to the childhood V & I QOF indicators.
 - clarification of the wording in the SFE that an Item of Service (IoS) fee will be payable for vaccinations administered for medical reasons and incomplete or unknown vaccination status ('evergreen offer') for the

programmes outlined in the SFE Part 5 Vaccinations and Immunisation, section 19.

21. The changes to the childhood vaccination and immunisation indicators within QOF will see the lower thresholds reduced to 89% (VI001) 86% (VI002) and 81% (VI003) and the upper thresholds raised to 96%¹. All the points for each indicator will be put into a sliding scale of reward between the lower and upper threshold. Reducing the lower thresholds will decrease the number of practices receiving no payment across the three indicators.
22. A new Personalised Care Adjustment will also be introduced for patients who registered at the practice too late (either too late in age, or too late in the financial year) to be vaccinated in accordance with the UK national schedule (or, where they differ, the requirements of the relevant QOF indicator).

Vaccination and Immunisations

23. The contract will also be updated to reflect forthcoming changes to the routine vaccination schedule as recommended by the Joint Committee on Vaccinations and Immunisation (JCVI), specifically in relation to Human papillomavirus (HPV), and Shingles.

Human papillomavirus

24. JCVI [recommended](#) a move from a two-dose schedule to a one dose schedule for the routine adolescent programme up to the age of 25 years. This change will align HPV vaccine doses across age groups, aligning the school's programme, sexual health and general practice provision, therefore minimising the risk of conflicting or missing doses. This change will not apply to those who are immunocompromised and those known to be HIV positive for whom the three-dose schedule will remain.
25. There will be a change from a two-dose to a one-dose HPV programme for those aged 14 to 25 years from 1 September 2023 to align with the school's programme.
26. General practice delivery remains opportunistic or on request. Eligibility remains up to 25 years of age for girls born after 1 September 1991 and boys born after 1 September 2006. This difference is due to the programme for boys being introduced at a later date (2019).
27. The IoS payment will continue to be paid at £10.06 per dose administered.

¹ VI001: The percentage of babies who reached 8 months old in the preceding 12 months, who have received at least 3 doses of a diphtheria, tetanus and pertussis containing vaccine before the age of 8 months; VI002: The percentage of children who reached 18 months old in the preceding 12 months, who have received at least 1 dose of MMR between the ages of 12 and 18 months; VI003: The percentage of children who reached 5 years old in the preceding 12 months, who have received a reinforcing dose of DTaP/IPV and at least 2 doses of MMR between the ages of 1 and 5 years.

28. Further information on the programme change will be provided in due course.

Shingles

29. The JCVI advised in 2018 that Shingrix had been shown to be effective and cost-effective, recommending its use in the NHS Shingles Programme for individuals for whom the live Zostavax was contraindicated. This change was implemented in the programme in September 2021.

30. In [2019 JCVI recommended](#) the replacement of Zostavax with Shingrix and the expansion of the cohorts in the Shingles Vaccination Programme. JCVI have recognised that there may be more clinical benefit from starting Shingles vaccinations at a lower age, with modelling indicating that a greater number of cases would be prevented with vaccination at 60 years for immunocompetent and 50 years for immunocompromised.

31. From 1 September 2023 changes to the Shingles Programme to implement the JCVI recommendations will be as follows:

- replacement of Zostavax with the 2-dose Shingrix vaccine as Zostavax goes out of production.
- 2-dose Shingrix vaccine for the current 70-79-year-old cohort with a period of 26 weeks to 52 weeks between doses following the depletion of Zostavax.
- expansion of the immunocompromised cohort to offer 2-dose Shingrix to individuals aged 50 years and over with a period between doses of 8 weeks to 26 weeks.
- expansion of the immunocompetent cohort to offer 2-dose Shingrix routinely to individuals aged 60 years and over with a period between doses of 26 weeks to 52 weeks, remaining an opportunistic offer up to and including 79 years of age.

32. The expansion of the immunocompetent cohort will be implemented over two five-year stages as follows:

- first five-year stage (1 September 2023 to 31 August 2028): Shingrix will be offered to those turning 70 and those turning 65 years of age in each of the five years as they become eligible.
- second five-year stage (1 September 2028 to 31 August 2033): Shingrix will be offered to those turning 65 and those turning 60 years of age in each of the five years as they become eligible.

33. Additionally, practice call/recall for the immunocompromised and immunocompetent cohorts as they become eligible for the programme will be implemented from 1 September 2023, as well as catch-up call/recall for the newly eligible immunocompromised 50-69-year-old cohort.

34. Shingles can be delivered at any time during the year thus enabling practices to manage timing for when the individual is invited and can also be opportunistically delivered if clinically appropriate when an individual attends the practice for another reason.

35. The Shingles GPES extraction will be updated to accommodate these changes.

36. Further information on the programme changes and management of the immunocompetent cohort expansion will be provided in due course.

Unchanged programmes

37. The following programmes will continue unchanged for 2023/24:

- 6-in-1 (DTaP/IPV/Hib/HepB)
- MenB
- Rotavirus
- PCV (infant pneumococcal)
- Hib/MenC
- MMR provision to remain unchanged for both the 0-5-year-olds programme and 6 years and over programme
- 4-in-1 pre-school booster (DtaP/IPV)
- 3-in-1 booster (td/IPV)
- Men ACWY (provision for those aged up to 25 years who miss the schools programme)
- PPV (65-year-olds and 2-64-year olds in defined clinical risk groups)
- HepB (Babies)
- Pertussis (pregnant women).

Weight Management Enhanced Service

38. The Weight Management Enhanced Service will continue into 2023/24, retaining the £11.50 referral payment.

BRIEFING FOR STAKEHOLDERS

Same day access to primary care

What is same day access?

NHS North West London is introducing an ambitious but achievable plan to improve same day access to primary care for patients.

This approach was co-developed by 10 primary care networks (PCNs -6 individual PCNs and 1 whole borough) between August and December 2023. The approach is aligned to the recommendations set out in the national 'Fuller Stocktake' review of primary care.

The new approach sees the introduction of 'same day access hubs' across North West London. Patients contacting their GP surgery either online or by telephone may be directed to the same day access hub for triage to the right service for their needs. This is an approach that will evolve over time but ultimately, patients may have telephone, online, video or face to face contact with staff at the hub, who will direct them to the right place. This could be a community pharmacy, a routine appointment with their GP or an urgent appointment with their GP. Where appointments are not available with their own GP or the patient will get easier access, they may be directed to a neighbouring practice.

Hubs can be either physical or virtual and will usually be managed through the local PCNs, with each hub including a senior GP. All clinical decisions will have a senior clinical decision making and GP lead, with support from a multi-disciplinary team.

This approach ensures patients needing primary care services that day are more likely to be looked after in the quickest way. The plan is for this to apply to same day cases only.

Primary care access is the issue most consistently raised by North West London residents we speak to about health services. We have launched a public information campaign called *We Are General Practice* in order to explain how primary care is changing, the challenges it faces and some of the new roles and proposed solutions to improve access and care for patients.

Frequently asked questions

Why is NHS North West London introducing same day access hubs?

We want to increase access to primary care services for patients. The most consistent message we hear through talking to residents and patients is that access to primary care is difficult: they are struggling to get through to their GPs or to get a timely appointment, especially when they need one the same day.

Same day access hubs bring GP practices together in networks, making it easier to arrange appointments the same day and to support patients in finding the care that is best suited to their needs. Patients who need a GP appointment that day are more likely to get one and GPs will be able to focus on providing proactive care to patients who need it. Where appropriate, patients may be referred to other services best suited to their needs, such as community pharmacists, physiotherapists or nurses. GPs will continue to see patients who need to see them and will be able to offer proactive continuity of care to people with long term conditions and others who need it.

Will I still be able to see my GP?

Of course. The aim of this programme is to make access to GP appointments easier for those who need them.

Will non-clinical staff such as Care Navigators and Care Co-ordinators be making decisions about my care?

No. All clinical referrals and clinical decisions will be made by clinicians. Those in supporting roles like Care Navigators and Co-ordinators will signpost patients to the right care for them. They will work in an identical way to how they work in practices now, but with greater clinical oversight as the same day access hubs will all include senior GPs and multi-disciplinary teams and with a better understanding of the types of services that might support their population's needs.

Clinical Safety remains our top priority. Clinical consultations will still occur with qualified health professionals and these will be appropriately supervised by senior clinicians. Decisions made by the same day access hubs will happen with the oversight of the senior clinical decision maker. Our aim is by streamlining the way patients achieve access we will be able to enable more patients to seek advice and treatment and that this will improve the care patients receive.

Will I have to travel further for care?

Where appointments are needed the same day and no slots are available at your local practice, it is possible that you might be referred to a different practice, in much the way patients sometimes see different GPs out of hours. You may also be referred to another service such as a community pharmacist if they could better meet your needs.

This might involve travel in some cases, but not all same day access hubs will be physically co-located: it is for local primary care networks to decide whether their hubs are physical or virtual. Patients can currently move to other local practices to access some services such as physiotherapy, ECG testing or particular services not available at their own practice location. This will work in a similar way.

What influence can patients have on the new system?

We are asking primary care networks to work with their patients to co-design the same day access hubs and how they will work in their area.

Are GPs being mandated to introduce same day access hubs?

Same day access hubs form part of our 'single offer' to general practice, which aims to introduce a consistent approach to enhanced care across North West London. If practices are not part of same day access hubs, their patients may not be able to access other parts of

the single offer, such as specialist diabetes and mental health care. Same day access hubs are not mandated, but we are recommending them to practices and they are part of our single offer as this will help them deliver better access for all the PCNs patients.

Are same day access hubs there to provide appointments when a practice has none left?

No. Same day access hubs are about ensuring more patients get the help they need the same day. They are not a 'surge' service for when practices run out of appointments. This is about pooling all the clinical resources in an area – GPs, community pharmacists, nurses, physiotherapists and other clinicians – to ensure people can quickly access the care they need.

Will the new approach be introduced from 1st April?

There is a misapprehension in some quarters that everything will be expected to change on 1st April, whereas our intention is to introduce new ways of working gradually, managed at local level by PCNs. The aim is that practices and PCNs are given time to co-design and collaborate with colleagues and patients to help this way of working improve primary care access. We know that this will take time and will be a gradual process as each PCN profile is different. There will be no expected radical change but an adopting of new ways of working over time.

What has been the experience of early adopters of the scheme?

The primary care networks who were early ('wave 1') adopters reported that they have been able to provide their most complex patients with increased access and time with their GPs as the simpler requests have been managed by signposting to other parts of the system. Patient experience reports have been positive,

Will practice staff recruited through the Additional Roles Reimbursement Scheme (ARRS) will be expected to work differently, and what will be the impact on their practice?

We are flexible about how the plan is delivered. Care coordinators will be trained signpost patients to the right care; this could be from their own practice in a virtual hub if that is the preferred local approach, or from a physical hub at an agreed location. The means of delivery is a matter for PCNs to decide locally and in a way that works best for the population of residents

Practices are already working collaboratively at scale to deliver out of hours care or that patients are already being signposted to other members in the primary care systems

What was the involvement of KPMG?

KPMG provided programme management support and shared good practice from elsewhere, supporting PCNs and NHS North West London as they developed their approach, which is closely aligned to the recommendations of the national 'Fuller Stocktake' of primary care, led by Dr Claire Fuller.

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Report to Scrutiny

Item Number:

Contains Confidential or Exempt Information

No
(If yes, state which paragraph of the Access to Information rules the exemption relates)

Subject of Report:	Ealing Safeguarding Adults Partnership Board – Annual Report and Assurance Statement 2022-23
Meeting:	Health and Adult Social Services Scrutiny Panel 19 March 2024
Service Report Author:	Robert McCulloch-Graham Independent Chair Ealing Safeguarding Adults Partnership Board
Scrutiny Officer:	Anna-Marie Rattray Overview and Scrutiny Officer Email: rattraya@ealing.gov.uk Tel: 020-8825 8227
Cabinet Responsibility:	Councillor Josh Blacker (Healthy Lives)
Director Responsibility:	Kerry Stevens Strategic Director, Adults Services Service and Public Health
Brief:	To consider the 2022-23 annual report and assurance statement of Ealing Safeguarding Adults Partnership.
Recommendations:	To consider the annual report and make recommendations for further improvements accordingly.

1. Ealing Safeguarding Adults Partnership Board – Annual Report & Assurance Statement 2022-23

1.1 The Ealing Safeguarding Adults Partnership Board’s annual report and assurance statement within Appendix 1 stands alone as a mandatory document required by government and to be published for the general public.

1.2 It has been created in consultation with and with contributions from safeguarding partners in the borough to provide an overview of how adults are safeguarded; and how the partners work together to improve services for adults.

2. Legal Implications

2.1 Mandatory annual publication to government and for public information

3. Financial Implications

3.1 Not applicable.

4. Other Implications

4.1 Not applicable.

5. Background Papers

5.1 Appendix 1: Ealing Safeguarding Adults Partnership Board – Annual Report and Assurance Statement 2022-23.

Consultation

Name of Consultee	Department	Date Sent to Consultee	Date Response Received from Consultee	Comments Appear in Report Para:
Internal				
Cllr Ben Wesson	Panel Chair	17.11.23		
Cllr Andrew Steed	Panel Vice Chair	17.11.23		
Amma Bedeau	ESAP Board Manager	17.11.23		
External				
Robert McCulloch-Graham	Independent Chair, Ealing Safeguarding Adults Partnership			

Report History

Decision Type: Non-key Decision	Urgency item? No		
Authorised by Cabinet Member:	Date Report Drafted:	Report Deadline:	Date Report Sent:
Report No.:	Report Author and Contact for Queries:		
	Amma Bedeau ESAP Board Manager bedeaua@ealing.gov.uk		

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Ealing Safeguarding Adult Board

Annual Report

2022 - 2023



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1. Glossary of Terms

- ADASS** **Association Directors of Adult Social Services**
The Association of Directors of Adult Social Services. A membership charity and leading independent voice of Adult Social Care.
- DoLS** **Deprivation of Liberty Safeguards**
The DoLS procedure is designed to protect your rights if the care or treatment you receive in a hospital or care home means you are, or may become, deprived of your liberty, and you lack mental capacity to consent to those arrangements.
- ESAB** **Ealing Safeguarding Adult Board**
The purpose of ESAB is to help and protect adults in its area from abuse and neglect through co-ordinating and reviewing a multi-agency approach across all member organisations.
- SAB** **Safeguarding Adult Board**
The overarching purpose of an SAB is to help safeguard adults with care and support needs.
- SAR** **Safeguarding Adult Reviews**
A Safeguarding Adults Review takes place an adult who has needs for care and support has experienced abuse or neglect and agencies could have worked better together to protect them.

2. Introduction and Welcome from the Chair

As the Independent Chair of the Ealing's Adult Safeguarding Board, I would like to thank you for your interest in safeguarding our communities in Ealing. I hope this annual report of the Board serves its purpose of bringing to life the work and efforts of all our services in protecting the lives of vulnerable adults in Ealing.

I joined the partnership in June of this year. This report details the work from April 2022 to April 2023. At this time, the board was chaired by Sheila Lock, and I would wish to record my thanks to Sheila for the work and leadership she has provided the Board, over the last 6 years. As all partners are aware Sheila was a powerhouse in leading the safeguarding partnership here in Ealing, and stepping into her role is hugely exciting and more than a bit daunting. I would also wish to record my personal thanks for the care and preparation she gave me for joining the partnership.

Here in Ealing and across the country we remain in very difficult and challenging times. We have the continued pressure of a pandemic which refuses to end, a war in Europe, and this coupled with a national economic crisis that is severely impacting locally on our services and on our most challenged communities.

These challenges have led to a significant increase on pressure for our services. As a result, we have seen the number of case referrals increase and at the same time the levels of acuity and complexity have increased too. All of this, plus further difficulties in the recruitment and retention of staff, puts us in a period of unprecedented challenge. Our communities, and in particular those households who were already in economic hardship are struggling to get by, our work has never been in such demand.

Whilst we have witnessed our communities, supported by statutory and third sector services, responding in generating further routes of support. There remain however other elements of abuse in our communities, which our vulnerable adults need protection from. Whilst in comparison with our population numbers they may appear few, their very nature often leaves us shocked and saddened.

The Board has investigated some of these cases where we feel there is learning for the partnership, which will reduce the level of such risks. These lessons have already led to changes and improvements in practice and communication between services and professions. More so, they have strengthened our resolve and determination to protect those in our society who are less able to protect themselves.

In the few months I have been in Ealing, I have heard directly from front line staff, about their daily work. I have been around the public sector for many years, and I remain astounded, humbled and reassured by their commitment and determination to face up to all of these issues and beat them, for the sake of those they look after. So, whilst we will continue to welcome external challenge, and challenge ourselves, over the next year we will also take time to share our successes too, and there are many.

I would like to thank everyone for the work in the last year, and for this report. I am also looking forward to this new year, and for us to be collectively taking on these challenges to the betterment of all our Ealing communities.

Kind regards

Rob McCulloch-Graham, Independent Chair of Ealing Safeguarding Adults Board

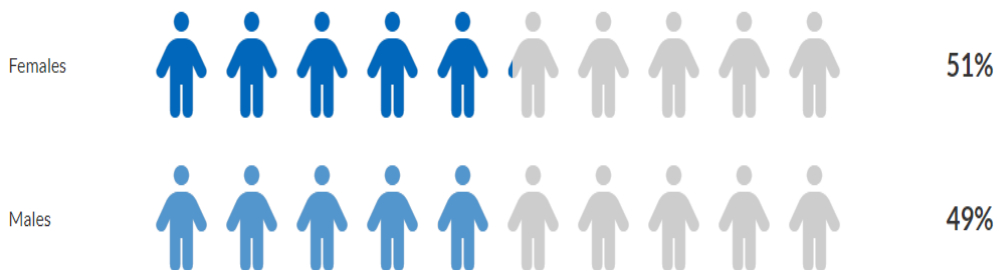
3. Ealing – our area

The detailed breakdown of the Ealing population characteristics can be accessed at [Ealing Data](#), This data is collated using the 2021 census: Population characteristics

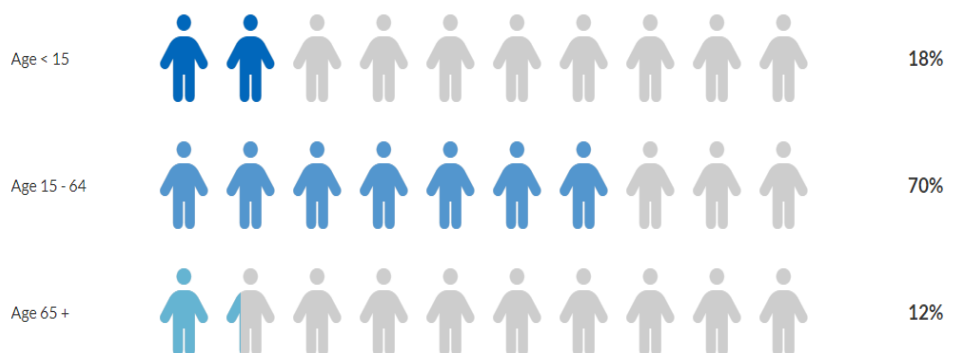
These are some headlines:

The population of Ealing has risen from 300,946 in 2001 to 367,115. The numbers of males and females in Ealing are evenly spread – 180,910 males (49%) and 186,205 (51%) females.

