



## Health and Social Care Scrutiny Committee

**Date:** WEDNESDAY, 30 JUNE 2021  
**Time:** 11.00 am  
**Venue:** VIRTUAL PUBLIC MEETING (ACCESSIBLE REMOTELY)

**Members:** Chris Boden  
Michael Hudson  
Vivienne Littlechild  
Andrew Mayer  
Wendy Mead  
Deputy Barbara Newman  
Steve Stevenson, Healthwatch City of London representative

**Enquiries:** Ben Dunleavy  
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### Accessing the virtual public meeting

**Members of the public can observe this virtual public meeting at the below link:**  
<https://youtu.be/VakODUPGWjQ>

This meeting will be a virtual meeting and therefore will not take place in a physical location. Any views reached by the Committee today will have to be considered by the Director of Community and Children's Services after the meeting in accordance with the Court of Common Council's COVID Approval Procedure who will make a formal decision having considered all relevant matters. This process reflects the current position in respect of the holding of formal Local Authority meetings and the Court of Common Council's decision of 15th April 2021 to continue with virtual meetings and take formal decisions through a delegation to the Town Clerk and other officers nominated by him after the informal meeting has taken place and the will of the Committee is known in open session. Details of all decisions taken under the COVID Approval Procedure will be available online via the City Corporation's webpages.

A recording of the public meeting will be available via the above link following the end of the public meeting for up to one municipal year. Please note: Online meeting recordings do not constitute the formal minutes of the meeting; minutes are written and are available on the City of London Corporation's website. Recordings may be edited, at the discretion of the proper officer, to remove any inappropriate material.

**John Barradell**  
**Town Clerk and Chief Executive**

# **AGENDA**

## **Part 1 - Public Reports**

1. **APOLOGIES**
2. **MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA**
3. **ORDER OF THE COURT OF COMMON COUNCIL**  
To receive the Order of the Court of Common Council dated 15 April 2021, appointing the Committee and setting out its terms of reference.  
  
**For Information**  
(Pages 5 - 6)
4. **ELECTION OF CHAIRMAN**  
To appoint a Chairman for the ensuing year in accordance with Standing Order No. 29.  
  
**For Decision**
5. **ELECTION OF DEPUTY CHAIRMAN**  
To appoint a Deputy Chairman for the ensuing year in accordance with Standing Order No. 30.  
  
**For Decision**
6. **CO-OPTION OF A HEALTHWATCH REPRESENTATIVE**  
  
**For Decision**
7. **APPOINTMENT OF INNER NORTH EAST LONDON JOINT HEALTH OVERVIEW AND SCRUTINY COMMITTEE REPRESENTATIVE(S)**  
  
**For Decision**
8. **MINUTES**  
To agree the public minutes and non-public summary of the meeting held virtually on 10 February 2021.  
  
**For Decision**  
(Pages 7 - 12)

9. **SEXUAL HEALTH & REPRODUCTIVE HEALTH SERVICES AND COVID**  
Joint report of the Director of Community and Children's Services, the Director of Public Health and the Deputy Director of Public Health.

**For Information**  
(Pages 13 - 18)

10. **NEAMAN PRACTICE**  
Dr Chaun Chor to be heard.

**For Information**

11. **CITY CARERS UPDATE REPORT**  
Report of the Director of Community and Children's Services.

**For Information**  
(Pages 19 - 24)

12. **SUPPORT FOR CITY CARERS**  
Presentation from City Connections.

**For Information**

13. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

14. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

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RUSSELL, Mayor	<b>RESOLVED:</b> That the Court of Common Council holden in the Guildhall of the City of London on Thursday 15 <sup>th</sup> April 2021, doth hereby appoint the following Committee until the first meeting of the Court in April, 2022.
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## HEALTH & SOCIAL CARE SCRUTINY COMMITTEE

### 1. **Constitution**

A non-Ward Committee consisting of,

- Any 6 Members appointed by the Court of Common Council
- 1 Co-opted Healthwatch representative.

The above shall not be Members of the Community & Children's Services Committee or the Health & Wellbeing Board.

### 2. **Quorum**

The quorum consists of any three Members. [N.B. - the co-opted Member does not count towards the quorum]

### 3. **Membership 2021/22**

- 6 (2) Christopher Paul Boden, *for two years*
- 6 (2) Michael Hudson, *for three years*
- 6 (2) Vivienne Littlechild, M.B.E., J.P., *for three years*
- 6 (2) Wendy Mead, O.B.E.
- 2 (1) Andrew Paul Mayer
- 2 (1) Barbara Patricia Newman, C.B.E., Deputy

Together with the co-opted Member referred to in paragraph 1 above.

