



Health and Social Care Scrutiny Committee

Date: WEDNESDAY, 9 OCTOBER 2024
Time: 11.00 am
Venue: COMMITTEE ROOM 1 - 2ND FLOOR WEST WING, GUILDHALL

Members: Deputy Christopher Boden (Chairman)
David Sales (Deputy Chairman)
Michael Hudson
Andrew Mayer
Deborah Oliver
Deputy Alpa Raja
Steve Stevenson

Enquiries: Jayne Moore
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<https://youtube.com/live/LxVB2KPy1eY?feature=share>

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Ian Thomas CBE, Town Clerk & 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. **MINUTES**
To agree the public minutes of the meeting of 15 May 2024 and note the updated actions.

For Decision
(Pages 5 - 12)
4. **APPOINTMENT OF HEALTHWATCH CO-OPTEE**
To appoint a representative of Healthwatch City of London

For Decision
5. **FORWARD PLAN**
To note the Forward Plan.

For Information
(Pages 13 - 14)
6. **SEND SEF**
To receive the report of the Head of Education and Early Years at the City of London Corporation.

For Information
(Pages 15 - 66)
7. **IMMUNISATIONS**
To note the report of the Consultant in Public Health at City & Hackney Public Health

For Information
(Pages 67 - 76)
8. **HEALTHWATCH CITY ANNUAL REPORT 2023-24**
To receive the report of the Healthwatch General Manager and Chair of Trustees.

For Information
(Pages 77 - 106)
9. **QUESTIONS ON MATTERS RELATING TO THE WORK OF THE COMMITTEE**
10. **ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT**
11. **EXCLUSION OF THE PUBLIC**

MOTION - That under Section 100(A) 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 I of the Schedule 12A of the Local Government Act.

Part 2 - Non-Public Reports

12. **NON-PUBLIC MINUTES**

To agree the non-public minutes of the meeting held on 15 May 2024.

For Decision
(Pages 107 - 108)

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

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

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HEALTH AND SOCIAL CARE SCRUTINY COMMITTEE Wednesday, 15 May 2024

Minutes of the meeting of the Health and Social Care Scrutiny Committee held at Committee Room 1 - 2nd Floor West Wing, Guildhall on Wednesday, 15 May 2024 at 11.00 am

Present

Members:

Deputy Christopher Boden (Chairman)
David Sales (Deputy Chairman)
Michael Hudson
Deborah Oliver
Deputy Alpa Raja
Steve Stevenson

In attendance:

Chris Pelham	- Community and Children's Services
Hannah Dobbin	- Community and Children's Services
Ian Tweedie	- Head of Adult Social Care, CoLC
Amy Wilkinson	- NE London Health & Care partnership
Alison Glynn	- NE London Health & Care partnership
Thomas Clark	- NHS North East London
Andrew Trathen	- Hackney Council

- 1. APOLOGIES**
Apologies were received from Andrew Mayer.
- 2. MEMBERS' DECLARATIONS UNDER THE CODE OF CONDUCT IN RESPECT OF ITEMS ON THE AGENDA**
There were no declarations.
- 3. ORDER OF THE COURT OF COMMON COUNCIL**
The Committee received the Order of the Court of Common Council of April 2024.
- 4. ELECTION OF CHAIR**
A single expression of interest having been received, Deputy Boden was duly elected Chair of the Committee for the ensuing year.
- 5. ELECTION OF DEPUTY CHAIR**
- 6. A single expression of interest having been received, David Sales was duly elected Deputy Chair of the Committee for the ensuing year.**

6. **MINUTES**

RESOLVED – That the public minutes of the meeting held on 17 January 2024 be agreed as a correct record.

7. **FORWARD PLAN**

The Committee noted the forward plan.

On the forward plan, the Committee requested these future focus areas:

- Carers' strategy review, noting that this is reviewed annually;
- Military veterans and the military covenant; and
- Health and social care arrangements and outcomes of Portsoken Ward residents noting the disparity in deprivation between those residents and other CoL residents.