Population by sex for Ealing (2021)

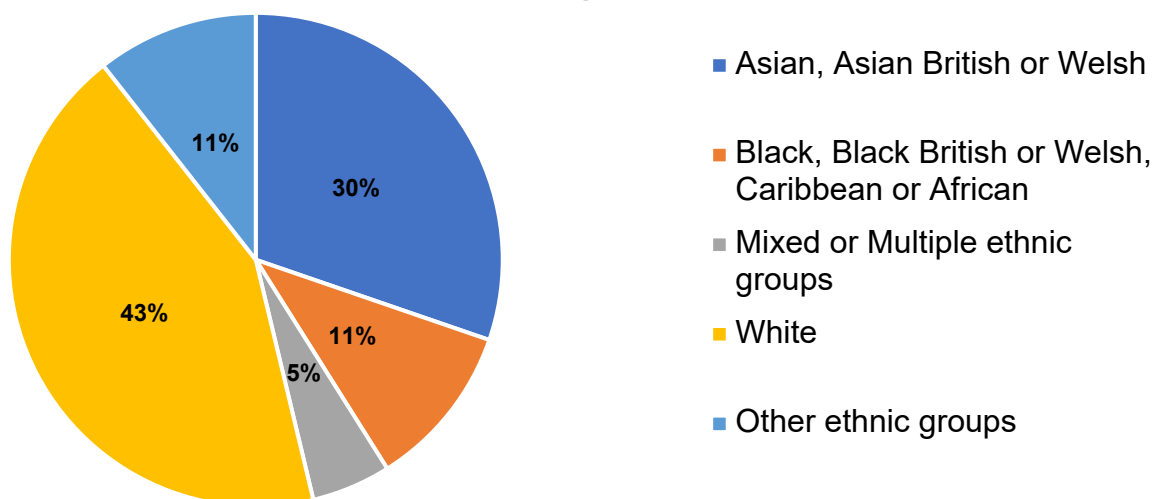


Population by broad age group for Ealing (2021)



The population of 16-64 year olds in Ealing is projected to be at **60.5%**, however the percentage of people aged 65 and over will reach **21.5%** in mid-2043.

Ethnicities of Ealing residents



4. What is safeguarding and the role of the Board?

As a safeguarding Board we have been active in the last year to ensure that safeguarding is well understood across the system. We have used resources developed by the Association of Directors of Adult Social Services to engage with front line workers across the system and with providers to engage in conversations about this topic.

The Care Act 2014 Statutory Guidance confirms that “the main objective of a SAB is to assure itself that local safeguarding arrangements and partners act to help and protect adults in its area” who meet the safeguarding criteria (chapter 14.133).

For us locally, it is about people and organisations working together to reduce risk and prevent abuse or neglect, whilst at the same time making sure that the adult’s wellbeing is promoted including, where appropriate, having regard to their views, wishes, feelings and beliefs in deciding on any action. We must recognise that adults sometimes have complex interpersonal relationships and may be ambivalent, unclear, or unrealistic about their personal circumstances.’

Abuse and neglect can take various forms including physical abuse, domestic abuse, sexual abuse, psychological or emotional abuse, financial or material abuse, modern slavery, discriminatory abuse, organisational or institutional abuse, neglect and acts of omission and self-neglect. In the last year we worked with our practitioners on what constitutes safeguarding, holding a series of virtual workshops and using the materials produced by ADASS to promote discussion. We have noted that there have been more referrals relating to younger adults and want to understand the reasons for this further next year. We hope that it is an impact of our raising awareness, but further reflections are contained in the section looking at performance.

The Care Act 2014 introduced **Safeguarding Adults Boards** and gave them the responsibility to seek assurance that there are effective local safeguarding arrangements in place. The three statutory functions of SABs are to publish an Annual Report, a Strategic Plan, and to commission Safeguarding Adult Reviews when required. The SABs hold the partner agencies accountable for how they work together to protect adults from abuse and neglect.

In our discussions with front line services, we have encouraged conversations regarding abuse and neglect in all its forms, but have also considered, how section 42 enquiries are initiated and issues around individual’s capacity for self-determination. We know that such issues are complex, and that a person’s capacity can fluctuate or can apply differently to different kinds of decisions. We wanted therefore to assure ourselves that professionals engage in these practice discussions to better enable each other to be able to identify an individuals' ability and mental capacity .

Underpinning this approach has been the commitment to

- Collaboration
- Having user views at the forefront
- And acting in a timely and coordinated way

These principles are articulated in legislation. The Care Act 2014 requires partner agencies and services to work together to protect adults at risk of abuse and neglect.

Joined up safeguarding processes and practice ensure that:

- ✓ joint working prevents, reduces, or delays the risk of harm to the adult
- ✓ safeguarding concerns are identified and reported to support the adult; and
- ✓ those who have a duty to enquire, act in a timely, person centred and co-ordinated way

Under **Section 42 of the Care Act**, the Local Authority has a responsibility to undertake an **Enquiry** where there is a concern that an adult with care and support needs is unable to protect themselves when experiencing or at risk of abuse or neglect. If the criteria in Section 42(1) are met, then the local authority must conduct an Enquiry and decide on any action under section 42(2).

Any Enquiry should include an attempt to gain the views of the adult at risk as to what is important to them and what they would like to happen, providing any necessary support such as an advocate. This is called **'Making Safeguarding Personal.'** If the adult at risk has the capacity to make a decision, their wishes must be respected. However, this view must be balanced with an assessment of the risks and an agreement reached as to how these risks will be monitored and managed.

5. ESAB Vision, Values and Principles

As a Board it is important that we set out clearly what we stand for as a partnership. We are committed to an inclusive approach to Partnership, firmly believing that it takes a whole system approach to protect the most vulnerable in our society.

We have a number of groups focusing on the work of the partnership, details of those groups and their Terms of Reference can be accessed at [Ealing Safeguarding Adults Board webpage](#). We work in close collaboration with other partnerships and have fostered an approach that draws together work with the ESCP, Safer Ealing Community Safety Partnership and the Learning Disability Partnership.

Together we are committed to delivering the Ealing Safeguarding Adult Board vision through the Strategic Business Plan, according to an agreed set of values and principles.

These were reviewed in May 2022.

Our values and principles have been developed by collaborating, through a variety of engagement activities. We have also sought to understand better, the experiences of Race Equality in the Borough. The publication of the independent Race Equality commission report and its findings in January 2022 has given us a greater understanding of the experiences of our Ealing community and we are committed to the seven priorities for change, which we have sought to fully embed into our values and principles but to also challenge ourselves to incorporate meaningful action into our safeguarding priorities. A copy of the report can be accessed here: [Race Equality Report - Do something good](#)

5.1. ESAB Vision

All partners in Ealing are committed to working together so that all adults in the Borough are safe, well, and able to live fulfilling lives. We seek to actively collaborate, challenge, and support each other to safeguard people's rights, to tackle inequalities and to narrow the gap in adverse outcomes.

5.2. ESAB Values

These values are system values that we expect to see across our partnership in both front-line practice and or strategic responses

- Person centred and focused interventions based on the need and informed by the wishes of the adult.
- Respectful of families, carers, and friends
- Outcome driven
- Collaborative
- Transparent and open in our practice with each other and with those we work with
- Inclusive

5.3. ESAB Principles

We strive to work with adults and their families and carers to ensure.

- Adults with care and support needs are at the heart of what we do, and we will learn from the actions we take.
- We will make a difference to the lives of those we work with.
- We will ensure that the adults are at the heart of our discussions and the actions we take.
- We will challenge disproportionality in adverse experience and outcomes across the system and underpin our work with a clear focus on equality of opportunity and life experience.
- We will share information and work together with openness, respect, trust, and confidence.
- We will challenge each other when this is needed and will welcome challenge in return, knowing this helps keep our system safe.
- We will address the well-being needs of those who need help, at the earliest opportunity and prevent the need for later intervention whenever possible – providing the right help at the right time.

6. The six statutory principles of adult safeguarding



Empowerment: People being supported and encouraged to make their own decisions and informed consent.

Prevention: It is better to take action before harm occurs.

Proportionality: The least intrusive response appropriate to the risk presented.

Protection: Support and representation for those in greatest need.

Partnership: Local solutions through services working with their communities. Communities have a part to play in preventing, detecting, and reporting neglect and abuse.

Accountability: Accountability and transparency in safeguarding practice.

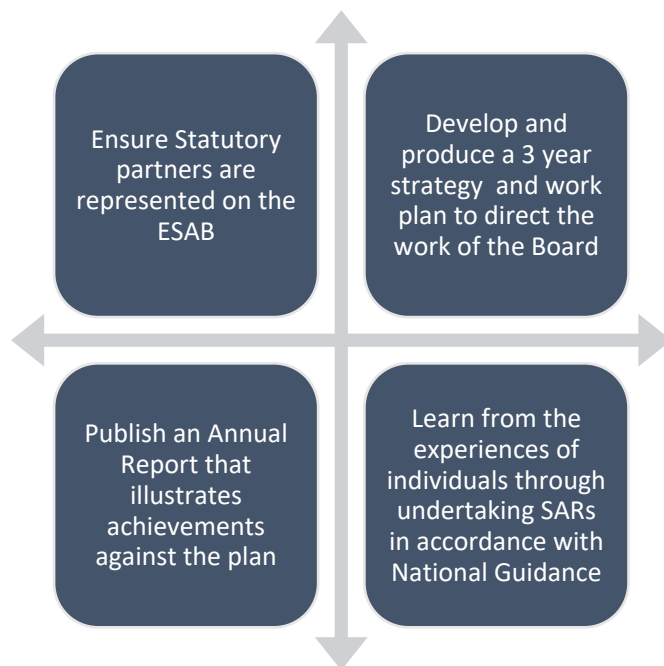
We want Safeguarding in Ealing to be seen as everybody's business.



Safeguarding is a golden thread running through our work as a Board and in our work with other partnerships, making sure there is support to build strong and resilient neighbourhoods and resolution for those experiencing abuse or neglect.

7. Partnership Arrangements

As a Partnership we have tried to make sure that the objective of our work covers the core elements required of us by the Care Act 2014. These elements are illustrated below



These elements guide the structure of the Board arrangements and contribute to our ability to oversee the arrangements to keep adults safe in Ealing.

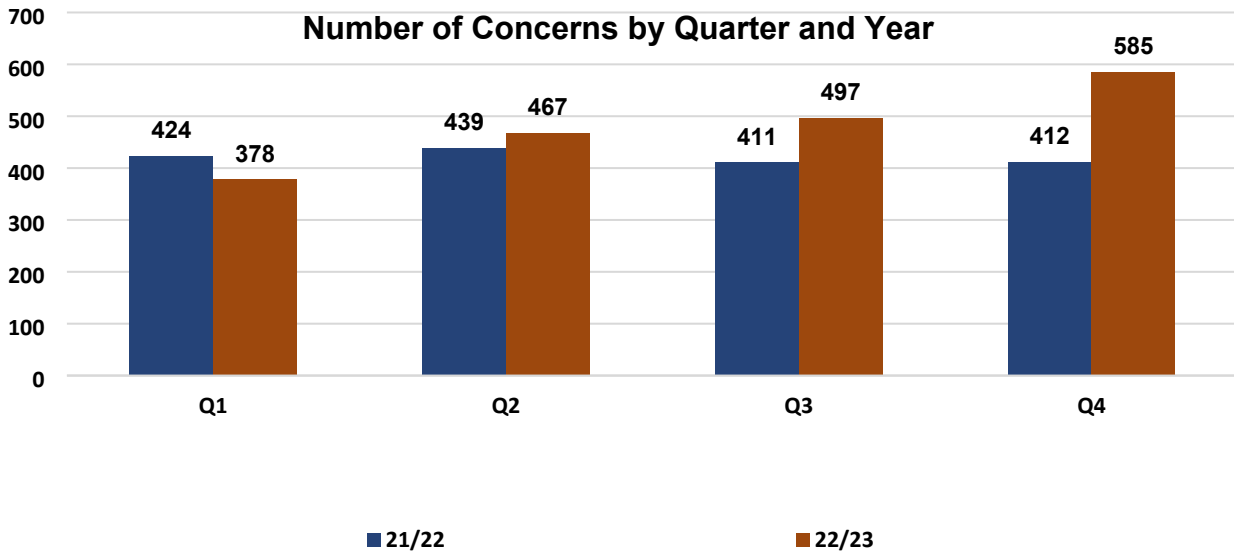
As a Board we have continued to focus on further developing high quality frontline practice, around the dynamic range of issues associated with prevention and protection.

The report compliments the Children’s Safeguarding arrangements, they support each other as a holistic response to protect Ealing residents. It also represents our ambition to tackle issues around shared problems, such as Safer neighbourhoods, Domestic abuse, and Think Family approaches.

The Ealing Safeguarding Adults Board works to ensure that adults across Ealing are safeguarded, and that our borough is an increasingly safe place for all to flourish

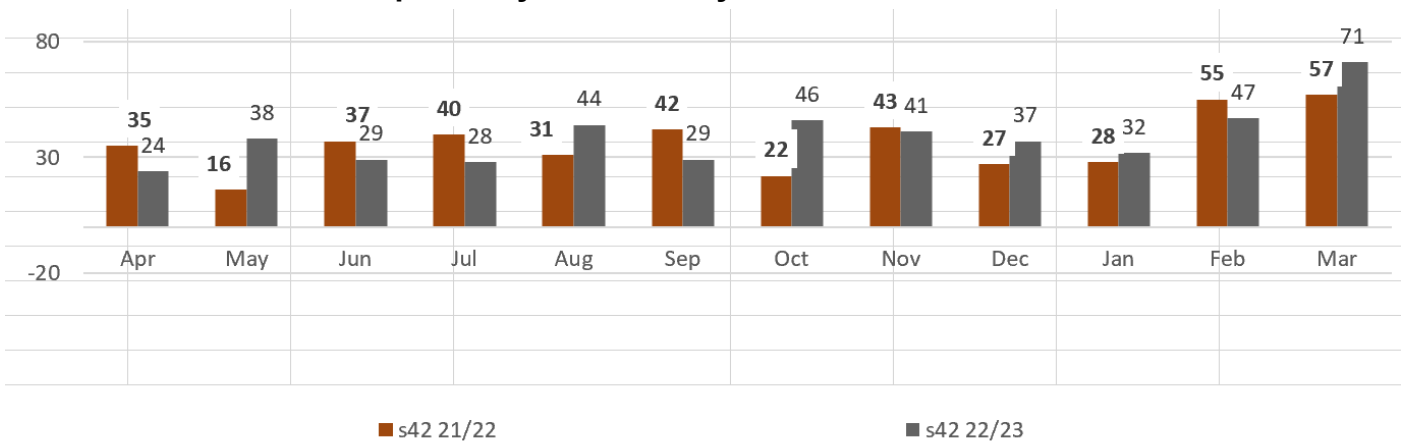
8. Safeguarding – the data 2022-23

Safeguarding performance reporting has been an area of ongoing focus for us as a Board. Locally the Safeguarding Effectiveness subgroup scrutinises quarterly data from Partners enabling discussions on areas of exception or anomaly.



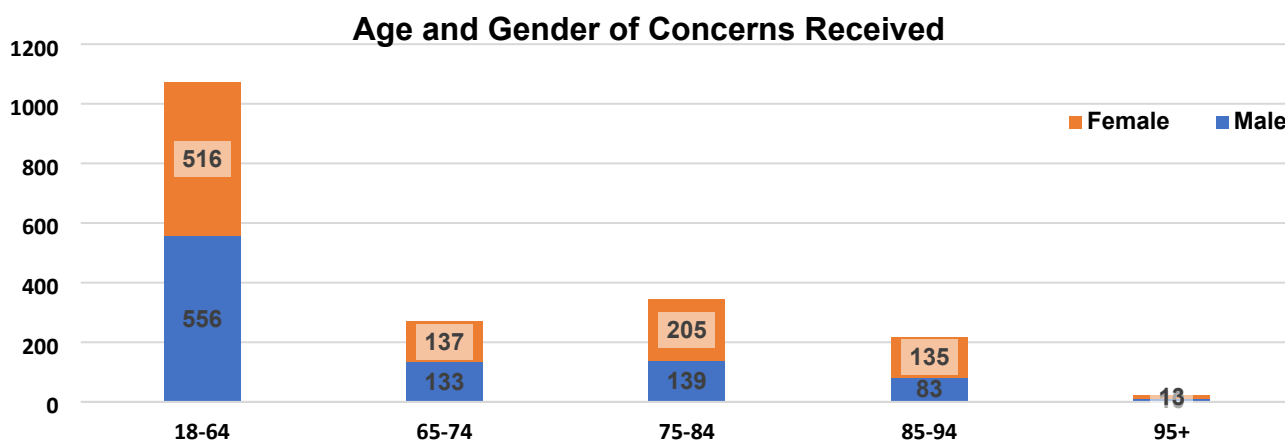
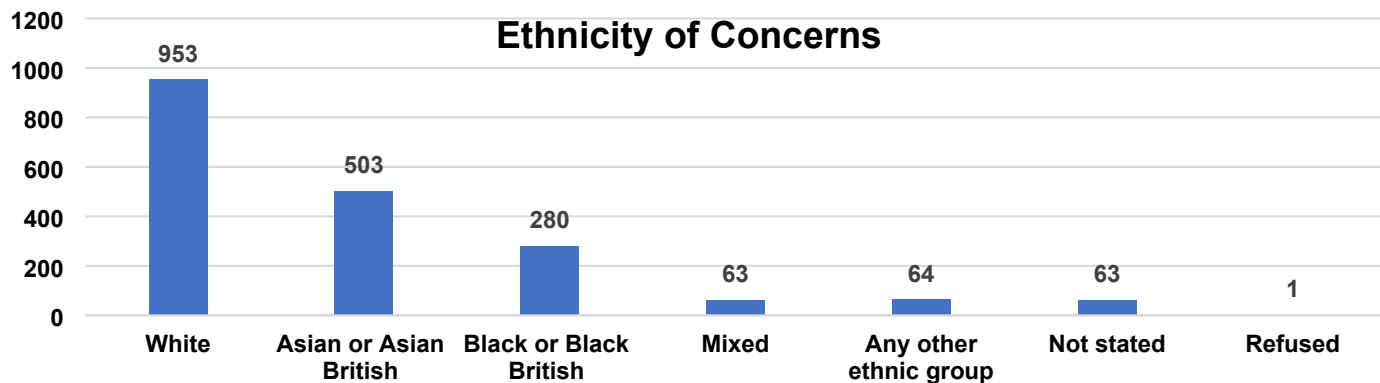
In total there were 1927 concerns reported between 1 April 2022 and 31 March 2023, up from 1686 in 2021/22. The graph shows the concern numbers have risen significantly on last year especially in last quarter.

Number of Section 42 Enquiries by month and year

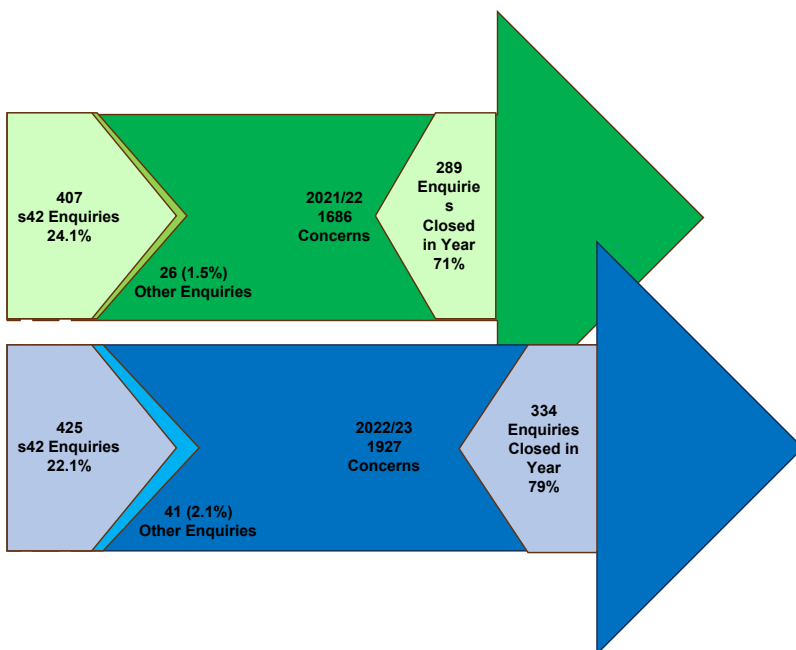


The number of safeguarding enquiries (s42 of the Care Act) started have also risen slightly from 433 last year to 466 this year. March was particularly high.

The ESAB Effectiveness subgroup examines the impact of race and gender on the individual users of statutory services. The ethnicity profile of concerns received outlines the breakdown.