### 4. **Terms of Reference**

To be responsible for:-

- (a) fulfilling the City's health and social care scrutiny role in keeping with the aims expounded in the Health and Social Care Act 2001 and Part 14 of the Local Government and Public Health Act 2007 (Patient and Public Involvement in Care and Social Care);
- (b) agreeing and implementing an annual work programme; and
- (c) receiving and taking account of the views of relevant stakeholders and service providers by inviting representations to be made at appropriate meetings.

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## HEALTH AND SOCIAL CARE SCRUTINY COMMITTEE Wednesday, 10 February 2021

Minutes of the meeting of the Health and Social Care Scrutiny Committee held virtually on  
Wednesday, 10 February 2021 at 11.00 am

### Present

#### Members:

Michael Hudson (Chairman)  
Wendy Mead  
Andrew Mayer  
Barbara Newman  
Steve Stevenson

#### Officers:

Rofikul Islam	- Town Clerk's Department
Gemma Stokley	- Town Clerk's Department
Joseph Anstee	- Town Clerk's Department
Simon Cribbens	- Community & Children's Services
Ellie Ward	- Community & Children's Services
Ian Tweedie	- Community & Children's Services
Annie Roy	- Community & Children's Services
Jack Dunmore	- Strategic Estates Manager WEL CCG
Mark Golledge	- Neighbourhoods Programme City and Hackney
Greg Condon	- City and Hackney Clinical Commissioning Group

### 1. APOLOGIES

Apologies were received from Vivienne Littlechild and Chris Boden (Deputy Chairman).

### 2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA

The following declarations were made;

- Barbara Newman;
- Vivienne Littlechild;
- Steve Stevenson;

all declared they were resident in the City and patients of the Neaman Practice.

### 3. MINUTES

**RESOLVED** – That the public minutes of the meeting held on Tuesday, 3 November 2020 be agreed as a correct record.

#### Matters arising:

The Committee received an oral update from Assistant Director Partnerships & Commissioning advising that Hoxton Health had put in a bid to the City of London's Central Grant team to deliver footcare and chiropody in the community, including home visits. The decision on the bid was pending.

4. **WORKPLAN**

The Committee noted the work plan and agreed that the following items be discussed in future meetings:

- Carers services and support
- St Bartholomew's Hospital (Barts) Minor Injuries Unit.

5. **CHILDREN AND YOUNG PEOPLE'S MENTAL HEALTH (PRESENTATION)**

The Committee received an oral update from the Programme Manager, NHS City and Hackney Clinical Commissioning Group (CCG) on the Children and Adolescent Mental Health Services (CAMHS).

The CCG commissions a comprehensive CAMHS service to assess and treat young people with emotional, behavioural, or mental health difficulties. Tier 1 universal services are delivered through partners such as schools, GPs, children's centre, social workers; Tier 2 are early help and targeted services; Tier 3 services provide specialist treatments and Tier 4 provides inpatient treatment

In the current year Tier 2 First Steps had a reduction in referrals over the first lockdown period, but referrals have been significantly increasing since then and now back to normal levels for Q3. There are concerns, however, that the referral trajectory for Q4 is abnormally high.

Tier 3 Specialist CAMHS have seen a significant surge in referrals across City and Hackney for Q3 compared to previous years (almost double). Q4 is also projected to be abnormally high. The service is under significant strain but resources were being redirected to meet this surge in demand.

Referrals for self-harm and social problems have risen by 30%; depression, low mood/ anxiety by 40%; and eating disorder referrals have doubled. Referrals from the City of London are numerically very small given the population size

The Crisis Intervention service now operates from 9am to 9pm service, and this change has been made permanent. There is a need to have such service available around the clock due to the complex need.

The Committee was informed that of significant pressures on Tier 4 beds and paediatric units (NEL activity currently remains within target). Although there have not been any significant increases in admissions to tier 4, there has been a reduction in available beds due to COVID-19 restrictions, and a slowing down of flow, resulting in longer lengths of stay and fewer beds available for the usual number of admissions.

A Member asked how the young people are referred to the system. In response they were advised that CAMHS operates a "no wrong door" approach, and services are widely promoted through schools, GPs, children's centres, social work teams and other partners. A young person can also self refer. The referral approach is under review with a plan to introduce a "single point of access" approach.

RESOLVED – that, the oral update be received.



6. **HOSPITAL DISCHARGE REPORT**

The Committee received a report of the Director of Community and Children's Services on the Hospital Discharge. The report outlines an approach to the Hospital Discharge Process during the COVID-19. The model has been reviewed, and changes have been made following the Government guidelines.