8. **ADULT SOCIAL CARE SELF-ASSESSMENT**

The Committee noted the report of the Executive Director, Community and Children's Services introducing the City of London Corporation's Adult Social Care Self-Assessment 2024, supporting the inspection of our Adult Social Care services by the Care Quality Commission (CQC).

In response to a question on clarification around the terms of the triangulation of the commissioning arrangements, the Committee noted that annual reviews are undertaken on residential homes that took into account CQC ratings, quality assurance, and protocols that emphasised partnership working and a focus on safeguarding.

On whether the absence of care home accommodation within the CoL was a strategic choice, the meeting heard that the issue had been raised within the confines of the carers' strategy consultation, noting that there has not historically been any evidence of planning for provision within the CoL based on the data, and many families seeking residential care have extended families outside the CoL – however options are being considered and there is no strategic decision to refrain from having such arrangements within the Square Mile.

A Member commented that there was merit in also examining sheltered and assisted living arrangements within the Square Mile, and the Committee noted the affordability constraints of care home options in the CoL and the small number of residents that might merit working in partnership with other LAs and take advantage of block-commissioning exercises outside the CoL.

Members noted that the CoL is linked to the Northeast London commissioning system, noting also the nationwide variance in spot-commissioning and block-commissioning rates.

A Member asked for further information on the extent to which the CoL comes near to the block rates used by other LAs, given the CoL's dependence on spot rates (see action point 1).

Members noted that the CoL is doing well thanks to an adequately-funded service, stable political leadership, and good staff retention levels, and that it was important to continuously improve, avoid complacency, and ensure that the CoL remains open to new ideas and challenges, the latter point being clearly articulated in the document in particular. It was noted that the CoL has made a conscious decision as an LA to spend more per head than do other LAs, and that that decision would benefit from being recognised in future documentation.

On references to deprivation variation within the CoL, a Member asked for more information on the outcomes of that variation and how that was being considered. The Committee noted that services may not change though the emphasis differed between different areas within the CoL, noting also that early intervention projects were used to a greater extent in areas of greater deprivation (see action point 2).

9. **DRAFT NEL FORWARD PLAN**

Members noted the Joint Forward Plan 2024/25.

A Member asked whether the CoL should be considered as an area of lesser need in the light of the inequality within the CoL, and the Committee noted that such a consideration would be strengthened in future reports.

A Member commented that the report would benefit from coherence among different areas, and that some of the report appeared to be formulaic and lacking measurable targets. The Committee noted that the same observation was made by the Health and Wellbeing Board of the CoLC and noted that there may be some constraints related to the report template (see action point 3).

A Member commented that forward plans of this kind were not always viable, helpful or realistic and that 5-year plans needed to be rewritten every couple of years.

10. **PATIENT CHOICE IN SECONDARY CARE**

Members noted that though the eRS system (available as a web-based system) is linked to GP and hospital systems it is not linked to the NHS app, and that it is cumbersome to check waiting times and success rates between different providers and that there is no comparison tool for that purpose. The Committee noted the wider IT problems around NHS services that precluded the provision of any kind of integrated coherent services, noting also the initiatives being rolled out for patients that are unaware of how to access services, as well as those that are digitally excluded.

A Member asked for further information on the success of the patient choice promotion initiatives and how complaints were managed. The meeting heard that an independent sector provider would be sought for treatment where appropriate and that patients would be informed of their right to choose as part of a national information roll-out expected shortly.

In response to a question on the extent of the confidence that patients were aware of their rights and the complaints process and whether GPs were encouraged to make that information available, the meeting heard that complaints information was available on all websites, and that complaints were received and responded to as required by NHS England and that GPs were encouraged to offer patient choice.

In response to a question on whether there were any cost implications to GPs around making a request to direct patients to specific hospitals. The meeting noted that a set of national prices was implemented for services, with an additional premium for a more costly area (that includes central London) that was not incurred by the GP. In response to whether a patient could choose a specific provider for a particular procedure, the meeting heard that provided any Integrated Care Board had a contract with that provider at the relevant site for that service, then the patient could exercise that right with the assistance of the

GP, the Committee also noting that most patients were unlikely to be aware of that right.