Safeguarding Concerns– Progression and Closure

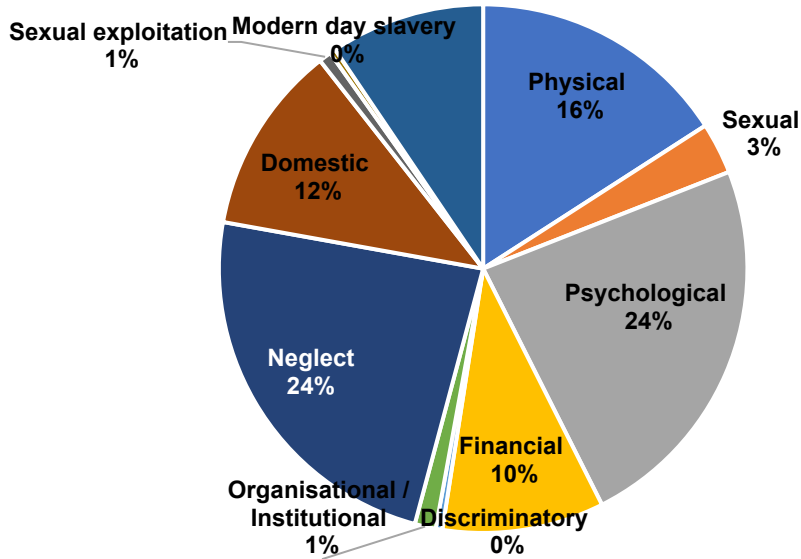


Ealing receives a large number of potential safeguarding concerns, but most do not lead to a formal enquiry.

In 2022/23 under a quarter (24.2%) of all concerns led to an enquiry. Some enquiries take longer to complete, so of the enquiries started in 2022/23, just under four-fifths (79%) completed within the year.

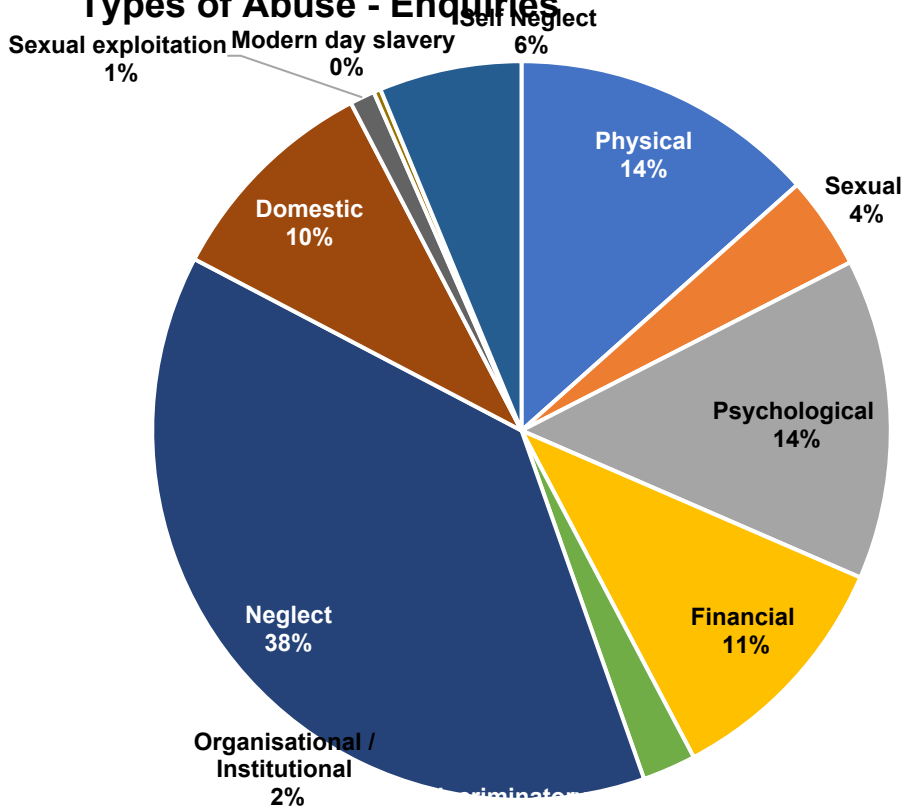
The diagram shows this is a decrease on 2021/22 when over a quarter (25.6%) of concerns led to an enquiry, but an increase in the percentage completed in the year (71% in 2021/22).

Types of Abuse - Concerns



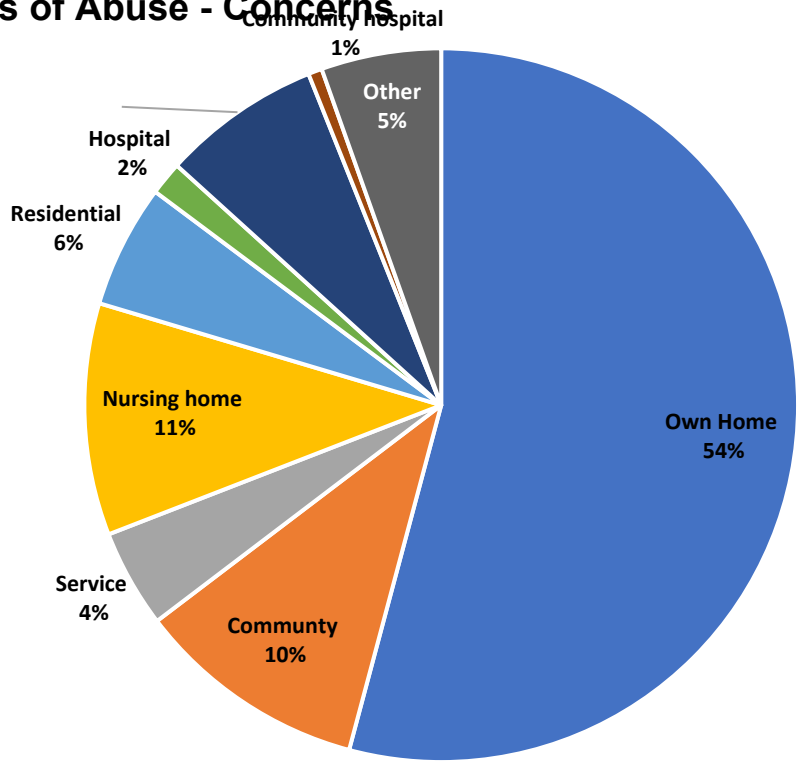
588 concerns have been raised relating to neglect

Types of Abuse - Enquiries



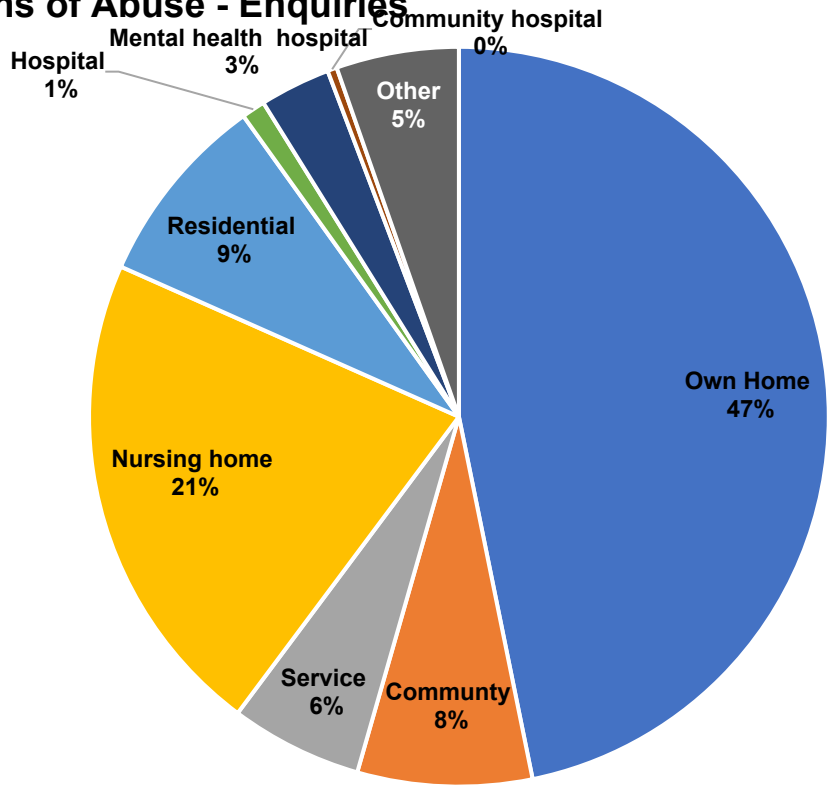
Abuse relating to neglect and omissions remain the highest abuse type this year; psychological concerns are also very high.

Locations of Abuse - Concerns



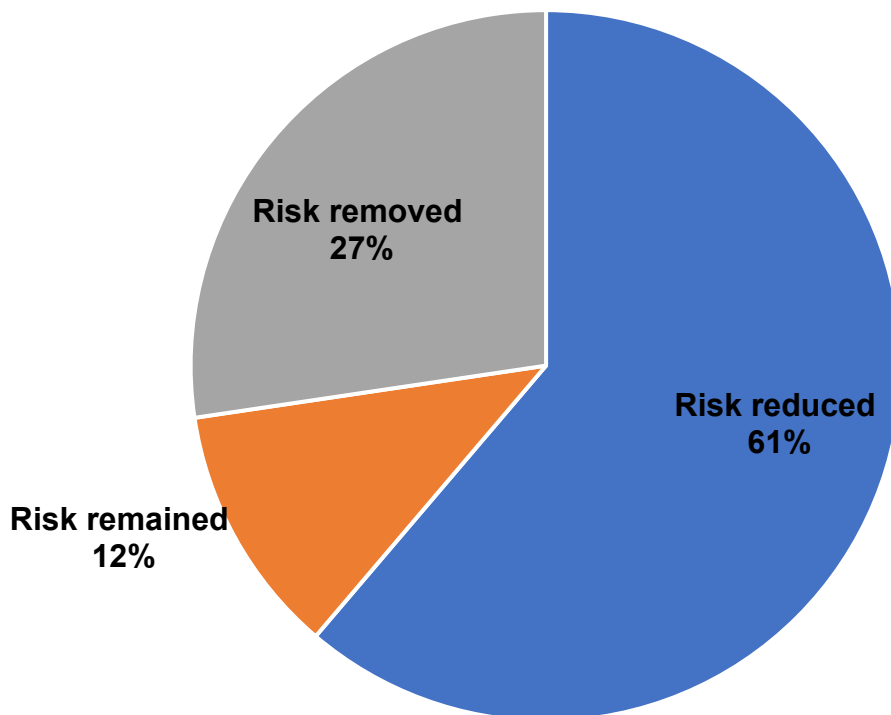
The primary location where abuse occurs continues to be in residents own homes.

Locations of Abuse - Enquiries



Cases can have more than one type of abuse and location

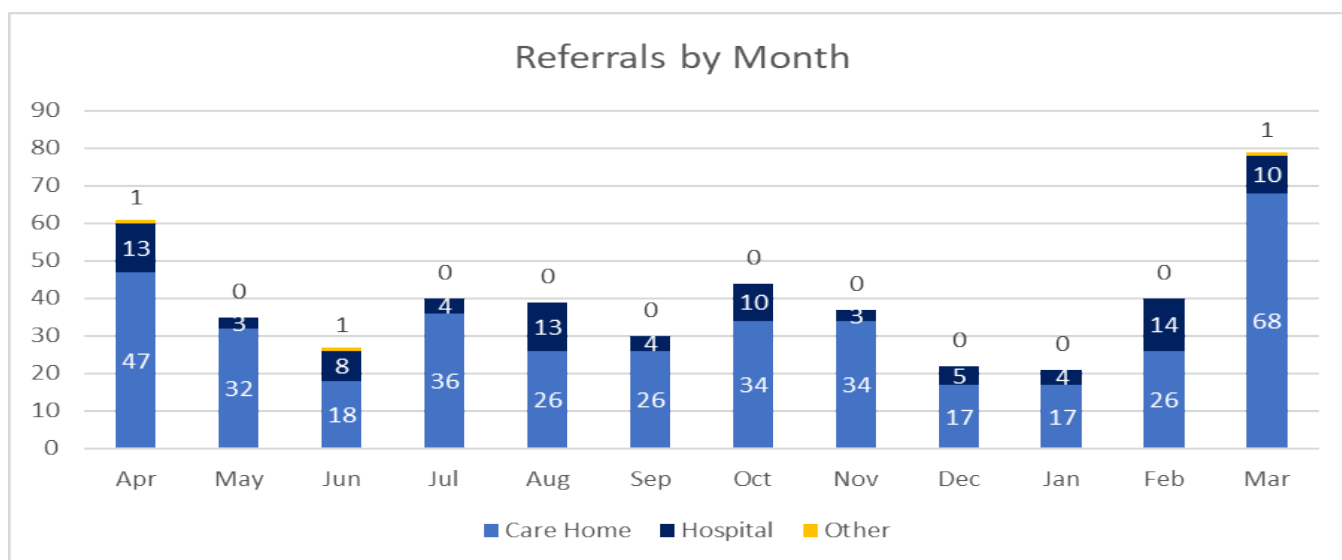
Safeguarding enquiry conclusions



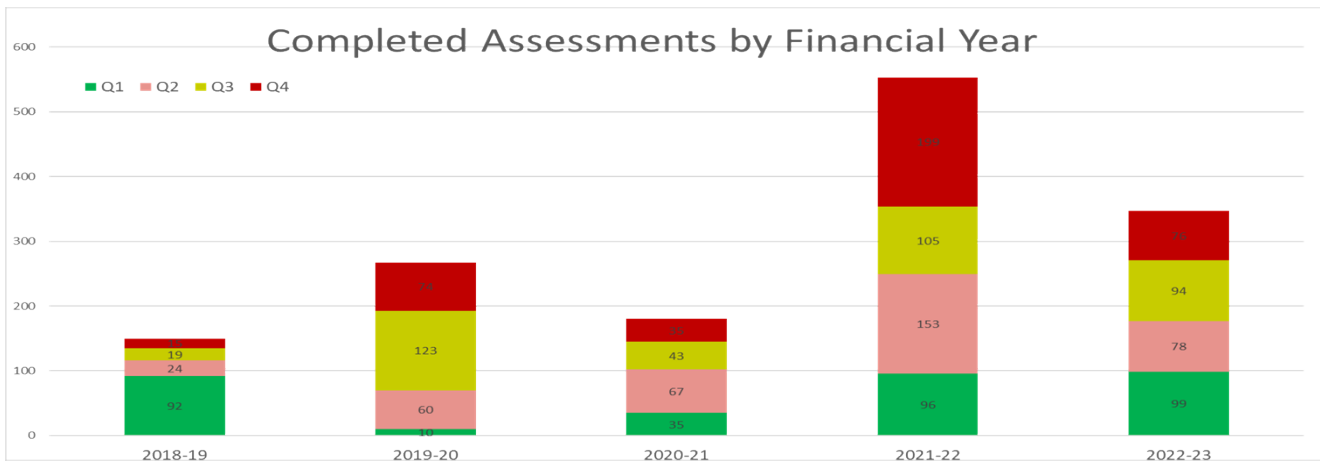
426 enquiries closed in 2022/23, up from 355 in 2021/22. Most had risks identified and action taken, and 88% saw the risk reduced or removed.

Deprivation of Liberty Safeguards (DoLS)

The table below shows the monthly referrals from care homes and hospitals to the DoLS team



Most of the referrals in 2022/23 continue to come from care homes, this is in line with previous quarters and years. March saw a significant number of referrals.



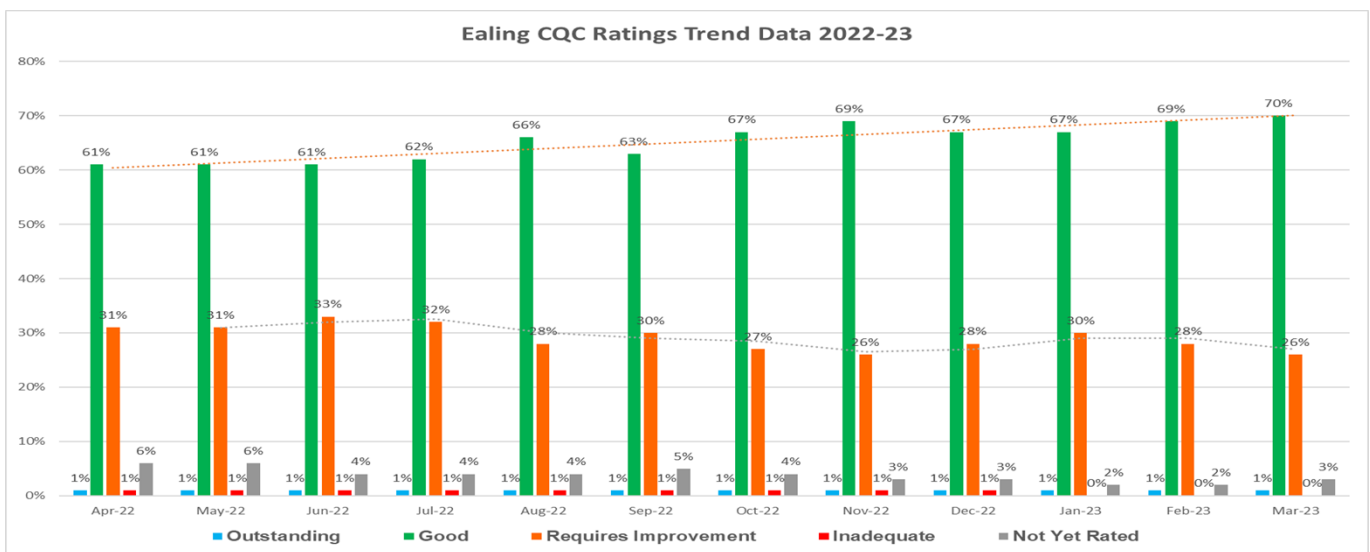
347 DoLS Assessments were completed in the financial year of 2022/23, the numbers are down from 553 assessments from 2021/22.

The reduction in completed DOLs assessments in 22/23 compared to the previous year is because of the increase in completed assessments as the Council prepared to implement proposed changes to legislation (LGS) which has been further delayed. It is also worth noting that there was an equivalent reduction in referrals (40%) between years as is reflected in the reduced number of completed assessments (37%).

9. Care quality and Providers

9.1. Quality of care in care homes and domiciliary care

During the last year alongside effective monitoring of performance data, the Board has been active in considering the quality of the Care Market across the Borough. The Board receives regular Provider concern information and the impact that these concerns have in relation to the availability of beds. The presence of concerns requires effective dialogue with Registered Managers and with owners to drive improvements. This work has begun to deliver results with a stabilising and improving picture emerging on quality across the Borough. We define high quality services as being those services rated Good or Outstanding by the Care Quality Commission (CQC); who provide strength-based care, tailored to the needs of each individual they support. This is illustrated below



A Care Home Summit was held in January 2023 attended by multi-disciplinary partners including health, CQC, health watch etc. The summit agreed for working groups to be developed with four potential work streams with different focuses

1. Develop training and support for care home managers to prepare for CQC inspections.
2. National Health focus
3. Develop a Joint Operational Group (JOG)
4. Look at the viability of using only good and outstanding care homes in Ealing.

9.2. Provider assurance and provider concerns

A provider is an organisation or institution that provides care to individuals or groups of people, and this includes residential homes, supported living, and domiciliary care providers. The list is not exhaustive, and there are a few other provider services outside of these three general areas.

A providers concern is when there is an indication that a service may be working below standard and there is a risk to the health and wellbeing of those using the service. Where there are concerns of a safeguarding nature that relate to an individual, these should be progressed through the safeguarding arrangements that exist to protect individual adults under an individual Section 42 safeguarding inquiry (Care Act 2014). If section 42 links to concerns about the provider of care, the outcome of any section 42 inquiry where there is a Provider Concern process in place should be fed back to the Provider Concern chair.

Provider Intelligence Meetings (PIM) take place when there are concerns about a provider. Decisions to invoke a provider concern or close the process are made at the senior leadership level, and updates are provided to the risk panel chaired by the Head of Commissioning and Market Management.

In Ealing, there are 108 registered providers, and we have the largest number of beds in NWL compared to the other 7 local authorities and the 5th highest number of beds in London. Provider concerns are managed within the Safeguarding Adults remit, and the process is coordinated by the Safeguarding Adults Coordinator. There are on average six provider concerns that run at one given time, and suspensions on placements have taken place and are shared with ADASS when deemed necessary. Provider concern review meetings take place, and service improvement plans submitted by the providers have been monitored and reviewed by professionals attending the provider concern.