The Committee was advised that before March 2020 City of London Adults Duty team were available during the core hours of 09:00 and 17:00 Monday to Friday to liaise with hospitals and ensure appropriate services were in place to facilitate safe discharge. The discharges themselves could take place outside of these hours.

A Member noted that it is vital to ensure that the social care package should also kick in as soon as a patient is discharged from the hospital. The Adults Service Manager noted that social workers are available to assist with the discharges.

RESOLVED – that, Members noted the report.

7. **WEL ESTATES UPDATE TO COL - TOWER HAMLETS GOODMAN'S FIELDS PROJECT UPDATE**

The Committee received a report of the Strategic Estates Manager WEL CCG on the Goodman's Fields Health Centre Project.

The report updated Members on GP services in Tower Hamlets. Approximately 16% of City of London residents are registered with GP practices in Tower Hamlets at two main practices (Spitalfields and Whitechapel Health Centre - which also has the satellite practice at Portsoken). The update provided an update for Members on the development of the new Goodman's Fields Health Centre, which will house the Whitechapel Health Centre, and the services that had been provided at the Portsoken Satellite Surgery.

The development of the new Goodman's Fields Health Centre will have green space, which will enhance the space and will provide hotdesking spaces for clinicians and other specialists. The development of the new Goodman's Fields Health Centre is designed in such a way that it can ensure staff can maximize its use and ensure that it provides a welcoming scene. The Committee was shown plans setting out a visual representation of the design.

A Member asked what extra services are expected to be provided at the Centre, will there be a service for patients who are not digitally proficient, and who will carry out the triage.

Officers responded that in terms of the extra services, there are no solid plans in place yet. However, it is anticipated that the site will be used for an array of services such as social prescribers, physio at a network level. There is no agreement with other providers yet, but discussions are happening. The digital aspect is one of the options, there will be a physical reception desk, and operators will also remain. Additionally, in terms of the triage, it is being carried out by a mixture of staff, be it specialists and across a broad range of clinicians.

A Member asked if it would be possible to add minor surgeries and dental services into the service. Officers responded that the initial lease covers health only, and dental care is not factored in. As a primary care provider, dentistry is not part of the package.

A Member asked who will be funding the green spaces at the Goodman's Fields Health Centre Project; officers confirmed that the funding for the Greenspace would come from Section 106 and funding and from Tower Hamlets Council.

RESOLVED – that, Members noted the report.

## **8. CITY OF LONDON HEALTH AND SOCIAL CARE SCRUTINY COMMITTEE - NEIGHBOURHOODS**

The Committee received a report on the Neighbourhoods Programme.

The Committee was informed that the neighbourhoods are part of an approach to integrated health and social care based on joining up healthcare services so that people are supported to live healthy lives and receive the right care and support when they need it.

The neighbourhood model is built around groups of GP practices with a total registered population of 30,000-50,000. Across City and Hackney, eight neighbourhoods have been established, and the City of London is part of the Shoreditch Park and City Neighbourhood. Work is also underway with Tower Hamlet's practices to link in with their integrated care models.

The Committee was further advised that it is intended that by working together, staff across different disciplines can communicate regularly, share knowledge and expertise and coordinate care planning and delivery. Working in this way also allows teams to localize the planning, coordination, and delivery of care for the whole local population. The aim is to support residents in a way that is joined up, community-based, proactive, and focused on the whole needs of a person and their families.

The Committee was further advised that the Neighbourhood principles we are working towards four areas;

1. Engagement with residents will start with what matters to them rather than what is wrong with them.
2. New services will be provided in the Neighbourhood, such as support from physios and health and wellbeing coaches who will deliver support in Shoreditch Park and the City Neighbourhood.
3. For residents who have longer-term care and support needs, they will be supported by a multi-agency team who work together (within each Neighbourhood) to coordinate their needs.
4. This support will be more proactive (rather than reactive at a point of crisis) and therefore prevent or delay rising needs.

The Chairman noted that the COVID-19 jabs are also being provided within the City of London as opposed to having to attend practices in Hackney. This is assisting in making the needs of the residents much more comfortable due to the work of the Neighbourhoods team.

RESOLVED – that, Members noted the report.

9. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

A Member asked that the carer's forum voices are taken into consideration and that their concerns are addressed, as in a previous meeting they did not receive the opportunity.

Officers responded that there was a detailed discussion around a presentation on this very matter at the last Community and Children's Services Committee meeting. Some of the issues raised by the members are addressed in the discussions there and can be shared with Members of this Committee. Officers agreed to send a link to the discussion to the Committee.