There is a well-established provider managers network facilitated by Skills for Care, which meets bimonthly and gives managers up-to-date information on workstreams and initiatives happening locally and nationally. The forum also provides peer support and is an opportunity for managers to network. Training has also been commissioned and delivered to providers who are rated by CQC as requiring improvement to embed and develop practices that will improve their rating when they are next inspected. There is a Care Home Summit that is developing cross-agency approaches to support care homes in improving the quality of care they provide Ealing residents. A data set is being formulated for care homes to complete as part of a self-assessment framework that is meaningful and can be scrutinised to help improve standards. There has also been investment in training for care home managers and development of a team to support providers with people who have behaviour that is challenging.

10. Learning and development

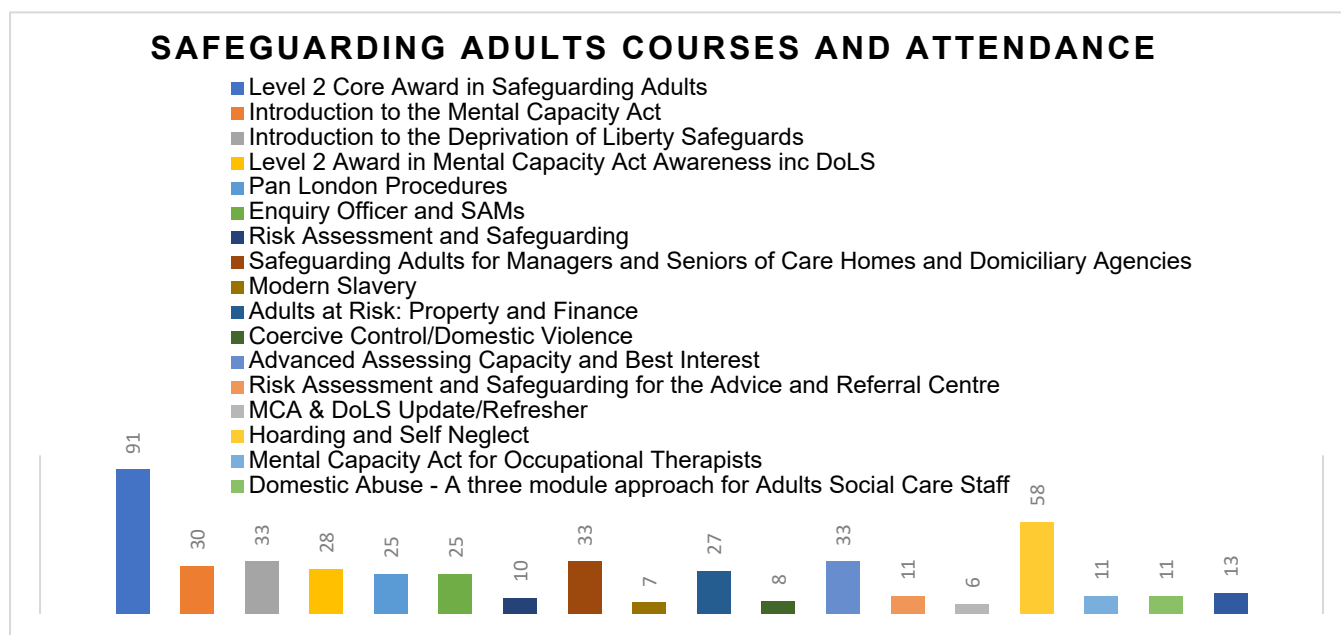
10.1. Framework

The Board has a Safeguarding Effectiveness strategy and a learning and development framework, there are workstreams of the partnership that oversee this. All parts of the Safeguarding Partnership are required to ensure that equality, diversity, and inclusion are a thread through all our priorities/activity, as are the views of those who receive services. The approach we have taken to ensure we make a difference is illustrated below:



10.2. Training and development courses

460 members of staff attended Safeguarding and related courses.



11. Safeguarding Adult Reviews (SARs)

These reviews are undertaken following serious incidents of abuse involving a vulnerable adult, where it is believed that learning could be gained from an examination of the details in such a case. The intention of such reviews is to improve practice and lessen the risk of such incidents occurring again.

The criteria for deciding to undertake a SAR are.

Under the Care Act 2014, sections 44(1), (2) and (3), Safeguarding Adults Boards (SABs) must carry out a Safeguarding Adults Review (SAR) when an adult with care and support needs has died or suffered serious harm, and it is suspected or known that the cause was neglect or abuse (including self-neglect) and there is concern that agencies could have worked better to protect the adult. The SAB may also (section 44(4)) undertake a SAR in other cases concerning adults with care and support needs. The purpose is to identify learning that can drive change that will prevent harm occurring in future similar circumstances.

A learning event which focused on serious cases and the role of SARs was held in late 2022. The session examined.

- The purpose of a SAR
- Myths surrounding SARs
- Principles for undertaking a SAR
- Statutory guidance on the steps to take after the decision to commission a SAR
- Referral forms, information gathering, process and expectations
- Types of review
- Embedding the learning gained from SARs

This event was well attended with practitioners from across the partnership. They reported that they found the information presented useful and informative.

Where the criteria for a SAR is not met in full, the Board may decide to undertake a discretionary SAR or a practice review. From these, learning can be disseminated in a variety of ways. A number of 7-minute learning briefs have been produced, which can be accessed here: [7-minute briefs](#)

11.1. Safeguarding Adult Reviews undertaken in 2022-23

There were four SARs commissioned in the year of this report. Two have concluded and two remain in progress due to the complexity of each of those cases.

The two that have been completed are, the Elsie SAR and the Owen SAR. We expect the remaining two reviews, Adult B and Adult S, to conclude early in 2024.

Elsie SAR – An 85-year-old lady was a resident in a nursing home and died as a result of a number of practice issues and practice policies not being followed as they should.

There were a number areas identified where practice could be improved.

- Staffing levels and appropriate care for individual residents needs to be enforced
- The use of identified and required protective equipment for individual residents needs to be properly adhered to and overseen.
- The Care Plan for each resident needs to be in place and proper oversight provided.

- There were gaps in the recording of information, including information relating to safeguarding and care logs were incomplete. All of this is contrary to good practice. Sufficient managerial oversight needs to be provided to assure that practice is compliant.



Owen SAR – A gentleman with profound learning disability, has epilepsy, autism and communication difficulties, leaving him unable to use verbal communication and is unable to use Makaton. The staff at his accommodation were concerned as he appeared to be stumbling more. And took him back the opticians. It later discovered that the previous diagnosis was not complete, the result being his ultimate blindness. Owen was registered as blind on 23rd February 2022.



The SAR report recommended that.


- The quality of information made available to health practitioners on an individual with Learning Disability's health should be improved.
- Recording that is accurate, complete, dated and signed by the practitioner should be a standard in recording in ALL health records and in this case the private provider should remind store directors and practitioners of their responsibilities and of the standards set by the General Optical Council.
- Reminders to all practitioners that safeguarding concerns are not just acts of commission but encompass acts of omission also.
- The General Optical Council should provide a further investigation into the quality of professional practice in this case.

12. What our partners have done

We asked our statutory partners to highlight their organisations key achievements and challenges for the year.

Partner agency	Key achievements during 2022/23	Key challenges during 2022/23
	<ul style="list-style-type: none"> • Care Home summit provided clear and shared strategic interventions to support with market quality in care homes. • Improving position in terms of market quality across service lines. • Implementation of a clear framework for multi organisational provider risk oversight through the Risk Review Panel. 	<ul style="list-style-type: none"> • Increased demand on services due to post Covid impacts, Cost of Living Crisis and NHS waiting lists. • Significant increase in costs of services procured by the Council from the care market, due to the impact of inflation and NHS procurement arrangements. • Recruitment and retention of staff across the social care and NHS sector.
	<ul style="list-style-type: none"> • West London NHS Trust considers all safeguarding functions as essential to deliver the Trust's values of togetherness, responsibility, excellence and caring. • To support service users in gaining access to and understanding Safeguarding, we participate in service user and carer groups and are collaborating with the Recovery College and Healthwatch to create training for the general public, which will include service users and carers. • We are devising a procedure that focuses on Persons in a Position of Trust and have enlisted the participation of all key stakeholders to ensure uniformity throughout the boroughs we serve. 	<ul style="list-style-type: none"> • Training, we have worked to reach the 90% compliance rate for safeguarding and have remained between 80% and 85% over the past year. • Further work is required to demonstrate Making Safeguarding Personal. • Conduct additional audits to demonstrate safeguarding practice, the Trust is currently participating in externally commissioned multi-agency audit.

		<ul style="list-style-type: none"> • The need for a Domestic Abuse Coordinator to assist the Trust in responding to domestic abuse.
	<ul style="list-style-type: none"> • MASH Backlog for Children & Adults moved from a position of 3000 down to 0 in real time, meaning a real time risk assessment ensuring that the most vulnerable in society are getting the right service. • West Area MPS (Metropolitan Police Service) mental health team working with acute trusts and local authorities to reduce repeat S136's, achieving a 5% reduction in repeats and a 10% reduction in S136. • Ongoing Qualitative & Quantitative Audit Activity completed by Op Aegis throughout the PP (Public Protection) Portfolio showing a majority of good Data Integrity Team) Audits across domestic Abuse & RASSO (Rape and Serious Sexual Assaults) 	<ul style="list-style-type: none"> • Increased Domestic Abuse (DA) demand month on month, showing West Area as largest Domestic Abuse demand within the MPS • Young, in-experienced staffing leading to welfare, well-being challenges across PP Portfolio • Large Vacancy factor within DA, working hard with corporate workforce Head Quarters to ensure suitable officers are recruiting within PP Portfolio.
	<ul style="list-style-type: none"> • CQC Inspection Report: the CQC carried out an unannounced inspection of the Trust in February 2022 and an announced well led inspection of the Trust in March 2022. The report stated, "Staff understood how to protect patients from abuse and the service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it." • The Trust was commended by NHS England for the work done in fast-tracking patients with LD and Autistic People through electronic notification and invited to give a presentation at the National LD Improvement Standards event. 	<ul style="list-style-type: none"> • Implementation of the new EPR system (electronic patient record) Cerner and the challenges this brings. • Cancellation of some training sessions due to the ongoing industrial action (and the additional work required for 90% compliance). • Challenges around maintaining MCA/DoLS assessment at a high standard. • At the beginning of the year 2023, the Trust was asked to manage the UCCs (urgent care centres) in the 3 boroughs (Ealing, Harrow, and Brent), areas that the Trust delivers

	<ul style="list-style-type: none"> • Safeguarding Champions: The Safeguarding Team successfully recruited Champions for Safeguarding, Falls, Dementia, Learning Disabilities and Autism. The Champions act as a resource and point of contact for colleagues who require support, guidance and signposting. 	<p>services to. Although an achievement for the Trust, this presented its own challenges.</p>
 <p>North West London Integrated Care System Working together for better health and care</p>	<ul style="list-style-type: none"> • The implementation of the ICB from a single CCG (July 22) the Safeguarding agenda transitioned successfully into the new ICB governance structure. • Liberty Protection Safeguards (LPS) In view of the pending implementation of the Liberty Protection Safeguards (LPS) as per the Mental Capacity Amended Act (2019), the ICB recruited a Project Manager to facilitate the ICB's preparation towards the enactment of the LPS. Level 3 Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS) training was delivered to the Complex Care Team and Continuing Healthcare for Children and Adults. • Safeguarding training - The Designated Professionals for Safeguarding Adults and Children have worked on two projects to ensure that ICB staff are compliant with Statutory Safeguarding, Prevent and Mental Capacity Act 2005 training. <p>The NWL Training Strategy has been approved (in line with the NHSE Intercollegiate Document). The Training Needs Analysis group have identified the present level of knowledge, skill and competency and are comparing this with the required or established levels within the organisation in order to determine training needs. Adult level 3 one-day workshop, accredited by NHSE eLearning</p>	<ul style="list-style-type: none"> • Challenge faced by the NWL ICB safeguarding adults was the need for Designate Leads to provide safeguarding cover across other areas of North West London, while the organisation recruited into post. All Adult Designate posts are now filled. • Work to prepare for the implementation of the Liberty Protection Safeguards (LPS), the Mental Capacity (Amendment) Act 2019, will be delayed “beyond the life of this Parliament” (therefore likely beyond Autumn 2024) due to prioritising work to improve Adult Social Care. • Iris is a specialist domestic violence and abuse specialist training support and referral programme or General Practice – 3 boroughs in NWL have up taken this offer, Ealing Designates will attend the Train the Trainer DA course in December 2023, in order to ensure a consistent approach, and training will be rolled out to the ICB Staff and GPs in the New Year.

for Healthcare, will be delivered by the Designates. and it will be open to ICB Staff and Primary Care . Priority will be given to ensuring ICB staff are compliant with this training.

Additional Training is being offered to all ICS Staff and has been well attended by provider partners. Subject matter has included adults and child safeguarding topics.

- The NHSE Tracker has been set up by NHS Digital in order to collate National and local information about all DHRs, SARs, CSPRs, Learning Reviews and Rapid Reviews, with the purpose of being able to pull meaningful information regarding incidents and trends. There has to date been some inconsistency of input, but a Task & Finish Group of Designates across the London ICBs [including the DNSC Ealing] have met to establish written guidance to encourage better and consistent use of the Tracker so that information downloaded from the system is more meaningful. Designated Professionals are responsible for input and update of the Tracker. Designates will undertake analysis of tracker data across NWL and compare any analysis available within the London Regional ICBs to report wider themes and recommendations.
The Designate from Ealing will be co- presenting the Tracker Launch Event in Nov 23.
- The Violence Against Women and Girls (VAWG) forum has reviewed the VAWG strategy which encompasses Ealing's response to HM Government's Tackling Violence Against Women and Girls and sets out what Ealing intends to deliver as a partnership in this critical area of work.

The Multi Agency Risk Assessment Conference (MARAC) is now in progress daily and an update will be given at the Ealing VAWG meeting in mid-September.

VAWG Pledges:

The VAWG Government initiative was established to tackle all forms of violence against women and girls. It is a multi-agency approach involving local authorities, health services, education services, and law enforcement. Further to this strategy, MOPAC and the Mayor for London asked all agencies to provide 'Pledges' to support the initiative. Designated Professionals and Assistant Directors met to establish what is already being done by the ICB in support of VAWG, and to pledge what we will do going forward. The Assistant Directors for Safeguarding and two Designated Professionals attended the VAWG Pledges Summit at the Honourable Society of the Inner Temple on 13th September 2023 to make our pledges.

13. Conclusion and looking to the future

As we publish this annual report for 2022 – 2023, I am mindful of the four “Safeguarding Adult Reviews” that were commissioned in that year. These reviews are undertaken where we feel, in hindsight, that the partnership of services could have done more to protect vulnerable individuals here in Ealing.

Two of these reports have now been published and the learning from another has been shared. The fourth report is very complex and is taking longer to complete but will be published as soon as we are able.

Every such case is extremely tragic, by their very nature, and every review is necessary so we can continually improve and to be accountable for the outcomes of our provision.

The findings of these reviews result in actions for individual services and for us all in the partnership.

In addition to these very sad and disturbing tragedies, in my first few months, I also heard many reports where the partnership has been getting it right for some folk and their families who have been in very real difficulties.

In forthcoming publications and presentations, we will want to hear more and to celebrate the times, where individuals, teams, services, partnerships and communities have got it right. We need to learn equally from when we could have done better, and from good practice.

The priorities we agreed for the Board’s business plan remain the priorities for today, and the whole range of services represented within Ealing’s Safeguarding Adults Board work towards them every day of the year.

We do not expect our current challenges of the economy, the pandemic, case acuity and complexity, staff recruitment and further expectations of resource reduction, will abate any time soon. We also do not expect that all of these challenges can be addressed by the status quo. This period of adversity will require new thinking, significant change to provision and most likely a new relationship between services and those they serve.

Throughout all of this we will seek to ensure the guardianship of “safeguarding” is the business of every employee but also move to support our communities in further protecting themselves. We will be working to achieve a greater awareness of what we as community members can do to support our vulnerable neighbours.

This will be a time of looking outward as well as inward, to find the solutions, not to maintain the status quo, but to do much more with the resources that we do have in abundance. These being the commitment and compassion of both our public and private sectors to care and protect our vulnerable populations.

All of this in very close conjunction, and active partnership with the wider communities of Ealing.

I look forward to taking on the mantle from Sheila Lock our previous Chair and working with you all in the joint venture of safeguarding our vulnerable adults here in Ealing.

Rob McCulloch-Graham

Independent Chair of Ealing Safeguarding Adults Board

14. Appendix 1 - ESAB Business Plan on a page

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1

Tackling Financial Abuse and Exploitation

Consider all forms of **exploitation** of adults as a priority. This includes scams, financial abuse and cuckooing. We will seek to understand the areas of concern for us in Ealing to enable us to identify what work is required for maximum impact and effect.

2

Supporting improved mental health support particularly at key transition points.

Make **Transitions and Exploitation** a priority so that responses to exploitation of children moving into adulthood are improved and to ensure we consider the impact for vulnerable adults.

3

Making Safeguarding Personal

Ensuring the actions of the Board are informed by the voice of vulnerable adults in Ealing. Promoting a real sense of professional curiosity, in all interactions.

4

Embedding the Voice of the Voluntary and community sector and service user in shaping and transforming services.

Step up our Engagement approach and seek the support of partners to engage with a wide range of people who use health and social care services, members of the public, staff, volunteers, and professionals.

15. Making a report

If you are concerned about a person's safety or wellbeing report it.

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If you are (or have been) the victim of abuse, or you suspect that someone is being abused, You can:

- Tell a professional that you trust
- Contact the **Social Care Advice and Referral Centre** by:
 - Telephone 020 8825 8000
 - Email sscallcentre@ealing.gov.uk
- Contact the [emergency duty team](#)

[Safeguarding adult referral form](#)

If someone is at immediate risk of harm call 999

Further information can be found by visiting our website.

[Ealing Safeguarding Adults Board \(ESAB\) | Ealing Safeguarding Adults Board \(ESAB\) | Ealing Council](#)



Report to Scrutiny

Item Number:

Contains Confidential Or
Exempt Information

No

- Subject of Report:** Social Care and Community Choice
- Meeting:** Health and Adult Social Services Standing Scrutiny Panel
19 March 2024
- Service report author:** Avtar Maan, Head of Integrated Commissioning
- Scrutiny officer:** Anna-Marie Rattray, Scrutiny Review Officer
rattraya@ealing.gov.uk 020 8825 8227
- Cabinet Responsibility:** Cllr Josh Blacker, Healthy Lives
Cllr Kamaljit Kaur Nagpal, Fairer Start
- Director Responsibility:** Kerry Stevens, Strategic Director Adults & Public Health
- Brief:** This report provides an update of the review undertaken to promote the Council plan priority under Healthy Lives: for people to have control over how money is used to meet their social care needs.
- Recommendations:** The Panel is asked to consider the report and make recommendations as appropriate.

Social Care and Community Choice

1. Background: Review of choice and control for social care

- 1.1. In response to the Council plan priority for greater choice and control, the Integrated Commissioning Team committed to undertake a review of how to increase direct payments across Adult Social Care. This report consolidates the findings from the review, including feedback from the stakeholder engagement, audit of internal processes and benchmarking good practice.
- 1.2. The report challenges departments across the council to work together to promote community-led development as a means of enhancing choice and control, health and wellbeing, and the service offer for our residents. Increasing take up of Direct Payments will generate improved outcomes for residents with care and support needs as well as offer better value for the council and local economy.

2. Direct Payments Overview

- 2.1. Direct Payments devolve control of social care funding over to people for them to buy (micro-commission) their care support. In Ealing, in March 2023, 463 people had a Direct Payment. This included 334 adults, 20 family carers, and 109 parents of children with additional needs.
- 2.2. Direct Payments give people choice and control over how their needs are met. They can employ their own staff or buy services from another organisation. They can be creative and have the flexibility to design how their needs are met so long as the support achieves the outcomes agreed with social care. They are more likely to remain in their home and to use services in the borough.
- 2.3. Ealing has a lower rate of take up of Direct Payments compared to other places. For example, in 2021-22, in Ealing 300 adults had a Direct Payment compared to a mean average across all London boroughs of 489 adults (NHS Digital).
- 2.4. When people are assessed as having social care needs that must be met by their local authority, traditionally they have been offered a service arranged by the council, typically this fits people into existing services, often building based services such as care homes and day centres owned by organisations based outside the borough. 36% of commissioned homecare and 47% of care home is provided by organisations based outside the borough. Despite over 20 years of transformation, this is still the kind of service experienced by many people today.

Feedback from stakeholder engagement

- 2.5. Engagement with key stakeholders took place October 2022 to March 2023 and included:
 - Focus group meetings held with people who use social care services.
 - A survey of people who have a Direct Payment that had a 26% response rate.
 - One to one in-depth meetings with 12 people who have a Direct Payment.

- Consultative meetings with relevant staff and the voluntary and community sector.

2.6. Feedback from the engagement highlighted the following:

- Most people with a direct payment feel more in control of their social care. People would like more flexibility in how they can use their direct payment.
- People would like to feel that the Council trusts them to manage their direct payment.
- Additional staffing in Ealing Direct could help more people to take up a direct payment.
- Direct payments can be hard to manage, and the Council is improving the support it provides for this.
- There are not enough options in services for different ways to use a direct payment and it is hard to find information about different options in the Ealing area.
- Some people with a direct payment have difficulties with staff recruitment and retention – the Council’s introduction of the Real Living Wage to direct payments should help.

2.7. The engagement found that there is a strong case to increase the take up of Direct Payments but that this is best achieved in coordination with the council’s wider infrastructure and initiatives to strengthen our communities.

Findings from the audit internal processes

2.8. Between August and December 2023, a review of internal processes (Ealing Direct) took place to consider resourcing and opportunities to extend peer support among people who have a direct payment. Key lines of enquiry, or KLOE, was designed to order the evidence gathered over the course of the review. The KLOE drew upon three recent national reports that considered different ways that local authorities could improve the operation of direct payments, as well as the feedback gathered from the stakeholder engagement.

2.9. Evidence was collected from a range of sources including:

- Council documents, forms, and website
- Observing staff as they went about their work and asking questions, including at case meetings with people and their carers.
- Following new referrals and reviews of existing cases to observe the effectiveness of processes.
- Meeting with different groups of staff
- Talking to staff at other local authorities and researching their websites
- Researching good practice

2.10. The review found that in Ealing Direct, the Council has a solid foundation from which to extend the take up of direct payments; but would benefit from investment into services to streamline processes and create a diverse market.

3. Risk considerations in increasing the uptake of Direct Payments

Risks	Mitigations
Council loses oversight and control of the social care market.	<ul style="list-style-type: none"> • Council's role evolves to be facilitator of innovation and of expanded role for community-based businesses. • Build closer relationship with community and voluntary sector.
Gap in quality assurance due to transfer from the use of providers registered by the Care Quality Commission to people employing their staff directly.	<ul style="list-style-type: none"> • Annual reviews, including home visits. • Promoting staff training opportunities and promoting personal assistant jobs. • Promote good practice as an employer to people who have a Direct Payment.
Safeguarding risks to individuals, including abuse and neglect.	<ul style="list-style-type: none"> • Regular audits of DP expenditure and use. • Risk awareness information, advice, guidance and training. • Strengthened families, neighbours, locality-based communities, and communities of experience as the eyes and ears. • Promote peer support.
Fraudulent misuse of public funding.	<ul style="list-style-type: none"> • Communicate expectations/ obligations, audit spend, profile risk, automate processes. • Community "ownership" of the impact of fraud. • Quality assurance and audit at regular intervals.
Cost of implementation.	<ul style="list-style-type: none"> • Development of business case, including anticipated costs and savings. Additional project capacity may be required.

4. Value for Money

- 4.1. Reduced transaction costs - people with a Direct Payment either manage the budget themselves or they use an agency that will have highly automated processes to provide a "managed account." This partly explains the variation from the RAS benchmark referred to above.
- 4.2. When a person who has a Direct Payment uses a care agency they can be treated as a self-funder and be charged a higher rate by the agency than the council would pay. The Council is commissioning a new Dynamic Purchasing

System (DPS) for home care and day activity, the specification will include a requirement for direct payments users to have the same level of parity as council commissioned services.

4.3. The council recoups unspent money from Direct Payment users – currently £1.2M.

4.4. Improved outcomes for residents:

- There is typically improved performance in achieving outcomes.
- Higher satisfaction rates are reported.
- Direct Payments are invariably used by people living in their own or their family home – they save money by preventing or deferring the need for a person to move into a care home.

4.5. Increasing choice and control:

- When people are enabled to find ways to make their Direct Payment stretch further, this can motivate them into finding their own solutions for challenges in other aspects of their life.
- Some people, when they see the amount of money spent on their care, feel motivated to find more cost-effective ways of doing things.
- Money is mostly spent on employing people who live locally or using locally based agencies, ensuring that it stays in our local economy.

5. Options to increase the take up of direct payments

Options were discussed with the Senior Leadership Team and Political Cabinet and the Adults Senior Management Team during November and December 2023.

5.1. To take forward the agenda for increase choice and control the Council will need:

- Increased investment in Ealing Direct, the team that manages Direct Payments – this would increase proportionately in line with increasing numbers of direct payment users.
- Targeted development with the local voluntary and community sector, other council departments and partner organisations.
- Potential to expand to other areas of council function, for example housing, children's and leisure.
- Social work focused activity to promote Direct Payments and community-based services.

5.2. Further actions from the internal review identified the need to

- Strengthen the direct payments user group to a Coproduction Panel
- Enhancements to Mosaic for more timely processes
- Updating documents, forms and communications materials relating to DPs to ensure they are attractive, accessible, and compliant.
- Concerted action to enhance the market options that people can choose from,

- Creation of a DP market development/ engagement officer

We are currently exploring funding and resources to support the transformation of our DP offer and extend community choice are being in line with these recommendations.

6. Legal Implications

Powers for local authorities to provide Direct Payments for adult social care were introduced in the Community Care (Direct Payments) Act 1996 and extended to carers and children under the Carers and Disabled Children Act 2000. In 2003 local authorities were mandated to provide Direct Payments to people with eligible care needs who asked for one. These duties were codified under the Care Act 2014 and the Children and Families Act 2014 which also set out related duties to promote personalisation and manage the market of care services.

7. Financial Implications

There are no direct financial implications from this briefing report. The business cases for further stages of work will evaluate financial implications.

Promotion of the DP agenda is key delivering the demand management and MTFS targets for Adults Social Care.

8. Other Implications

No other implications are identified at this stage.

Pre-publication sign-off

Name	Department/Title	Date sent	Date response received	Comments appear in report paragraph:
Kerry Stevens	Strategic Director Adults and Public Health	31.01.2024	02.02.2024	
Adenike Tilleray	Assistant Director Commissioning and Use of Resources	31.01.24	31.01.24	
Gordon Crighton	Head of Market Management			

Report History

Decision type:	a. Urgency item?		
Non-key decision	No		
Authorised by Cabinet member:	Date report drafted:	Report deadline:	Date report sent:
Not applicable			
Report no.:			

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Report to Scrutiny

Item Number:

Contains Confidential Or
Exempt Information

No

- Subject of Report:** Health of the Borough – Draft Report
- Meeting:** Health and Adult Social Services Standing Scrutiny Panel
19 March 2024
- Service report author:** Dr Maddy Gupta-Wright, Public Health Consultant,
guptawrightm@ealing.gov.uk
- Scrutiny officer:** Anna-Marie Rattray, Scrutiny Review Officer
rattraya@ealing.gov.uk 020 8825 8227
- Cabinet Responsibility:** Councillor Josh Blacker, Cabinet Member for Healthy Lives
Councillor Jasbir Anand, Cabinet Member for Tackling
Inequality
- Director Responsibility:** Anna Bryden, Director of Public Health
- Brief:** This report demonstrates the Council’s achievements during 2023/24 to tackle inequalities across the borough. The report is a new annual report to show how multiple Council departments are helping to achieve the Council Plan’s strategic objective of ‘Fighting inequality’.
- Recommendations:** That the Panel considers and comments on the draft report.

1. Health of the Borough

The Health of the Borough report is an annual report which sets out how every part of the council contributes to reducing inequalities and improving wellbeing in Ealing. The report is a Council Plan deliverable.

Although the Public Health team coordinated the report, each council directorate provided input to showcase the work they are doing to reduce inequalities. The report includes sections on health and wellbeing, housing, employment and poverty, Adults, children and young people, education, community engagement, community safety, climate crisis response, cost of living and community hubs, in addition to an overview of the Council's Corporate EDI action plan. Each section contains an overview of key achievements from 2023/24 and, where available, case studies.

The draft report is attached in a slide format as **Appendix 1**.

2. Legal Implications

There are none.

3. Financial Implications

There are none.

4. Other Implications

There are none.

Consultation

Pre-publication sign-off

Name	Department	Date sent	Date response received	Comments appear in report paragraph:
Internal – shared with Strategic Directors and key officers				
Cllr Josh Blacker				
Cllr Jasbir Anand				

Report History

Decision type: Non-key decision	a. Urgency item? No
---	-------------------------------

Authorised by Cabinet member: Councillor Josh Blacker	Date report drafted:	Report deadline:	Date report sent:
Report no.:			
Dr Maddy Gupta-Wright, Public Health Consultant, guptawrightm@ealing.gov.uk			

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Health of the Borough Report – 2024

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Introduction

Ealing's second Health of the Borough report shares the Council's achievements during 2023/24 in our bid to tackle inequalities and improve the health and wellbeing of residents long term. Fighting inequality remains a key strategic objective under the Council Plan, and shapes much of the council's work as highlighted in this report.

The council recognises its key role in ensuring everyone has the building blocks of good health and wellbeing and can access the resources, tools, knowledge and supportive structures to protect themselves from poor health. Most of the examples shared in this report refer to work that addresses the building blocks of health and well-being, such as work, homes, access to education, skills and learning, green space and transport, how well socially connected we are, and whether we experience poverty or discrimination. Through this work we are tackling the root causes of health and wellbeing, and ultimately this impacts how well, and how long we live. Working on these root causes we also address the differences amongst people living in Ealing creating a fairer, more equal society where everyone thri

The Ealing Context: Population Overview and Health (1/2)



Third largest population in London.



Less children under 5 compared with London, whilst proportion of residents over 65 years of age is increasing.



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The most ethnically diverse borough in England and Wales; only 24.3% identify as White British. Southall Broadway, Southall Green and Dormers Wells have the highest percentages of residents from different minority backgrounds.



69.1% identify English as their main language. After English, the top five languages spoken as a main language are: Panjabi (4.9% of population), Polish (4.4%), Arabic (2.5%), Tamil (1.6%) and Gujarati (1.4%).



On average, men live to 80.3 years and women live to 84.4 years. However, there are differences in life expectancy in different areas of the borough. For example, men living in Hanger Hill live on average 6.4 years longer than men living in South Acton, whilst women living in Northfield live on average 6.9 years longer than those living in Norwood Green.



Highest areas of deprivation are concentrated in and around Southall, Northolt and Acton. Ealing has 4 residential areas that are in the 10% most deprived in the country.

The Ealing Context: Population Overview and Health (2/2)



In Ealing state-funded schools, 27.5% of pupils were recorded as entitled to Free School Meals in January 2023. This has increased from 26% of pupils in January 2022 and 23% in January 2021.



Highest rate of alcohol related hospital admissions (593/100,000) in London. The top five wards with highest alcohol admission rates were Southall Green, Southall Broadway, Lady Margaret, Dormers Wells and Northolt Mandeville



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Approximately 2 in 10 reception children and 4 in 10 year 6 children are overweight or obese.



Two thirds (67.2%) of adults are physically active.



One in 6 (15.9%) adults smoke.



Ealing has the fifth highest rate of new TB cases in England, at 30.5 per 100,000 population.



Ealing has a high prevalence of diabetes. Almost 1 in 10 adults (18+) are diabetic. In the Bangladeshi population, one in five adults have diabetes, which is double the Ealing average.



There are 133,657 households in Ealing; of these, 46% are owner occupied, 17% are socially rented, 34% are private rentals and 2% are in shared ownership.



£550K is the average house price in Ealing (Sep 2022). This is fifteen times median earnings and above the London average of £525K.



Sub-standard housing conditions are significantly more prevalent in Ealing's private rented sector than the national average, with over 22% of the borough's private rented properties predicted to have at least one or more Category 1 housing hazard, compared to the national average of 13%.



Ealing has exactly double the rate of households threatened with homelessness compared with the London average.



More than three quarters (77.5%) of Ealing residents are in employment.



Wards with the lowest household income are Southall Broadway, Southall Green and Dormers Wells.

The Ealing Context: The Wider Determinants



19.5% of jobs in Ealing were paid below London Living Wage of £11.05 per hour, compared with approximately 13.6% across London.



Approximately 7 out of 10 (68.4%) pupils achieved a good level of development at the end of reception in 2023. School readiness has dropped nationally, compared to pre-COVID performance. However, Ealing is now in line with London and the national average.



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There is a drop in levels of attainment as Black Caribbean pupils move through different stages of school, highlighting that Black Caribbean pupils have been underserved by the education system.



There were 10,193 violence offences (27.8 per 1,000 population) in 2022/23. This is significantly lower than the national rate and similar to the London average.



Ealing's rate for the first time entrants to the youth justice system was 110.9/100,000 in 2022. This was significantly lower than both London (166.1/100,000) and the national rate (148.8/100,000).



With the exception of Nitrogen Dioxide (NO₂), air quality in the borough of Ealing is meeting all national UK Air quality strategy standards (2007). More than half of NO₂ pollution and particulate matter that originates from within Ealing borough are from road transport.

Corporate Equalities, Diversity and Inclusion Action Plan

Ealing Council is committed to creating a workplace where equality, diversity, and inclusion for all its employees are at the heart of its decision making, all employees feel valued and heard, and where there is zero tolerance for discrimination in any form and explicit action is taken if it does occur. This supports the health and wellbeing of staff, and our residents. Fighting inequalities is a corporate strategic priority and we have a corporate equality board (CEB) and a continuously monitored corporate EDI action plan 2023-2025. Our staff equality groups (SEGs) play a pivotal role in this process providing challenge and feedback on staff perspective.

Key themes of our action plan include:

- Data: Establishing accurate and reliable workforce/establishment data to help identify clear EDI targets and inform decision making.
- Recruitment/representation: Our directorates continue to update and implement their own EDI action plans paying particular attention to their workforce profiles, diverse representation, and opportunities to maximize applications from diverse applicants.
- Leadership and development: We are investigating new learning and development content to enable senior leaders to tackle inequality and unfair practices and provide EDI education to staff at all levels using a mix of approaches. We actively participated in the London Council's Pilot Tackling Racial Inequality Programme, sponsored by the Chief Executives London Committee (CELC) and in NHS research exploring workforce barriers to leadership.
- Positive Action: This is to understand how and when to apply the principle to address under representation in senior roles.
- Staff Equality Groups: We are enabling groups to increase their involvement and diverse voices in council business, including a series of events and guest speakers throughout black history month, celebrating All Faith Week and Transgender Day of Remembrance to name a few.
- Monitoring and benchmarking: we assess Ealing's processes and practices against the London Council EDI Standard and other councils.
- We are working to implement the race equality action plan and support the Citizen's Tribunal
- Communications: We are developing an internal and external communications plan to support delivery of objectives.

Case Study: Let's Talk' Men's Health



Let's Talk' Men's Health staff events - Every year, International Men's Day aims to encourage open conversations about men's health and reduce the concern associated with men seeking help and create a space where every man feels heard, understood, and equipped to overcome the challenges life may bring. In 2023, Movember focused on breaking the silence around men's health issues, including mental health and physical health, with prostate cancer and testicular cancer some of the biggest health issues affecting men. The council is keen to continue the conversation on men's health and hosted another 'Let's Talk' Men's Health event on Wednesday 17 January, 1pm to 2pm, with real life cases being shared.

Public Health: This Year's Achievements 2023/24

Implementation of the new Health and Wellbeing Strategy 2023-2028:

As part of the Ealing Health and Wellbeing Board, the council is driving forward the implementation of the Health and Wellbeing strategy 2023-2028. The first year has focused on setting up the resources and structures needed to change the way we work with communities. We are delivering on our co-designed, inclusive, and accountable, action plan. To build our capacity to deliver the strategy we have recruited a council officer to lead the work, been successful in acquiring a £5 million NIHR Ealing Health Determinants Research Collaboration, and are funding the voluntary, community, and faith sector in a novel way. Within the council we have set up new partnership boards, are leading a council wide review on how we focus on our priorities and created new resident forums. In July 2023, research partners Institute of Development Studies helped develop and facilitate a workshop with 19 diverse community leaders and council officers to co-design an inclusive, accountable, and sustainable action planning process for the strategy going forward. The participants discussed ideas for how the action planning process for years 2-5 should proceed, and opportunities for alignment and collaboration on the year 1 action plan. Learning from the event is informing the implementation of the strategy going forward.

NIHR Health Determinants Research Collaboration (HDRC) Ealing

Ealing Council has been awarded £5m from the National Institute for Health and Care Research (NIHR) to help tackle health inequalities and improve health outcomes in the borough. The council, alongside local community partners Golden Opportunities for Skills and Development, Ealing and Hounslow Community and Voluntary Service (EHCVS), and Southall Community Alliance, and research institutions London School of Hygiene & Tropical Medicine, Imperial College London, and the Institute of Development Studies, has formed a new team called NIHR Health Determinants Research Collaboration (HDRC) Ealing,. Over the next 5 years, NIHR funding will help the council develop new capacity to collect, use, and learn from data and insights on the building blocks of health in order to drive greater health equity in Ealing.

During a competitive application process, the NIHR's funding committee was impressed with the bid's strong focus on community involvement and engagement with Ealing's voluntary and community sector as a core part of the application process. Ealing was the only London borough to win funding in this round. A core multidisciplinary team of council staff from the strategy, public health, community engagement, and data teams, along with academic and community partners began this work in January 2024, with the first phase of the 5-year programme establishing new research structures, new roles, and connections with all the council's work with communities so that the collaboration's research agenda meets the needs of local people, and creates a transformation in our learning culture.

The Ealing COVID-19 lessons learned review.

Ealing Health and Wellbeing Board, of which the council is a member, conducted a review of the lessons learned from the COVID pandemic, and how they were being acted on. From this review, recommendations for the council's response to the COVID-19 pandemic include:

building on structures set up during the pandemic to ensure continued engagement with communities to further build trust.

support for multiple community languages in key communications which should be designed with local communities' involvement.

a combination of boroughwide and smaller, localised approaches are needed – all informed by local community input.

upskilling teams and communities to support emergencies.

developing a pack of practical information and plans for any future emergency response.

These recommendations will support our work to tackle inequalities working across local partnerships, through improvements to our preparation for and response to emergencies.

Schemes focused on improving Children's Health and Well-being (funded from NHS England Health Inequalities Transformation Fund)

These included interventions for school readiness targeting areas and communities with the lowest scores, whole school approaches to change school culture around behavior and inclusion, the promotion of the Healthy Start initiative, enabling greater access to nutritious food to low-income families, and the promotion of organisations, particularly in the most disadvantaged neighbourhoods to become 'sugar smart', thus reducing unhealthy food options to children in Ealing.

Drug and Alcohol Joint Strategic Needs Assessment (JSNA) development for publication 2024

A key focus of Ealing's Drug & Alcohol JSNA under development is the rebuilding of the treatment system, including:

- A workforce development programme featuring an apprenticeship scheme to grow local treatment staff from Ealing's diverse communities.
- Appointing a partnerships' role to increase faith and communities' understanding of treatment, where to access it, whilst addressing the stigma associated with addiction.
- Developing a dedicated team for residents with co-occurring substance and mental health needs, integrating treatment into established mental health settings including wards & integrated neighbourhood teams.
- Increasing access to treatment through an assertive outreach team working with people experiencing homelessness in a variety of settings.

Other recommendations cover improved service integration with physical health pathways, work with parents and their children affected by problematic drug and alcohol use, and a focus on recovery & preventing drug & alcohol related deaths.