The Member asked if the carers were consulted on the presentation. Officers agreed to bring the relevant Services Manager to a future meeting of this Committee.

10. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**

**Election of Deputy Chairman**

The Chairman informed the Committee that the post would be vacant and if any Members had any interest in expressing their intentions, to do so before the next meeting.

**Departure of staff**

The Chairman thanked David Maher, Managing Director, City and Hackney CCG and Jane Milligan, Accountable Officer, NEL Sustainability and Transformation Partnership, for their services to the Committee.

11. **EXCLUSION OF THE PUBLIC**

**RESOLVED** – That, under Section 100A of the Local Government Act 1972, the public be excluded from the meeting for the following items on the grounds that they involve the likely disclosure of exempt information as defined in Part 1 of Schedule 12A of the Local Government Act.

12. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**

There were no questions.

13. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT AND WHICH THE COMMITTEE AGREE SHOULD BE CONSIDERED WHILST THE PUBLIC ARE EXCLUDED**

There was no other business.

**The meeting ended at 12.52 pm**

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Chairman

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<b>Committee:</b> Health and Social Care Scrutiny Committee	<b>Dated:</b> 30 June 2021
<b>Subject:</b> Sexual and Reproductive Health Services and COVID	<b>Public</b>
<b>Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?</b>	1, 2, 3, 4, 9
<b>Does this proposal require extra revenue and/or capital spending?</b>	N
<b>If so, how much?</b>	N.a.
<b>What is the source of Funding?</b>	N.a.
<b>Has this Funding Source been agreed with the Chamberlain's Department?</b>	N.a.
<b>Report of:</b> Andrew Carter, Director of Community and Children's Services Dr Sandra Husbands, Director of Public Health Chris Lovitt, Deputy Director of Public Health	<b>For Information</b>
<b>Report author:</b> Xenia Koumi, Department of Community and Children's Services	

## Summary

This report presents an update on sexual and reproductive health services in the City of London. Although both the delivery and uptake of services to support good sexual and reproductive health have been disrupted due to the COVID-19 pandemic, a flexible approach and partnership working between commissioners and service providers has meant that services have continued to be delivered, including to our most vulnerable residents.

In addition, there have been exciting innovations made in terms of local sexual health provision over the past year, which this report summarises.

This work supports, and is influenced by, local, regional and national strategic objectives relating to sexual health and tackling inequalities.

## Recommendations

Members are asked to:

- Note the impact of COVID on sexual health services.
- Note and comment on the contingencies that were put in place during COVID and the move to wider service choice through online provision whilst retaining walk up clinical services.
- Support the continued promotion of sexual and reproductive health services among City residents, workers, and students.

## Main Report

### Background

1. Under the Health and Social Care Act 2012, Local Authorities, including the City of London Corporation, have statutory responsibility – alongside NHS England and Clinical Commissioning Groups (CCGs) – to make available open-access sexual health services to their local populations. For Local Authorities, this requirement includes the commissioning of testing/ treatment for sexually transmitted infections (STIs), including HIV, the provision of most contraceptive services, sexual health advice, prevention and promotion.
2. In the City, a [wide range of services](#) – both universal and targeted – are made available to local populations to support good sexual and reproductive health and wellbeing. These include STI testing and treatment through Level 3 specialist sexual health services provided by Homerton University Hospital NHS Foundation Trust, the ability to order self-testing kits of STIs through the Sexual Health London (SHL) online platform, the fitting and removal of long-acting reversible contraception (LARC) in primary care, and the provision of outreach and support to Commercial Sex Workers through the Open Doors service.
3. In addition, the City Corporation supports the delivery of the [London HIV Prevention Campaign](#).
4. Local efforts operate within a regional and national context to improve outcomes around sexual and reproductive health and reduce associated inequalities. A national Sexual Health strategy is due to be published by the Government this year, the first national Women's Health Strategy is in development, and London has committed to ending the HIV epidemic by 2030 through its pledge to the [Fast-Track Cities Initiative](#).

### Current Position

5. Since March 2020 the COVID-19 pandemic has had a significant impact on both the delivery of, and access to, sexual and reproductive health services at a local, regional and national level. At various points during this time, staff in primary care and specialist sexual health services have been redeployed to the frontline COVID-19 response and vaccination effort.
6. The implementation of physical distancing measures has meant that services have often needed to be delivered in a different way, with a move to access via more remote and online methods. In addition, individuals have been hesitant to attend NHS and other services in general, and the full extent of the longer-term impacts of COVID-19, lockdowns, and easing restrictions on sexual activity and behaviour on individuals and groups is still not fully understood<sup>1</sup>.
7. There are significant inequalities within sexual and reproductive health and many local sexual health services often support some of the most vulnerable members of our community, including those with complex needs such as substance misuse and homelessness, and those who may be marginalised due to stigma. While service providers have gone to great efforts to ensure that these individuals have been able to access support over the past 16 months especially when digitally excluded, the

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<sup>1</sup> [The impact of the COVID-19 pandemic on prevention, testing, diagnosis and care for sexually transmitted infections, HIV and viral hepatitis in England: Provisional data: January to September 2020](#)

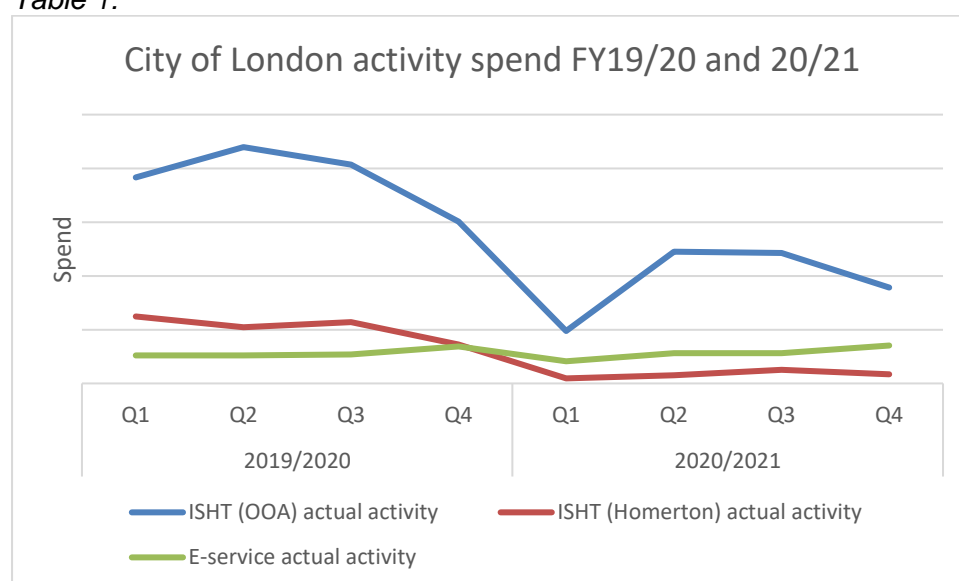
socioeconomic impacts of the pandemic have been significant and may have exacerbated existing vulnerabilities.

8. Commissioners within the City and Hackney Public Health team have worked flexibly with service providers and partners to ensure the continued delivery of sexual and reproductive health services to local populations despite the COVID related challenges. These changes have had some many positive outcomes, including for residents with additional needs, such as:
  - Expanding the offer of COVID-19 testing for homeless individuals by the local Find and Treat team to on-street sex workers and assisting them to access the COVID-19 vaccine.
  - Implementing “Walk and Talk” sessions for isolated service users affected by HIV.
  - Assisting service users with digital connectivity, to help them to access online service provision.
  - The use of the sexual health clinic at 80 Leadenhall Street in early 2021 for lateral flow testing
  - Enabling the self-testing STI kits for those with mild symptoms, as well as with no symptoms.
9. Some of the changes and innovations implemented in services in response to the pandemic have demonstrated to be beneficial to service users, as well as supporting longer-term aims around service delivery. Benefits, learnings, and opportunities identified are being considered as part of recovery planning and reinstating of services in the short, medium and longer term.
10. Despite challenging circumstances, major innovations have been introduced in recent times, which aim to further improve sexual and reproductive health outcomes for our local populations. These include:
  - The roll-out of NHS PrEP (Pre-Exposure Prophylaxis) in October 2020, for individuals in groups deemed to be at higher risk of acquiring HIV. This is a major breakthrough in HIV prevention and offer significant potential, along with rapid access to HIV treatment to achieve zero viral load to end new HIV transmission.
  - Access to contraception, including emergency hormonal contraception (EHC), via the SHL online platform. This provided an important contingency arrangement when access to physical services was disrupted due to the pandemic.
  - The expansion of the Open Doors service to provide support and outreach to off-street Commercial Sex Workers in both the City and Hackney.
  - The recommissioning of HIV prevention, sexual health promotion and HIV support services for adults and families, children and young people.
  - The planned launch of a pilot around STI testing in primary care, which aims to embed practices around more routine testing for HIV, thereby identifying and diagnosing positive cases earlier on.
11. Many aspects of the changes to service provision throughout the pandemic have improved choice and widened access to services. However, there remains the need to proactively communicate the new pathways into sexual health services to ensure early diagnosis, treatment and access to contraception. Maintaining an open access clinical service and reinstating walk-in sessions remains a priority for the City of London in order to meet the needs of both our local residents and also the daytime worker population.
12. In addition to recovery planning and assessing the impacts of COVID-19 on the sexual and reproductive health of local populations, a sexual health needs assessment for City and Hackney will be undertaken in 2021. This work will be closely linked with local work

on tackling health inequalities and the newly-established Population Health Hub. The needs assessment will assist in the delivery of sexual and reproductive health services locally, as well as in informing future commissioning, service design and re-commissioning.