Case Study 1: HIV support for people living with, or affected by, HIV in Ealing

Ealing is an area of high HIV prevalence, with a rate of 3.8 per 1,000 people aged 15-59¹. Ealing Council have procured a new service through Living Well CIC starting in April 2024, to provide support to people living with HIV in the borough, enabling continuity of care, and a focus on reducing stigma, building self-esteem, and helping people live productive and healthy lives, living with HIV. HIV support is important and a key part of the HIV pathway. The services offered through this new contract align with best practice in HIV support. HIV (and other STI testing) is available, confidential, free of charge through sexual health clinics and online through Sexual Health London.

People can attend open-access sexual health services locally, or in other areas:

- Local services provided by London Northwest Healthcare Trust <https://shc.lnwh.nhs.uk/>
- Online home, self-testing: SHL <https://www.shl.uk/>

<https://www.livingwellcic.com/ealing/> for further information.

¹ <https://www.gov.uk/government/publications/towards-zero-the-hiv-action-plan-for-england-2022-to-2025/annex-b-local-authorities-with-high-or-very-high-hiv-prevalence-2019>

Case Study 2: Co-producing Ealing Council's Suicide Prevention and Self-Harm Action Plan



Ealing Council hosted two Suicide Prevention and Self Harm Prevention Workshops in 2023, with the primary aim to co-produce Ealing Council's Suicide Prevention Action Plan with our partners, stakeholders, and those with lived experience. The Action Plan will directly reflect the needs of local communities and aims to build voluntary and statutory support services. The workshops were developed and delivered by Ealing Council Public Health and Commissioning, CAPE Project, Ealing Mencap, GOSAD and Rethink Mental Illness. We are now in the process of collating the insights from the workshops and drafting our first version of the action plan for consultation.

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Case Study 3: Supporting residents with smoking cessation



The council commissioned a new, targeted stop smoking service in July 2023 that offers stop smoking community-based support for people with mental health conditions and supports pregnant women.

Since the launch of our new local service, the government has confirmed additional funding for the next 5 years. We are working towards procuring a universal stop smoking service for 5 years to support population groups with the highest prevalence of smoking and greatest risk of smoking-related health impact.

Housing: This Year's Achievements 2023/24

Support to rough sleepers.

We have secured 2022-25 funding through the government Rough Sleeping Initiative to meet our need for emergency accommodation for all rough sleepers with recourse to public funds, as well as to fund our Resettlement, Move-On and Housing Led initiatives helping this cohort to access more appropriate accommodation. We are currently funding emergency accommodation placements for 45 residents as well as support for further 12 accommodated in supported accommodation by A2D. Our Rough Sleeping Prevention team is working in partnership with DWP and local VCS to provide support for people who are having difficulties with housing identifying and supporting cases that do not meet the criteria to be owed statutory duty. Ealing's rough sleeping commissioned services, Thames Reach and St Mungo's, are offering support to 123 residents at different stages (prevention, rough sleeping, in emergency accommodation and floating/sustainment support). We are also currently helping 70 residents with no recourse to public funds to access immigration advice with the aim to establish their legal status in the UK, both through our commissioned Street Legal Worker and the West London commissioned Immigration Advice Service. Our commissioned Street Legal worker has successfully set up an immigration advice drop-in service in collaboration with North Kensington Law Centre and Hope for Southall Street Homeless providing advice to rough sleepers in the community.

Support to council tenants.

We are working with council tenants and leaseholders so that they have power and control over what happens in and around their homes. More than 200 tenants are involved in shaping services, and we are extending the engagement paths to a more local level. A draft resident engagement strategy and plan have been developed setting out how the foundations of resident engagement will be achieved. A number of pop-up events were held earlier in the year with over 120 residents attending, which helped to start the discussion on co-developing local estate plans. We have developed resident engagement strategies as part of the 'Building Safety' cases.

Ealing Housing Strategy – enhancing health and wellbeing through better, more inclusive housing.

In consultation with partners, residents and communities, the council have been developing a new Housing Strategy which has identified four priorities for action:

1. Increasing in the supply of genuinely affordable homes – working with residents and partners to ensure new homes meet residents’ needs.
2. Ensuring high quality housing: homes that are healthy, safe, and sustainable for all our residents.
3. Supporting people to live well in the community – working with partners to prevent homelessness and rough sleeping and providing housing choices for our ageing population to live independently.
4. Promoting resilience, inclusion and fighting inequality – addressing housing inequalities through targeted initiatives, improving resident engagement, and ensuring the accessibility of our services for all.

Ealing Homeless Health Board.

The council is a member of the new Ealing Homeless Health Board which is a cross borough-based partnership group convened to work as a whole system on the issues of homelessness in Ealing. This will enable the council to take improved, more integrated, and needs based action to address the health and building blocks of health needs of homeless people as a key group facing stark inequalities. The work of this group will include scoping the development of an Ealing Homeless Health Plan to sit alongside the Council’s Homelessness Strategy.

Co-developed a housing allocations training module.

Training for staff working with families in Ealing to support their navigation of the housing system has been developed. This will provide better housing support to families with various vulnerabilities. This work will include how to better understand the use of supporting information (e.g., for medical, special educational needs).

Transport: This Year's Achievements 2023/24

Improving health through supporting active travel.

The council has continued to deliver projects and schemes which prioritise active travel (cycling, walking and wheeling). We have made great progress towards the manifesto commitment of 150 bike hangars in the borough by 2026, having installed 54 hangars during 2023. There are now 98 hangars in the borough, providing the cheapest cycle parking in London, making it easier to safely store a bicycle for residents who lack access to a garden or safe storage space.

Let's Go Southall

Ealing Council invited Southall residents to share their thoughts on how to get the public to ditch the car and use other forms of transport including cycling, scooting and walking to create streets that get people moving and that are less congested, safer, greener, and more pleasant for all road users. In its [Get Southall Moving](#) consultation in June 2023, the council along with its town partner [Let's Go Southall](#), engaged across the community in how to make it easier for everyone to get moving – walking, cycling, jogging, scooting, or even hopping, skipping and jumping.

Supporting health and wellbeing through cycle training.

We continue to deliver cycle training sessions for adults and families, as well as children in Ealing's schools, and school holiday courses offering basic cycling skills for children who are unable to ride a bike (Learn to Ride course) and to improve cycling ability (Level 1 and Level 2 courses). We also deliver borough-wide 'Dr Bike' cycle mechanic sessions. One third of children do not take part in the recommended 60 minutes of physical exercise and cycling is an opportunity for children to do this as part of their journey to school or for leisure. There is a decline in the number of children cycling, with traffic-related danger being a key reason for parents not allowing their children to cycle. Through cycle training, children gain the skills and confidence to safely cycle.

The council continue to provide e-scooter and e-bike schemes in the eastern half of the borough, which are seeing tens of thousands of trips each month and provide an affordable option for active travel. We are planning to expand these schemes to the rest of the borough in 2024 to ensure more residents have access to these active travel options.

The council consulted residents across the borough about where they would like to cycle, and the barriers they face in cycling more. This consultation provided the foundation for developing the Cycle Network Plan, a map of cycle routes we aspire to deliver in the next decade. The Plan is now online for final feedback before being published.

Offering access to trial of cargo bikes.

The council offers a cargo bike for residents to try for two weeks at a time, in order for them to see if they would like to purchase one themselves. The cargo bike can safely carry up to four small children or a good amount of shopping. Residents have shared their enjoyment of using the bike, their improved wellbeing thanks to taking their children around in a clean method of transport which doesn't impact the environment and provides physical activity.

Planning: This Year's Achievements 2023/24

Ealing has been developing a new Local Plan. A Local Plan guides decisions on future development proposals and addresses the needs and opportunities of the area. Topics that Local Plans usually cover include housing, public spaces, employment and shops and they also identify where development should take place and areas where development should be restricted. These are all important building blocks of health and wellbeing and hence the local plan itself is a long term strategy for improving the health and wellbeing of residents through planning. The draft [New Local Plan | Ealing Council](#) is now undergoing the Regulation 19 Consultation until April 10th 2024, which is the final chance to provide feedback on the plan. The regulation 19 consultation is a key stage in a long path towards a critical set of policies which will provide a framework for shaping development across the 7 towns and the borough over the next 15 years.

Case Study 1: Visions for Northolt (VFN)

VISIONS FOR NORTHOLT

Visions for Northolt (VFN) is putting local people in the driving seat of change. It is a community-led engagement and regeneration programme that has been designed and delivered in partnership with local people. It is all about making sure that future investment in Northolt reflects local needs, priorities, and aspirations.

300 local people helped to develop a community-led vision for the future of Northolt. Through the VFN programme we are now working together to co-deliver this vision through a series of projects which support the people working to better the community and to provide positive foundations for future engagement. We are now working together to deliver this vision.

The Levelling Up funding for active travel, highways and public realm improvements will benefit all road users, including pedestrians and cyclists.

This will help with the following outcomes:

- Travel in Northolt will be safer, easier and more pleasant for all, including cyclists and pedestrians.
- Public spaces will be more attractive, inclusive and greener.
- By making cycle and footways safer and more attractive, we expect there will be an increase in walking and cycling.
- This increased footfall on Northolt's high streets will also support local businesses.
- Grow the local economy and High Street to allow Northolt to thrive.
- Create connections between Northolt's Neighbours and to wider areas.
- Enhance the Town Centre environment, including reducing the impact of congestion, litter, and pollution, improving signage and creating a greater sense of personal safety.

- Improve connections and address severance, including enhanced cyclist and pedestrian access.
- Celebrate Northolt's green space.



Mandeville Road improvements at Islip Manor



Church Road improvements to shopping parade

Employment, Skills & Poverty: This Year's Achievements 2023/24

New jobs in the borough

We have committed to secure 10,000 new jobs in the borough in 2022-26 to ensure that every resident in Ealing can access a well-paid job locally. 2,263 Ealing residents have been supported into employment by Work Ealing and its partners, and another 262 apprenticeship vacancies have been created. 30 young people with disabilities have been enrolled into SEND Supported Internship Programme. 2,357 qualifications and training programme graduations have been achieved by Ealing residents as part of Learn Ealing programme and partners and we are on track to the 4-year target of 12,000. The new Learn Ealing prospectus was launched in August 2023, available in a printed and an online format, with a variety of courses available for enrolment. A Welcome Centre at Greenford town hall for the Homes for Ukraine scheme was launched in October 2023. A tailored programme of ESOL, professional skills and health and wellbeing is being delivered at the centre and is also open to other refugees in the borough. Over 959 Ealing residents with the toughest barriers to employment have been supported through specialist programmes to bring them closer to securing employment or training and we are on track to achieving the 4-year target of 2,000 residents supported.

Living wage action group

Following the London Living Wage Celebratory event on 8 June 2023 attended by over 300 businesses, we have launched a package of incentives and established the Living Wage Action Group that would work to secure more accredited businesses in the borough. We will strive to ensure that every resident in Ealing can access a local well-paid job in a growing economy that keeps more of our money local, recognizing income as a key determinant of health.

- Tackling inequalities in employment and skills
 - BEAM: BEAM has been commissioned to deliver specialist employability support to support Ealing residents who are at risk of homelessness or homeless to support them into sustainable employment.
 - Action West London (AWL): AWL have been commissioned to work with Black men to tackle unemployment. AWL offers training and support with job applications and CVs. The programme focuses of supporting young Black men into London Living Wage jobs.

- Horizons Pathways programme: This programme has created a diverse range of over 30 placements within the council for care leavers.
- Apprenticeships: Ealing Council has its own internal apprenticeship scheme for residents, offering 15 apprenticeships in 2023/2024.
- Green Skills Bootcamp: 11 Ealing residents in total have participated in the Green Skills Bootcamp with Hounslow and Maydencroft. As a result of participating in the programme, two Ealing borough residents have secured employment with Maydencroft in November 2023.
- Bespoke training: Supporting residents into jobs through bespoke English for Speakers of Other Languages (ESOL), English, Maths, Digital, Employability and Professional training to clients and partners including JCP, A2 Dominion, Centre for Armenian Information and advice (Acton) and Ingeus. Additionally, some employment and skills training has been integrated with wellbeing support. This offer includes ESOL, confidence building, manage finances (Ealing soup kitchen); Chair Yoga, ESOL and health, Tai Chi (Resident involvement team- Acton); First aid for women, Yoga, Yoga Shapes, and Koch's snowflake (learning about fractals - Southall community alliance) within settings across Ealing with creche support for parents to support equality and access.
- Ealing Soup Kitchen: Learn Ealing delivers courses to support residents who are homeless, the courses delivered are communications and ESOL, confidence building courses.

Case Study 1: UK Shared Prosperity (UKSPF) People & Skills programme

The council received UK Shared Prosperity Funding (UKSPF) for a People & Skills programme that considers the inequalities and health and wellbeing of residents. The programme delivery will commence in April 2024. The programme will be delivered for economically inactive and unemployed residents including the following priority groups:

- Economically inactive – community-based engagement to promote the benefits of gaining new skills and qualification to meet their short term and long-term goals.
- Unemployed with multiple barriers – we will deliver short sector-focussed pre-employment training which will be linked directly to work and focus on green skills, health and social care, creative skills and construction. (The list is not exhaustive)

- Migrants, refugees – ESOL (unaccredited) + vocational and job search – engagement sessions – tasters – health and well-being – confidence building – information and advice – income and earnings advice, local labour market advice
- Women – We will deliver small, tailored group advice and guidance; careers guidance; job support; digital job search.
- Over 50s – Group careers and industry sessions
- Ex offenders – we will commission this provision to specialist programmes and deliver a pilot programme working with young people with a risk of offending.
- Homeless or at risk of homelessness – we will commission this provision to specialist programmes.
- Care leavers – Vocational tester and taster sessions with merging sectors and work placements for 1 week maximum, to maximise appeal to employers with labour market information.

The programme offer will include:

- Self-employment V Employment workshops
- Tailored 1-1 career, employment and skills training guidance.
- CV workshops
- Money management workshops
- Arts and Creative Industry – Drama workshops to build confidence and enable entry to performance and media and technical roles in the creative sector. (Supports the Council’s Cultural manifesto action plan)
- Travel to work support i.e., route planning for work
- In work support once someone has moved into work – Coaching/1-1 support /mentoring/tailored wellbeing and engagement enable progression to higher paid roles and free up entry roles.

Case Study 2: Ealing Care Leavers Insight Days, Boston Road (Higgins Partnerships)



Two care leaver candidates participated in Ealing Care Leavers Insight Day hosted by Higgins Partnerships at their Boston Road Project. During the two days, Ernest and Ferrell gained an overview about the project whilst shadowing various departments and learnt about the different roles from the site team including the Sub-contractors. They also completed a construction challenge activity where they had to build a bridge made from spaghetti and marshmallows. The aim was for the bridge to be strong enough to hold a small toy car without the bridge breaking.

Ernest said *“It was a great experience, and the site team were very informative and showed me around the site. I got to attend a meeting as well which gave me an insight into what it takes to construct a building site.”*

Farrell said: *“I enjoyed the insight days as it helped me get a better understanding of what it is like*

working on site. The site team were friendly and answered all of my questions.”

Louise Howell, from Ealing Council’s Work Ealing Team said *“At Ealing Council, one of our key priorities is supporting those with the toughest barriers, into meaningful work, training or education. Care leavers are a priority to our service and we are always looking to create projects that help support them into positive outcomes. We were very excited to work with Higgins on this important project and the feedback has been great.”* We are aiming to work with the developer to continue running the insight days to provide opportunities to residents.

Case Study 3: Ealing Learning Zones



Since launching two years ago, learning zones have helped people improve their digital skills and find good jobs.

A learning zone is a one-stop shop for residents to access a wide range of training and learning opportunities. There are currently four learning zones across the borough in Acton, Northolt, and Southall libraries, and in Hanwell community centre. The Learning Zones are equipped with Wi-Fi, laptops and cameras to help residents obtain skills and provide them with the necessary tools to succeed. Learning zones are part of the wider community hubs, supporting residents to access council services.

Since the opening of the first learning zone in Northolt in October 2021 to the most recent launch of Hanwell Community centre in January 2024, Learn Ealing have supported almost 600 learners to achieve positive learning outcomes to support their employment status and other skills including building their confidence. Furthermore, we are proud to announce that a total of 159 learners gained or changed employment and 62 learners received promotions in their current roles or started a new voluntary position.

Ansam and Hamid from Iraq share their experience of being on a English for Speakers of Other Languages (ESOL) course from Learn Ealing.

Ansam and Hamid said: ““This is a great ESOL course. The classes are fun and interesting, and our teacher is always there to support us. She is the best. Our English has improved quickly in a very short time, and we never feel bored. Thank you so much.”

The Learning Zones will continue to be accessible to all residents.

Services available include:

- Customer service hub ...get all your questions answered face to face.
- Learn Ealing course offer.... Including ESOL, Digital and functional skills.

- Fully functioning hub room with interactive computer and whiteboard screen for hirers.
- Usual library services...books, media and much more

Community Engagement: This Year's Achievements 2023/24

First year of the Council's [Community Champions Programme](#)

The council continues to develop its Community Champions programme throughout the seven towns to better engage and work with communities. The programme:

- encourages discussions and training on the building blocks of health and wellbeing and the wider work of the council to improve health equity and reduce inequalities.
- empowers local community groups to build bridges between the Council and their communities to foster co-design, especially amongst disadvantaged communities.
- enables direct, open and ongoing two-way conversations between communities and services.
- invests in champions to support their communities by increasing skill sets, confidence and the capability to build active communities.
- engages with specific demographics or defined groups to enable a relational and inclusive approach with our local communities in any future co-production work.
- There are currently 56 Champions, who during the course of the first year of the programme, have been offered training in Making Every Contact Count, Core Conversations Skills, Crowdfunding training, Suicide Awareness, a wide range of online health and wellbeing courses, community research skills and digital champion training. The champion body are due to undertake mental health first aid training and be increasingly involved in the governance and design of the programme itself. The programme hosts bimonthly forums where stronger relationships are forming amongst the champion group, as well as a range of conversations being held regarding mental health, understanding funding opportunities for community projects, Ealing's food partnership, Learn Ealing programme, the Health and Wellbeing strategy 2023-2028, Winter wellbeing, Fuel Poverty, and the cost-of-living crisis. Champions have recruited other champions and have developed proposals for community project ideas for 2024.

Citizen Tribunal:

- Of the 7 Priority areas of the Race Equality Commission (REC) - Education and Health have both held public meetings. Subgroup members in both Health and Education have been consistent in meeting with partners and colleagues and have input and provided constructive scrutiny and feedback to influence change in addressing race inequalities.
- Good progress in Education in attempting to reduce inequalities by implementing specific actions with dedicated resources- for example Ealing Learning Partnership (ELP) colleagues implemented impactful race equality training and developed a race equality toolkit,
- Tribunal members as part of their input and feedback identified areas for further work for example in engagement with parents and in areas of recruiting more black teachers in leadership roles and around data capture and analysis.
- In Health- NWL ICB has responded to aspects of the REC recommendations via their workforce strategies and in Public Health race inequalities are being addressed in “Together in Ealing” - Ealing’s’ Health and Well Being Strategy. The REC has also been the driver for several funded initiatives via the Public Health inequalities fund – one of which is being delivered by EHCVS, building on their current capacity building grant awarded by the Council – they are now targeting voluntary and community groups specifically from Black and Minorities backgrounds with funding from Public Health to scale up their work and provide a targeted offer.
- Working is starting to progress REC demands in other Priority areas such as Housing, Participation and Democracy, Income and Employment and in Policing.
- Expected outputs and outcomes to be delivered by March 2024: (a) Report on progress of overall actions against REC demands.

Ealing Welcome Hong Kong Fund

Ealing Council launched a new community needs survey in January 2024 to learn more about new residents from Hong Kong and how to design local services that would meet their needs. Working with local community networks, Ealing and Northfields Hong Kong Club and Light Foundations, we will support Hongkongers by:

- understanding and addressing the needs of new residents from Hong Kong.
- building trust with Hongkongers to help with cooperation and integration.
- promoting physical and mental health to build confidence to settle in the UK.
- providing educational opportunities and celebrate Hong Kong heritage and culture.
- increasing employability through training and skills.