13. The changing nature of attendances at sexual health services is shown in Table 1 below. Attendance at sexual health clinics across London by City residents (the blue line) decreased during the national lockdowns. City residents' use of sexual health services provided by the Homerton also decreased, but not so markedly, as these services are provided more locally. A similar pattern of service change occurred across other London areas.

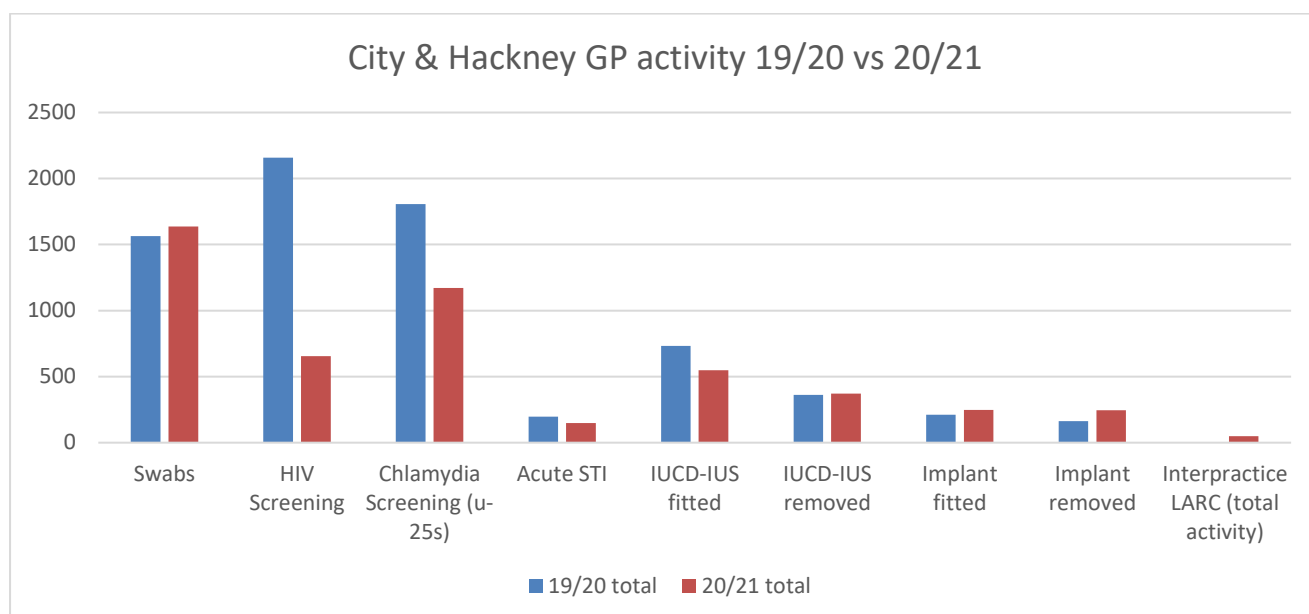
Table 1:



14. The changes in the provision of sexual health services in primary care is shown in Table 2 below. Whilst there was a large reduction in both HIV and chlamydia testing - both of which can be undertaken by signposting patients to the E-service - the provision of contraception, i.e intra-uterine contraceptive device (IUCD) and implants, was prioritised as face-to-face consultations are required for fitting and removal.



Table 2:



15. The following is the latest data against key sexual and reproductive health indicators, as shared by Public Health England<sup>2</sup>.

It is important to note that due to the small number of residents in the City of London, indicators displayed as rates per 1,000 or 100,000 can be a result of small number variation. In addition, City workers may provide their work, rather than their home, address when accessing local sexual health services, which also reflects within the data.

- While HIV testing coverage in the City in 2019 was better than the England average, the HIV diagnosed prevalence rate is statistically significantly higher than the London average (11.76 per 1,000 aged 15 to 49, and 5.6 respectively), however the rate in the City has been steadily decreasing over the past several years.
- The rates of conceptions in under-18s locally has been on a downward trend from 2010. In 2018 the conception rate for under-18s for the City and Hackney combined was 16.3 per 1,000 females aged 15 to 17 years, while the average rate in England was 16.7.
- In 2019 the rate (per 1,000) of total prescribed LARC (excluding injections) was 23.4 in the City of London, which is lower than the England average, but statistically similar to the London average. Improving access to long-acting reversible contraception (LARC) is a local priority and has been assisted through enhanced delivery of LARC via primary care since 2019.
- Diagnosis rates for new STIs (excluding chlamydia in 15 to 24 year-olds) in the City were significantly higher than the England average in 2019 (3,711 per 100,000 compared with 900 per 100,000).
- The rate per 100,000 of gonorrhoea diagnoses in 2019 was 844, compared with a London average of 360. Gonorrhoea is a marker of high levels of risky sexual activity.
- Compared with the England average, the proportion of abortions under ten weeks in the City in 2019 was similar to the England average (95.7% compared with 82.5%).

<sup>2</sup> <https://fingertips.phe.org.uk/indicator-list/view/nAIS2FSolU>

## **Corporate & Strategic Implications**

16. While this report is not a proposal, the activities it services to update on have a clear alignment with a number of the objectives outlined within the Corporate Plan, including:
- People are safe and feel safe
  - People enjoy good health and wellbeing
  - People have equal opportunities to enrich their lives and reach their full potential
  - Communities are cohesive and have the facilities they need
  - We are digitally and physically well-connected and responsive

## **Conclusion**

17. The City Corporation and the work of the joint public health team continue to work towards improving the sexual and reproductive health of both our local populations and provide open access services to the daytime worker population. Throughout the pandemic provider, clinicians, commissioners and the public health team have continued to work in close partnership to maintain access to sexual health services and seek to reduce associated health inequalities, including through the provision of new and targeted services. Even though the COVID-19 pandemic has had significant negative impacts on service delivery, innovations, opportunities and learnings have been identified as a result, which will bring benefits in recovery planning and beyond.

## **Appendices**

- None

### **Xenia Koumi**

Senior Public Health Specialist, DCCS

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<b>Committee(s):</b> Health and Social Care Scrutiny Committee – For Information	<b>Dated:</b> 30/06/2021
<b>Subject:</b> City carers update report	<b>Public</b>
<b>Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?</b>	1, 2, 3, 4, 9
<b>Does this proposal require extra revenue and/or capital spending?</b>	<b>N</b>
<b>If so, how much?</b>	<b>N/A</b>
<b>What is the source of Funding?</b>	<b>N/A</b>
<b>Has this Funding Source been agreed with the Chamberlain's Department?</b>	<b>N/A</b>
<b>Report of:</b> Andrew Carter, Director, Department of Community and Children's Services	<b>For Information</b>
<b>Report author:</b> Zoe Dhami, Strategy Officer, Department of Community and Children's Services	

## Summary

This report updates Members on the support provided to informal carers in the City of London.

A Carers Strategy 2019–2022 was approved by Members and published in 2019, and an action plan was developed. This provides the framework for the development and delivery of services to support carers. As part of this, the City of London Corporation commissions a City Connections Service which includes specific support activities and initiatives to support carers, including young carers.

The COVID-19 pandemic has changed the context for delivery of services. Whilst the City of London Corporation and its commissioned service to carers was flexible during the restrictions across 2020-21, feedback from carers and the Member COVID-19 Working Party has led to developments in the support offered.

## Recommendation(s)

Members are asked to:

- Note the report.

## **Main Report**

### **Background**

1. The City of London Corporation (the Corporation) recognises and values the contributions that informal carers make within families, communities, workplaces and society. Informal carers are those defined as anyone who spends time looking after or helping a friend, family member or neighbour who, because of their health and care needs, would find it difficult to cope without this help. People can be carers regardless of age or whether they themselves identify as a carer.
2. In 2019, a new Carers Strategy 2019–22 was agreed by Members and published. It provides the framework for the design and development of services, support and activities for those caring for someone within the Square Mile, and for carers working for the Corporation. An accompanying action plan was subsequently developed, and a Carers Strategy Implementation Group was set up.
3. The Care Act 2014 introduced important new rights for carers, giving them similar entitlements to the people for whom they care. Carers now have legal rights to an assessment of their needs by Adult Social Care (ASC), and support where eligible. In 2019/20 the Corporation provided support to 45 carers. These carers will have a support plan with activities and assistance designed to meet agreed outcomes.
4. The Corporation offers a full range of services as part of our universal offer; commissioning specific support activities and initiatives to support carers through the City Connections Service. This service provides a range of support to anyone who cares for someone in the City of London – they may live elsewhere but care for a City of London resident, and carers do not need to be registered or assessed by the Corporation to access this support. The service also provides support to young carers.
5. The new City Connections service (which started in April 2019) took in the existing Carers Forum, which was previously a monthly meeting but had low attendance. The commission for the new service aimed to provide a wider range of activities and initiatives to support carers in relation to a number of outcomes.
6. Given that the City of London has a small population, a wider more encompassing service tends to offer better value for money and economies of scale which in turn leads to a better range of services than multiple small or restricted groups could. The City Connections Service is commissioned to link with and signpost to a range of other services in the local landscape to help meet outcomes.