Ealing 4 Everyone Pledge

The “Ealing is for Everyone” pledge, ensuring that all public spaces, businesses, and services are welcoming and accessible to people with disabilities and learning difficulties. The council is conducting a desktop review of how and where pledges/agreements exist, what their goals and influences are, and how they are delivered, administered, and monitored. Plans to stand up a formal advisory group of people with either lived experiences or professional understanding of people with physical, mental and learning disabilities, to lead on the engagement and consultation exercise are underway.

Case Study 1: Town Forums



The council is developing new town forums across the borough, for the residents of each of Ealing's seven towns to come together and help make decisions about their neighbourhoods ensuring more inclusive active involvement by Ealing's diverse residents. Empowering residents to work with the council is an excellent way to improve health and wellbeing and improve health equity

Working with New Local, the voluntary community sector in Ealing and Ealing schools, extensive engagement was undertaken between July to November 2023 using a range of methodologies with a cross section of stakeholders and residents.

We explicitly targeted young people, carers and people for whom English is not a first language as they are often seldom heard.

Approximately 980 responses obtained from face-to-face engagement and via a digital survey.

32 face-to-face events took place at local settings across the borough with 612 interactions with people and circa 490 live responses.

Residents have very diverse opinions about the kinds of activities that they want to take part in – one size does not fit all, but over 56% would like to participate in future initiatives to work with the council. The next phase of work will be to deliver 7 town events inviting local people to participate and have a say in shaping how they would like to get involved in inclusive models of civic participation so they can prioritise and address opportunities and challenges important to them in their town.



Case Study 2: Multifaith forum



During the pandemic Ealing Together became a platform to help amplify key messages as well as hear insights about how faith communities were being affected and the support that they were able to provide. The council has continued these conversations and is facilitating a safe space for faith leaders to explore how they can work together, and with the council. Following an inaugural meeting at the end of February 2023, work to form a steering group is underway and a further meeting are planned to take forward a governance structure of working together on agreed priorities. At the practical level, faith organisations are working with the council to tackle issues affecting their communities around community cohesion, poverty, loneliness, mental health and wellbeing, support for young people with several becoming an integral part of the network of warm spaces across the borough throughout the winter of 2023.

Case Study 3: Community Design Centre



Ealing's Community Design Centre was established in 2023 to transform local people into designers via an applied training programme that gives local people the skills and confidence to solve local problems. Many of these local problems have a bearing on the health and wellbeing of residents and so as such, the programme builds on community assets equipping people with new knowledge and skills to take control and make local change to help them thrive. The initiative equipped a group of passionate people with the skills to test and implement new ideas and initiatives locally that make a difference to people. The Community Design Centre enabled Ealing Council Officers and residents of the borough to come together to discuss local issues, joining up communities to discuss projects they are working on locally and how they can work together going forward (e.g. Food hubs), and upskilling volunteers with new skills, knowledge and experience to put into their everyday lives. It also raised community awareness of services which Ealing Council offers and helped link residents to the right department (e.g. Safer Communities, Housing Repairs).

Adults: This Year's Achievements 2023/24

Community Connections

Thirty organisations that offer help and support to residents and communities across Ealing have been given a share of £2.4m of funding from NHS North West London Integrated Care Board and Ealing Council. Each Community Connections project receive £108,750 per annum support their work over four years for 2023-2027.

Priority for funding was given to areas including domestic violence support, mental health services, respite care and building better community connections.

Recipients of the funding were:

- Befriend – providing community activities in Central Ealing

- Ealing & Hounslow CVS – providing community activities in Action
- Southall Community Alliance – providing community activities in Southall
- Golden Opportunity Skills & Development – providing community activities in Greenford, Northolt and Perivale

Improving older people’s quality of life through home adaptations

Work with housing, and the Disabilities Facilities Grant, the council has invested over £1.5m into home adaptations, including work in 156 private properties and in 122 council properties, to provide more innovative and tailored housing solutions for older or vulnerable residents with a focus on extending extra care provision over the medium term.

Review and remodelling of the council’s adult’s partnership board structure.

The council’s four partnership boards have been reviewed and an implementation plan has been developed to invigorate membership. There are now co-chairing arrangements for each Board, with residents, an additional group for carers, and an additional group for people with physical disabilities. In addition, the council has increased the diversity of community reps on the boards. To ensure the Health and Wellbeing Board is equipped to operate for the benefit of our diverse communities, the new ‘Co-production boards’ will report to the Council’s formal meetings and Ealing Health and Wellbeing Board providing a direct route from the local community to the political leadership of the Council and senior leaders of our Health and Wellbeing partners.

Case Study 1: Direct Payments Review

Direct Payments devolve control of social care funding to people to buy (micro-commission) their own care support, giving residents greater choice, flexibility, and control over the way they can access and receive support to meet their assessed needs. In Ealing, in March 2023, 463 people had a Direct Payment. This included 334 adults, 20 family carers, and 109 parents of children with additional needs. Direct payments can tackle health inequalities by delivering improved health and wellbeing outcomes for people; particularly for people with caring responsibilities, and/or diverse needs across mental health, learning disabilities, physical health and frailty. This year, the Integrated Commissioning Team reviewed how to increase direct payments across Adult Social Care, which involved stakeholder engagement with residents, local providers and voluntary organisations, an audit of internal processes and benchmarking good practice. The review revealed that most people with a Direct Payment feel more in control of their social care, would like more flexibility in how they can use their direct

payment and to feel that the Council trusts them to manage their payments. Following the review, council departments will work together to promote community-led development as a means of enhancing choice and control, health and wellbeing, and the service offer for our residents. This will include:

- Exploring increased investment in Ealing Direct, the team that manages Direct Payments.
- Targeted development with the local voluntary and community sector, other council departments and partner organisations.
- Potential to expand direct payments to other areas of council function.

Social work focused activity to promote Direct Payments and community-based services.

Children & Young People: This Year's Achievements 2023/24

Ealing Additional Needs, SEND and Inclusion Strategy 2023-2027

This new strategy was launched in April 2023. A Young People's group has been set up to help us bring the strategy to life. We will finalize action plans based on outcomes from our self-evaluation process and carry out workshops with parents to share key actions and activities. As part of the strategy, we provided 78 additional SEN places in September 2023, in addition to 50 new places last year. Out of 78 places opened this year, 53 places were created at special schools and 25 places at Additionally Resourced Provisions in mainstream schools in Ealing, Greenford, Hanwell, Northolt and Southall.

First Corporate Parenting Summit for Ealing.

Local authorities have a unique responsibility to the children they look after and their care leavers. In this context local authorities are often referred to as being the 'corporate parent' of these children and young people. In March 2023, the Ealing community came together to take on the role of corporate parent bringing together over 120 individuals representing local business, the Council departments, partners such as the DWP, Home Office, met police and health, local landlords and accommodation providers. Young people shaped the content of the day, chose the speakers and ran workshops based on a survey of young people's corporate parenting needs undertaken by the leaving care service.

This summit resulted in over 100 pledges of support to care leavers and looked after children including mentoring, apprenticeships, housing options, education and training opportunities and many more. Examples of pledges include:

- The new Who's Got Your Back tool for care-experienced young people which has been developed in the Leaving Care Service and is aimed at ensuring care experienced young people have strong local support and social/community networks into independence.
- The new plus 1 free Gym Membership for Care Leavers in Ealing at the Everyone Active Centres also supports those local relationships and use of community resources.

Making care experience a 'protected characteristic'.

In April 2023 the Council voted to make care experience the 10th protected characteristic in the borough in line with the Government's Care Review 2022. Young people presented the case to full council and received a unanimous vote for the motion.

Developing the Childrens and Young People's Board

The council has held several workshops, facilitated by The Leadership Centre, for our Children and Young People board since February 2023. This has been an opportunity to extend the board further in our network, in particular to our VCS members and young people and parents. Workshops have explored our understanding of the children and families system, our relationships with each other as multiagency, multidisciplinary professionals working together and helped us to prioritise how we wish to continue this work with children and young people's holistic health and wellbeing needs at the heart.

Family Hub discovery phase

Ealing is co-creating with a comprehensive range of community & statutory organisations, parent/carers, children and young people a 'family hub' system-wide model approach for providing high-quality, whole-family, joined up, family support services., adopting the vision "*It takes a town to raise a child*". Our proposed 'Family hubs' strategic approach, is a place-based way of joining up locally, the planning and delivery of family services. They bring services together to improve access, improve the connections between families, professionals, services, and providers, and put relationships at the heart of family support. Family hubs will offer support to families from conception and two, and to those with children of all ages, which is 0-19 or up to 25 for those with special educational needs and disabilities (SEND), with a great Start for Life offer at their core. This is not necessarily about one physical 'hub' but

about better interconnections and relationships between existing people, places, networks and existing assets in the community, including staff and residents in the children centre network, youth clubs, general practices, schools, community centres, places of worship, etc.

'Relationships Matter' - Reducing Parental Conflict Project

Ealing Council and Family Lives successfully received a joint bid from Foundations for the 'Relationships Matter' project which focuses on the local provision of parental conflict support. The focus of this pilot project is to explore the barriers to accessing support for relationship difficulties between parents, we are running this initial pilot in our Southall community. We will explore themes around understanding of the issue, barriers to accessing help, language and engaging the community with services.

Alongside this work, we are also developing a support pathway that aims to provide a shared local understanding of current services and interventions that reduce parental conflict. To this end we have developed a survey for both our practitioners' learning needs and our community's lived needs. This will help us plan and commission effective support to build resilience in families.

Family Information Service (FIS) and access to Early Help

Continues to provide information advice and guidance for children, young people and families and professionals across the Ealing borough in multiple areas, including accessing health services, child development support and childcare provision. 4.3% of calls received by the Family Information Service were for health-related needs and services across the borough. FIS is the administrative hub for Early Help via the EHAP (Early Help Assessment and Plan). Of all EHAPs registered in April -December 2023 69.4% were in relation to health needs and incorporated targeted, multi-agency support to improve health, wellbeing and developmental outcomes for children and their parents/ carers.

Extension to Early years entitlements and Wrap around care

The extension to Early Years entitlement funding and wrap around care, which commences its phased approach to roll out in April 2024, will enable more families to access childcare support that meets their needs. Providing the opportunity for families to increase the amount they work or manage their workload more efficiently and affordably provides them with a strong sense of emotional wellbeing and economic stability. Highlighting the childcare support

that both families in receipt of Universal Credit and those with a tax-free childcare account are able to access will provide the community with more options to balance their life. These will be promoted through Early Years providers, Childminders and Schools with the focus on ensuring families have all the information they require to make informed choices. The expansion of Wrap around provision provide more children in Ealing with affordable after school activities that promote a healthy lifestyle. Wrap around provisions are delivered in such a way that they can provide children with sports and recreational activities that they would not be able to access otherwise.

Youth Justice Service

The Youth Justice Service (YJS) and the Health and Wellbeing Board has worked closely towards introducing a dedicated GP service in Westside Youth Centre. More young people accessing the YJS are boys from a black British and black Caribbean heritage, and most of the cases relate to violence and drugs. We established while some of the children don't have a GP, others do but they have never seen their GP and some don't know who their GP is. Westside youth centre lends itself to being a centre where children can visit more easily to access youth services and accessing a GP will be easier as they are situated within the centre. Working with the Dedicated Safeguarding GP and the NHS a service is being introduced for 18 months to support YJS children, but the aim will be to expand this offer to other children following an evaluation. Children have said that more accessible services should be provided for them so starting this service will aim to provide more support to children.

Case Study 1: Holiday Activities and Food (HAF) Programme

The HAF Programme is funded by the Department for Education to provide enriching activities and a nutritious meal, during the Easter, Summer, and Christmas school holidays, to children and young people who are in receipt of benefits related free school meals, have been referred by a professional due to vulnerability or because the family are at risk of food poverty.

The Ealing HAF Programme provides access to a wide range of funded enriching activities, a nutritious meal at each activity they attend, a minimum of 60 minutes physical activity each day, and education and advice on healthy lifestyles. In addition, families receive access to surplus food and food parcels, and signposting to local support services through the 'Guide to Family Support Services' brochure.

The HAF programme supports physical and mental health of participants and their families as well as diversionary activities to provide reassurance that children and young people are positively engaged and safe during the holidays. The HAF programme offers children and young people to opportunity to socialise and connect with new people developing new friendships and strengthening existing relationships.

In 2023, **4369** unique participants accessed a total of **31390** HAF sessions. **1145 (26%)** participants stated they have SEND. **256** participants were referred to the programme as vulnerable. **28864** nutritious meals were served. **886** food parcels were distributed during the Christmas programme.

The programme was delivered by **56** providers at a total of **81** unique venues including **40** Schools.

Parents and carers reported that:

- 66% of children had tried new foods and learned about nutrition and healthy choices.
- 90% of children learned new skills and took part in physical activity each day.

As part of the Summer 2023 HAF Programme, we delivered two HAF Projects to support specific target groups for more on each programme please view the video links:

- Transition Project - in partnership with Alec Reed Academy, Sporty Zone 22, and the School Partnerships Coordinator. Focusing on pupils in Year 7 who had struggled with their transition from Primary to Secondary School and Year 6 pupils transitioning in September. Pupils had SEN either diagnosed, or under assessment, and were finding the transition and school environment difficult. https://youtu.be/U2e3l_Cmh8A.
- Traveller Project - in partnership with Bollo Brook Youth Centre and the community at Bashley Road Traveller site. Bashley Road is surrounded by building sites and there are no parks, playgrounds, or open spaces within walking distance. Most residents are eligible for HAF but tended not to access programmes. Families were given support on applying for funding and accessing services. <https://youtu.be/ZRW2IRKKD1M>.

Case Study 2: Youth Services – exploring health equity through artworks



Over the past year, the council's youth workers at Bollo, Northolt and YES (what does this stand for?) have developed artworks with young people that explore health inequity as part of 'The Living Roots project'.

The Living Roots Project, funded by the UK Arts and Humanities Research Council, is a partnership involving Ealing Council, NHS Northwest London, Southall Community Alliance, Voices of Colour, The Young Foundation, Bollo Brook Youth Centre, and the Institute of Development Studies to build shared understandings of the key 'problems' influencing health inequity in Ealing, and to co-produce solutions. The work centred on the lived experience of individuals and the community assets with which the system needs to engage.

The work has included:

- Youth social action research, including consultations in Ealing schools and ongoing arts-based research sessions to highlight the building blocks of health, e.g., where one young man (images included) has explored how his Ethiopian identity shapes his life in Ealing today.
 - A final event at ActOne with young people, councillors and professionals coming together to celebrate the artworks with food and live music.
- Two pieces of work made with young people at Northolt Library were sculptures representing healthy and unhealthy lifestyles. The piece made at Bollo Brook Youth centre is a customized moped (see image) exploring what young people feel impacts on them positively and negatively. The moped features an interactive element which is a podcast where young people discuss these issues.



Education: This Year's Achievements 2023/24

Ealing Learning Partnership (ELP) has entered its fourth phase of development in delivering its central mission – *No Learner Left Behind: No School Left Behind*.

A collaboration between the council and 85 of the borough's schools, the partnership has implemented this vision with an innovative approach that places school leaders at the forefront, utilising their expertise to drive educational excellence, tackle inequalities and deliver better outcomes.

Over 40 school-based leaders contribute directly to leadership and governance roles across six domains of activity, including:

- Leadership and learning.
- Safeguarding and wellbeing.
- SEND and inclusion.
- Progression and pathways to employment.
- School sustainability and recruitment and retention.

The council sees the passion and capacity harnessed through the partnership as integral to its wider mission to improve the quality of residents' lives. ELP has become a vehicle for collective action in reducing exclusions, tackling entrenched race-based inequalities and improving access to mental health support and employment for young people.

From its starting point as a pilot in 2017, the partnership has achieved outstanding success for our children and young people. 99% of schools are now graded good or outstanding. Of the 41 schools inspected since September 2023, all were good or outstanding. Educational outcomes and progression measures well above the national standard across all published accountability measures. Additional education outcomes of the ELP include:

- 2023-24 academic outcomes remained well above the national across all key stages.

- Disadvantaged learners continue to achieve strong academic outcomes in every key stage, while learners with SEND achieve outcomes that are above the national standard.
- Ealing’s secondary schools achieved first place in the country in 2019 and 2022 for Progress 8 (the national measure of pupils’ progress from Key Stage 2 to Key Stage 4)
- Ealing Council remains in the top 5 of London authorities for securing participation in employment, education, and training for all 16–17-year-olds.
- Strong and developing supported internships programme for young people with SEND and a 96% success rate in securing employment.
- All schools have pledged their commitment to [Ealing’s Race Equality Commission’s education demands](#)
- 100% of schools surveyed say that ELP has built trust between schools to support high challenge, low threat professional learning.
- Ealing’s model of Primary Learning Clusters is recognised nationally to be paving the way towards stronger and more sustainable models of professional accountability. [Home - Educating For the Future \(loaled2025.org.uk\)](#)

Case Study 1: Education Race Equality in Education Plan



Ealing’s Education Race Equality Plan was launched in June 2022 and has gained wide-spread support and commitment from Ealing schools. The plan sets out area-wide ambitions in response the Race Equality Commission’s demands to: Rapidly close the attainment gap for Black Caribbean pupils, end the disproportionate rate of exclusions, accelerate progress with changes to the curriculum; make training for teachers on race equality and unconscious bias part of core training; empower parents to play an active role in their child’s education; every school should have a lead for race and diversity who is identified to parents; increase the number of Black teachers in leadership roles.

The impact to date in terms of leadership and engagement includes:

- Engagement of headteachers/governors at launch of race equality education ambitions June 2022
- 95% of Ealing schools now have a named senior leader for race equality.
- 70% of schools are engaged in a wide-ranging leadership engagement and training programme focusing on all aspects of school life including: developing racial literacy of school and council staff through training; developing and profiling schools with aspirational curriculum models; promoting importance of parental engagement etc. Information video produced for school staff [Race equality video](#).
- Providing tools, training and guidance to all schools “Race Equality in Education Guidance for Educational Settings”
- Developing new Post 16 support and pathway mentoring programmes to university
- Schools are actively reviewing the impact of behaviour systems and sanctions and over 50 schools are invested in *Therapeutic Thinking* – a whole-school approach to supporting unmet/unidentified needs aimed at reducing suspensions and exclusions.
- PSHE scheme of work revised to include new focus on race equality.
- 79% schools report that they have reviewed their curriculum to make it more inclusive.
- 88% schools have a curriculum that includes an aspirational representation of the contributions of the Black community.
- A Diversity in Leadership training programme is now well established to accelerate progression of Black, Asian and minoritised leaders to senior leadership roles in schools.

Community Safety: This Year’s Achievements 2023/24

Safety on our streets

We are enhancing our capacity to tackle anti-social behaviour (ASB) and inappropriate behaviours on our streets. We have worked with the police to increase the number of hours of patrolling delivered, both by neighbourhood teams and our council-funded patrols, providing more reassurance to residents with a more uniformed presence on the streets. There are now over 20 police officers patrolling the Uxbridge Road corridor alone, as well as 2 dedicated officers per ward across the borough. Ealing’s Safer Communities and police services are also represented on town centre and business improvement forums, including

Ealing's High Street Taskforce, which has improved information sharing and collaboration with issues affecting local businesses and customers. The council understand that feeling safe in the seven towns of Ealing is a key contributor to health and wellbeing of residents.

Tackling Male Violence Against Women and Girls

As part of our Male Violence Against Women and Girls (MVAWG) Strategy 2023 - 2028, we continue our dialogue with women to ensure we are working to and responding on their concerns around safety in our borough. The Safer Ealing for Women website was launched in July 2023, which contains resources and tools, information on organisations that provide support and a blog that continues to be updated on new developments in the MVAWG work Ealing and its partners are doing. MVAWG now features consistently as a standalone item within the key partnership meetings, with police providing a monthly update on MVAWG-related offences and activity to respond to these. Other outcomes from this work this year include:

- Page 124
- Installed 24 new HD CCTV cameras in key locations and upgraded 20 more to HD standard.
 - Increasing street lighting on all residential roads
 - Upgrading 3,1000 street light columns.
 - Delivered a £40,000 education program offer for every secondary school, exploring healthy relationships and giving young people the tools to identify and challenge unacceptable behaviours.
 - Extending workshops on healthy relationships and challenging unacceptable behaviours across community groups and providing practitioner training
 - Delivered Police led Walk & Talk events in 2023.
 - Delivering community engagement events directed at communities that hold lower levels of confidence in the police.