### *Delivery through the pandemic*

7. The pandemic changed the context in which strategies, action plans and services were delivered.
8. City of London ASC has continued to provide services to carers and those cared for as usual.

9. City Connections has also continued to accept referrals for its services and has developed and adapted some of its services to the changing situation in several ways. This is covered in the presentation from City Connections.
10. Although a Carers Strategy Implementation Group was established and met twice, further meetings were delayed due to the pandemic.

### **Current Position**

11. In September 2020, the Corporation received a report on carer experiences pre and during the pandemic, a report was presented to Community and Children's Services outlining the services provided to carers.
12. The Member COVID-19 Working Party considered the departmental response to the pandemic and also considered the services provided to carers during the pandemic. It recommended that an increased effort be made to discover carers in the City, that a carers' lead member be appointed, and that the Corporation engage more fully in co-production of services for carers.
13. There has been ongoing work in relation to support provided to carers and this includes:
  - Appointment of a lead member for carers – Sue Pearson.
  - A workshop held in February 2021, involving carers in discussions on key priorities for work in the Strategy Action Plan. One of the key overarching areas for action was identified as communication and information sharing. This workshop effectively relaunched the Carers Strategy Implementation Group which now has carers as integral members.
  - The Director of Community and Children's Services met with carers to discuss ideas for improved support.
  - The Department is currently engaging with carers to identify how we could enhance the existing support offer to carers and pilot enhanced support.
  - Part of the City Connections Contract is to expand the reach of support services to carers, and this is ongoing. City Connections have specifically been making a wide range of links in the east of the City to try and reach carers there and have produced leaflets in community languages.
  - Work is underway with the Contact Centre to highlight carers on the system so that information and support can be targeted appropriately and applications for red badges can be streamlined.
  - As part of their offer, secured counselling support is available to carers for free through the City Wellbeing Centre.
14. The Head of Adult Social Care Services attended a Carers Coffee Call at the start of 2021 to talk through questions that carers had in relation to the carer assessment. The discussions resulted in the following:
  - An action to produce Guidance for Adult Carers in the City. Whilst there is currently a guidance leaflet it does not go into depth on Carers Assessments and what to expect.

- A commitment to review inconsistencies in the approach of Adult Social Care services. The service is finalising a new Quality Assurance Framework, this includes reviewing carers assessments. The review is due in September 2021, with a view to then producing a guide for social workers.

## **Corporate & Strategic Implications**

### 15. Strategic implications

The Department contributes to the following Corporate Plan objectives:

- Number 1: People are safe and feel safe
- Number 2: People enjoy good health and wellbeing
- Number 3: People have equal opportunities to enrich their lives and reach their full potential
- Number 9: We are digitally and physically well connected and responsive.

### 16. Financial implications: None

### 17. Resource implications: None

### 18. Legal implications: None

### 19. Risk implications: None

### 20. Equalities implications

- This report is presented for information and, as such, does not have a specific EQIA attached to it. An EQIA was completed in terms of our initial response to COVID-19 and, where services are introduced, changed or decommissioned, a specific EQIA would be carried out. Further, a specific EQIA was completed in preparation for the Carers Strategy 2019-22.

### 21. Climate implications: None

### 22. Security implications: None

## **Conclusion**

23. This report updates Members on the support available to informal carers in the City of London. These services sit within the priorities of the Carers Strategy 2019–2022 and associated workstream plans.
24. The pandemic has had an impact on delivery of the Carer Strategy action plan, and services have had to adapt to the changing context. Therefore, the action plan is in the process of being refreshed to incorporate the emerging needs, and a commitment made to review the action plan annually. Carers are now involved in workstream plans and the Carer Strategy Implementation Group meetings.

25. Further action has been taken to discuss existing services with carers and consult on a pilot for an enhanced service to begin shortly.

## **Appendices**

- [Community and Children's Grand Committee Carers Update Paper, 29/01/2021](#)
- [Appendix 1 Carer concerns and responses](#)
- [Appendix 2 Carers LA comparison](#)
- [Appendix 3 City of London Unpaid Carers](#)

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