Case Study 1: Resilience Building for Care and Vulnerable Settings

The council has commissioned Lasting Support Services (LSS) with Small Steps Ltd to deliver trauma-informed approaches to support local voluntary and community sector organizations, to confidently engage with vulnerable children and families affected by international conflicts that have impacted on their

mental health and personal resilience. Some of the local organisations that accessed the training and support include, care settings, SEND organisations, educational settings, refuges, supporting housing, health organisations and advice and advocacy services.

The impacts of this initiative include:

- 20 local organisations trained to support service users with personal grievances linked to international conflicts & war.
- Increase of staff confidence to facilitate difficult and challenging conversations with service users.
- Increased awareness of how vulnerable people can be exploited through grooming and radicalisation using personal grievances.
- Increased awareness to refer on for additional support to address grievances.

The project has been designed to build capability within those local organisations ensuring that staff are better informed and confident to support vulnerable people affected by conflicts and know how to access support services available to them. Whilst the project funding ceases from April 2024, the organisations trained will continue to be supported via LSS through their other services notably 'Building bridges'. The organisations will also have access to the various Ealing Partnership groups to increase their knowledge and strengthen their involvement.

Culture and Leisure: This Year's Achievements 2023/24

Planning for Ealing Regional Park under development.

Exciting plans have been developed for the potential delivery of a new regional park running through the heart of the borough, following the River Brent Valley, and extending to circa 580 acres. Due to its scale, it is anticipated to have transformative benefits not just for Ealing, but the whole of West London. New wetlands habitats can be introduced to help manage flooding and water quality, and the site is large enough for an expansive tree planting project with up to 15,000 trees to add to those already planted in Perivale Park. Cabinet agreed on 13 September 2023 to commission consultants to develop the ambition, vision, objectives and business case for the creation of a regional park in Ealing. Public consultation on the creation of the park closed in December 2023 and the analysis has been completed and a report is due to be published imminently.

Expanding the culture and arts offer across Ealing borough.

We aim to expand our cultural offer for Ealing to secure its status as west London's leading borough of culture. The council has commissioned a Cultural Infrastructure Plan (CIP) which will become Ealing's blueprint for what cultural spaces are needed for its diverse communities over the short, medium and long term. The plan's recommendations due in early 2024 will be supported with robust evidence on why these facilities should be provided, what local jobs they will provide, and include a practical toolkit on how to deliver them. It also ties into the Local Plan, which sets out a borough-scale vision for the next 15 years (2023-2038). A grant of £30,00 has been secured from the Arts Council to deliver a virtual reality programme at Southall Library in celebration of Martinware's centennial. £47,000 of external funding has been secured to facilitate a traineeship programme for young creators. We have also submitted a bid to the Arts Council to expand the Northolt Library to create a culture and arts space. Finally, Ealing is bidding to be London Borough of Culture 2025 to place culture at the heart of our communities and make as an even better borough.

Expanding community sports facilities across Ealing borough

The council has taken action to expand its community sports facilities and pitches across the borough, ensuring the delivery of five new cricket pitches, four tennis courts, and eight football pitches. To date, tennis court improvements at Elthorne (3 courts), Wolf Fields (2 courts), Churchfields (2 courts), Ravenor (2 courts), Spikesbridge (2 courts) and Southfields (3 courts) have been completed, with permanent court markings to be painted soon. London Cricket Trust funded non turf pitches (NTPs) at Perivale, Rectory and Ealing Central Sports Ground have been installed and are ready for the 2024 season. Work continues on the Playzone (specially designed Multi Use Games Areas with improved playing surfaces) scheme - the number of new facilities across the borough will be determined by the amount of match funding secured. Each Playzone costs between £180k - £220k and 25% match funding is required across the portfolio of sites. The council understands the value of equitable access to community sports facilities for health and wellbeing.

Addressing equity at Everyone Active

The Active Ealing team is piloting a project with the Council's leisure contractor Everyone Active and an external provider to offer opportunities for young people with a disability and/or additional needs to swim and take part in other activities. Everyone Active has partnered with Ealing's Youth service to offer

the use of the Northolt Leisure Centre gym and table tennis facilities to enable physical activity and social connection. They have also started new junior after-school activity sessions at Dormers Wells Leisure Centre engaging 11- to 15-year-olds in badminton, basketball and football. With the NHS, they have successfully expanded the Healthy Teens programme offering activities at the Everyone Active Acton Centre for local young people. The sessions include a 45-minute supervised gym session lead by a Fitness Motivator, followed by nutritional advice.

Case Study 1: Dormers Wells Leisure Centre Women Only Gym

Local women now have ongoing access to high-quality, safe and convenient facilities to exercise and keep physically active.

The council has funded a new Dormers Wells Leisure Centre women only gym which has now been open for 18 months. This exciting new 195 square metre gym with 35 pieces of equipment was made possible through the successful partnership with Everyone Active the council's leisure provider and the current facility operator. As soon as Ealing Council knew about the closure of Southall Sports Centre, the leisure team worked closely with Everyone Active to ensure alternative local facilities were available to female gym-users who relied on the facilities previously provided.

The thoughts and suggestions from these women proved essential in the final design of the new gym; for example, a specific request was made for two pieces of equipment that were not previously available, since opening both have been popular with users.

Users have continued to shape the facility, feedback has resulted in additional mirrors, extra benches and additional weight plates being available and most importantly a female Personal Trainer in the gym to give advice and support.

Since opening, Everyone Active has run a range of initiatives to grow participation and raise awareness of the facility including working in partnership with the Active Living & Fun Food in Ealing (A.L.F.I.E) to offer girls aged 14-16 years old free access to the gym and nutrition advice.

During August 2022, the first month of operation, the gym had 2,089 visits, in August 2023 there were 3,382 visits, an increase of 62%; during August to December 2022 a total of 11,602 visits were made, in the same period in 2023, 16,476 were made, an increase of 42%.

Case Study 2: Everyone Active Exercise Referral Scheme

Everyone Active's Exercise Referral Scheme is available at the Everyone Active Acton Centre, Dormers Wells Leisure Centre and Northolt Leisure Centre.

Everyone Active work closely with the Council's leisure and public health teams as well as local General Practices, Social Prescribers and Physiotherapists that all refer patients onto the scheme. The Exercise Referral Manager attends meetings, delivers presentations to local partners and specific groups including Cardiac Rehabilitation and Lymphoedema clinic attendees. The Exercise Referral Scheme is a 12-week programme for people with long-term health conditions. There are many conditions that the patients can be referred for including Cardiovascular Disease, Diabetes and Muscular or Skeletal conditions.

Since restarting the scheme post pandemic, a total of 666 people have joined the scheme, of these 516 people have completed the initial 12 week course and are still leisure centre members, over 77% of people who attended the 12 week programme continue to be active.

The scheme has had an impact on so many people's lives, on both their physical and mental wellbeing. Below are the thoughts of someone referred with a diagnosis of the heart condition Atrial Fibrillation (AF). *"Several months after joining the scheme, my heart is no longer in AF. Now my heart is beating correctly feeling much stronger and my stamina has improved considerably. My doctor put this down to my regular exercise, which would not be possible without the help and care that I received from the scheme. This has been a huge factor in getting my health back on the right track."*

The scheme continues to be a success, with new activities regularly introduced, including specific group exercise classes, a water-based exercise class and a very popular tea and coffee morning that has become a fixed date in people's social diaries.

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Climate Response: This Year's Achievements 2023/24

Ealing Community Climate grants

This year the council has provided carbon offset funding for community energy efficiency initiatives. Community organizations based in Ealing applied for up to £10,000 each. 6 community organizations qualified for the grant, totaling c.£59,500. 2 projects have been completed by end 2023, one of which consisted of installing replacement boilers that are more energy efficient and the other project involved installing solar panels on the roof of a church hall.

Healthy Homes Ealing (HHE)

The HHE service is a support tool available to Ealing residents for help with energy. Free consultations (either at home or via telephone) are offered to help improve energy efficiency and home safety. Expert 'Green Doctors' offer advice on staying warm in winter and cool in summer, providing information and referrals to available grant programmes for works, or directly assisting in help with tariff switching, managing arrears, or making referrals to other agencies. The programme has operated for 6 years (following on from Cold Weather Support in Ealing from 2011-2017). In the last year of delivery (July 2022 – present), the scheme has delivered consultations to 244 households in Ealing. Since March 2022, over 600 residents have used the Healthy Homes Ealing telephone advice line. The service encourages key energy saving behavioural changes, such as reducing the number of uses of domestic appliances, education around the impact of devices on standby, and changing energy habits around the home.

Breaking Ground

Grant funding has been awarded to Ealing Council from Hubbub and the Mayor of London to work with communities significantly affected by inequalities in Northolt to address climate justice. The project, called Breaking Ground, is community-driven and aims to empower residents to develop creative and tangible solutions to issues that are most affecting them, whilst improving health, wellbeing, and the local environment. Delivered in partnership with Building Bridges, the project has been designed to provide kick-start funding to support initial engagement and events and support the step-by-step process of achieving environmental and social change at a local level. Between March-June 2023 a series of engagement events were delivered with residents to identify the key issues that the community wants to address and potential solutions to these to help shape the final project output. Events included a community pop-up event at Viking Community Centre, a focus group session, a workshop held at Viking Primary School, a Resident-led walking tour, a voting and leafletting day and a Survey. The three key themes that have emerged from these engagement activities, relate to: Food growing, Artwork, youth provision and reducing litter. A resident-led Steering Group has been established and we are currently up-skilling those residents to deliver projects under the themes mentioned above. Activities have already been delivered to engage and motivate the community such as a planting and a spring-cleaning day, held summer 2023.



ActforEaling

ActForEaling (AFE), formed in 2020 is a central hub for anyone interested in environmental action in Ealing. AfE continues to promote climate action and sustainable behaviours across the borough. AfE have expanded their partners to 36. The council's climate action & sustainability team continues its ongoing support for AfE with a dedicated part-time officer to support community activity and assist with online communications.

Case Study 1: Ealing's Food Partnership

Ealing Food Partnership has been established to ensure access and choice of healthy, seasonal, local, and sustainable food across the borough, as well as being focused on reducing greenhouse gas (GHG) emissions. The collaborative work of the 20 community organisations has already been recognised in the latest nationwide 'Every Mouthful Counts' report by Sustain, making Ealing one of a small group of local authorities leading the way in supporting and creating more sustainable ways for growing, selling, and delivering food. To identify gaps in the food system and opportunities for collaboration, the Ealing Food Partnership has undertaken food mapping. This mapping exercise has helped to locate local free food sources, community gardens, food banks, and other food related initiatives. The partnership can facilitate further collaboration and resource sharing among different organisations by identifying more of these resources. The Ealing Food Partnership is building a website in collaboration with UWL to enhance communication and facilitate surplus food distribution. This website will serve as a central information hub, providing details about surplus food availability, collection points, and distribution channels. It will make it easier for food organisations to access surplus food and distribute it to those in need. The Ealing Food Partnership also aims to increase Ealing schools' access to practical food education including site visits, outreach within schools, facilitating the Cultivate Ealing schools' competition, Grow Some Share Some,

Growing Kids and Cooking Kids programmes, and to pioneer 10 new community growing spaces in our housing estates and new developments. Three new spaces have already been delivered Western Road, Deans Gardens and Popesfield Allotments.

Case Study 2: Green Schools Network

In September 2022, the Ealing Learning Partnership Team launched the Green School Network in collaboration with the Climate Action Team, working to put climate action at the heart of everyday school life. The Green School Network is a free programme run throughout the academic year, providing practical tips and support for schools to activate their journey towards engaging more young people in environmental education and to assist schools with creating their school “climate action plan” by 2025, a new requirement set by the Department for Education. The council has been working in partnership with the Eco-Schools team at Keep Britain Tidy to guide schools along this journey, using their Eco-Schools Programme as a framework in which schools can follow to support them in identifying actions to reduce their school’s environmental impact. Upon completion of the programme, schools can apply for an Eco-Schools Green Flag Award which is an accreditation to acknowledge, reward and celebrate their efforts in taking action on climate change. Through this partnership, we have been able to offer a range of support to schools including access to Eco-Schools resources, peer to peer learning, access to experts on sustainability and school case studies. The network is aimed at anyone that works at an Ealing school, including sustainability leads, PSHE leads, Geography leads, caretakers, members of SLT and school governors. This summer we successfully completed our first year in delivering the Green School Network sessions. Throughout the year, we held termly workshops with approximately 15 schools in attendance for each. The network sessions focused on guiding schools through each step of the Eco-Schools programme and featured a school case study speaker. A range of internal and external speakers were also invited to attend, including Ealing Council’s Waste and Recycling and Active Travel teams, Trees for Cities, ActForEaling and Keep Britain Tidy’s Eco-Schools team. There are 8 Ealing schools that have completed the Eco-Schools programme this year and achieved accreditation. The aim for the 2023/2024 academic year is to continue to grow the network to get more schools to attend the network sessions and develop climate action plans. We will continue to work closely with the Eco-Schools team to support schools through this process, as well as share tools and resources developed by other partners such as DfE, The Green Schools Project and Let’s Go Zero. We will also be putting together a contacts list to signpost schools to relevant Council services related to climate action, including waste, recycling, energy management and travel, where they can go to for further support.

Cost of Living: This Year's Achievements 2023/24

Distributing the Household Support Fund to those who need it most.

Ealing was awarded £5.3M from Department of Work and Pensions and has directly distributed it to the following groups throughout 2023/24:

- £205 for families with children eligible for benefits related free school meals (per child)
- £205 for families who have a child under 5 who receive housing benefit / council tax reduction (per household)
- £300 for Care leavers.
- £350 for households on Housing Benefit / Council Tax Support but not on DWP benefits (per household)
- £200 for households in non-residential care where council contributes to care costs (per household)

In total approximately 17,000 households across the borough have benefitted from this support. An additional £550,000 was allocated to top up our existing Local Welfare Assistance fund that provides financial support to those in crisis.

Making Local Welfare Assistance accessible to more residents.

As a result of additional funding received from the DWP, the council has been able to temporarily expand the scheme so that more people are eligible to access financial support. Previously only residents who were out of work were able to apply for support from the Local Welfare Assistance fund. In April 2023 we expanded the criteria so that residents who were employed but on low incomes could also apply.

Reaching out to vulnerable residents.

With support from NHS inequalities funding the council is continuing proactive calling of residents to offer support during the cost-of-living crisis. These calls have ensured that vulnerable residents are aware of the different types of support available to them promoting befriending schemes for lone residents, energy advice, warm spaces and indoor activities, identifying who is entitled to financial support and making necessary referrals.



Getting more people online

Our mission to reduce digital inequalities in Ealing is focussed on three main areas:

- Access to devices: The council has recently donated over 1,000 retired staff devices to digital inclusion charity, Good Things Foundation, who work alongside environmental organisation, Reconome, to recycle and redistribute the devices to those who need them. By end February 2024 the council will have also distributed all 240 laptop devices to unemployed and digitally excluded residents to support them back into work.

- Access to data: Also working alongside Good Things Foundation, the council is now registered as part of the national data hub programme and has given out over 170 free mobile data sims to residents since the scheme began in May 2023. All care leavers have also been provided access to free data if they need it.
- Access to digital skills: Continuous promotion of the council's digital skills training courses through everyday interactions with customers and also specifically engaging the borough's Community Champions to become Digital Champions has kept digital skills high on the agenda. As part of the borough's digital taskforce, The Cost of Living Team has lead the development of a digital inclusion signposting tool alongside voluntary sector organisations to enable more residents to easily find the support they need.

Case Study 1: Re-Klaim

Ealing Council funded Ealing Hounslow VCS (EHVCS) to recycle and redistribute 1,100 retired Ealing Council Surface devices to digitally excluded residents.

All 1,100 devices have now been distributed. Every resident who received a device was also provided with digital skills training and access to free data if required as well as being signposted to social tariffs for affordable access to broadband. The following feedback from those who benefitted from the scheme highlights the wide variety of outcomes achieved:

“A man living in a shared community accommodation received a laptop from us. His phone doesn't work, and he was last able to contact his daughter in Australia a few years ago. He learned how to use social media and contact his daughter through this project. He hopes to learn more about the internet, find a job and learn more about the services and opportunities available to him electronically.”

“An orphaned young person studying at university, who is also the primary caregiver for his two younger siblings, received a laptop to work on his university work whilst at home. With this device, he hopes that assignments and research will be more convenient and that he can spend more time with his sibling, plus they can also use it for homework.”

“An elderly woman feeling relatively isolated collected a device from us. She is incredibly enthusiastic about learning and pursuing her passions, particularly singing and meditation, to improve her mental health. She regularly attends 1-1 sessions with our Re-Klaim volunteer and hopes to learn how to use the internet, social media, and more technical parts of the device so she can learn how to record and upload her music.”

Case Study 2: Another round of Warm and Welcome spaces

The end of October 2023 saw the re-launch of Warm and Welcome Spaces across the borough. With funding from the NHS inequalities fund, the council allocated 33, £1,500 grants to community and voluntary sector organizations. The money supported them to enhance their existing spaces and help them stay open over the winter. Warm spaces have provided for example physical activities, memory-cafes for people affected by dementia, and a range of activities to enable social connection. Residents have expressed what the provision of warm spaces has meant to them, stating “I come here whenever I have free time and have found friendly and welcoming volunteers” – Asylum Seeker; “I like spending time at warm space as it helps my mental wellbeing” – 68 year old Borough resident; “The women’s sessions really helped me keep busy and regain confidence” – Borough resident; “Every week I am learning new things and meeting new people” – Single mum resident.

Community Hubs: This Year's Achievements 2023/24



The council's four Community Hubs continue to provide residents with face-to-face access to council services. Any resident can visit a hub to gain information, ask advice, get support to complete online transactions or find out what support is available from our voluntary sector partners. The hubs operate out of four static locations across the borough in Acton, Southall, Northolt and Ealing Central Libraries. In Q3 the community hubs reported a 99% customer satisfaction rating.

2023/24 has seen some key developments in Community Hubs including:

- Developing a mobile model enabling community hub officers to 'pop up' in different locations. In

January an eight-week pilot saw the hub popping up in Hanwell Foodbank every Wednesday morning. Initial feedback is positive and indicates that this approach will help us to engage with residents who are likely to need support but may not have reached out to us. Following the pilot, the team will be looking for further opportunities to pop up across the borough.

- Providing digital skills support to those who need it and introducing a face-to-face appointment process specifically to support residents to complete online forms.
- Ongoing training of hub staff to enhance the service they can provide including Cost of Living briefings specifically focused on the support available over winter.
- Community hub staff are now able to issue food bank vouchers directly to customers without having to make a referral.
- In May, all four Community Hubs became registered data banks in partnership with Good Things Foundation. Since then, they have distributed over 170 free mobile data sims to those struggling to pay their bills.
- Changes to the physical environments to address concerns raised by both staff and customers regarding confidentiality.

- Looking forward the Community hubs located in Northolt and Southall will benefit from UKSPF funding to significantly improve the physical environment and make them more fit for purpose for both staff and customers

Appendix – data sources

Appendix – data sources

Population

National Census, 2021

Ethnicity: National Census, 2021

Top community languages: National Census, 2021

Deprivation

ONS, 2019

Life expectancy

ONS, PHE Local Health Profile, 2022

Free School Meals

School Census 2023, Ealing Council

Alcohol related hospital admissions

Public Health Outcomes Framework, accessed Feb 2024

Obesity/physical activity/smoking /TB

Public Health Outcomes Framework, accessed Feb 2024

Diabetes prevalence

Whole Systems Integrated Care Dashboard, 2022

Housing

National Census, 2021

Private rented property licensing schemes – consultation document, Ealing Council 2021

House price to residence-based earnings ratio, ONS 2023

Department for Levelling Up, Housing and Communities - live stats on homelessness, accessed Feb 2024

Income & Unemployment

NOMIS, accessed Feb 2024

CACI, Equalised PayCheck Directory 2023

Education

Public Health Outcomes Framework, accessed Feb 2024

Ethnic Group Attainment Report, 2023

Crime

Public Health Outcomes Framework, accessed Feb 2024

Air Quality

Ealing Council: Air Quality JSNA 2019

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