In response to a question on patient choice around scans and diagnostics, the Committee noted that such procedures are not covered by any legal right to patient choice and are generally not covered by primary care provisions.

11. PATIENT CHOICE IN PRIMARY CARE

Members viewed a presentation on patient choice in primary care, noting that all GP practices in England are free to register new patients who live outside their boundary area since January 2015 on a voluntary basis. The Committee also noted that patients are able to access GP appointments remotely thanks to the improved availability of telephone and online consultations and booking, as well as the Pharmacy First process whereby patients can be referred to community pharmacies for specific minor conditions.

Noting the importance of placing the patient at the centre of every system, a Member commented on the concerns raised around situations whereby, for example, workers at the CoL might wish to register with a CoL-based GP which might place residents at a disadvantage and asked whether such a situation had arisen. The meeting noted that the Neaman practice would probably refuse a request for registration to someone whose residence was not in the CoL partly to do with capacity issues.

A Member commented that GPs appeared to be acting as gatekeepers to pharmacists and asked whether that was the case. The meeting heard that pharmacies were available to handle a wide range of issues.

Noting that practices were entitled to refuse patients outside their catchment area, a Member asked what would happen if an already-registered patient then moved outside the catchment area. The meeting heard that a separate organisation managed the patient index and checked patient addresses, and in some circumstances a GP could agree to continue managing a patient who had moved outside the practice's boundaries.

On whether a patient could undergo a specific procedure outside the boundaries of their own GP (noting the many workers travelling into the CoL who may prefer to undergo a specific procedure within the CoL), the meeting heard that local diagnostic pathways were usually followed and that alternative options may be available, though there would need to be an agreement with the relevant ICB (see action point 4).

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

There were no questions.

13. ANY OTHER BUSINESS THAT THE CHAIRMAN CONSIDERS URGENT

There was no other business.

14. 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.

The meeting ended at 12.50 pm

Chairman

Contact Officer: Jayne Moore

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Action point	Date	Action	Progress
1	15 May 2024	Provide detail on the extent to which the CoL makes use of block-commissioning rates as used by other LAs.	Written feedback shared with Members
2	15 May 2024	Demonstrate initiatives to improve equity of outcomes in the light of variation in deprivation within the CoL in future self-assessments	Written feedback shared with Members
3	15 May 2024	Consider report formats to allow for greater clarification of observation and outcome reporting, to include measurable targets	Noted by relevant officers
4	15 May 2024	Clarify what alternative options are available in cases where a patient seeks to undergo a specific primary care procedure outside the boundaries of the GP practice	Written feedback shared with Members

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Topic	Presenter	Suggested meeting
Carers Strategy update	City of London Corporation	29 January 2025
Children's Social Care Self-evaluation	City of London Corporation	29 January 2025
The City and Hackney autistic-friendly Neighbourhood pilot	Neighbourhoods Team	TBC January 2025
Military veterans?		
SEND Needs Assessment	Public Health	TBC Spring 2025
Mental Health Needs Assessment	Public Health	TBC Spring 2025
Health Equity Audit (to cover Portsoken Ward)	Public Health	TBC Spring 2025
City of London Neighbourhood Insight report	Neighbourhoods Team	Due Spring 2025
Adult Social Care Strategy progress report	City of London Corporation	Due Winter 2025
Foot health/clinic	Hoxton Health	
Never events (safeguarding in hospitals)		
Community Drugs Partnership		
Health Support for Unaccompanied Asylum-Seeking Children		
Direct Payments		
Dementia Services		
Health and Wellbeing Network		

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CITY PARENT CARER FORUM



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August 2024 Special Educational Needs and/or Disabilities (SEND) Self-evaluation



East London
NHS Foundation Trust



North East London

Agenda Item 6

Summary



The City of London is a unique place, just one square mile, the financial heart of the UK and home to just under 9,000 residents.

The City of London Corporation (the City Corporation) provides local authority services to these residents and works in partnership with a wide range of organisations to deliver the best possible outcomes for its residents.

Special Education Needs and/or Disabilities (SEND) is no exception, and our vision for all children and young people is that the City of London is a place where they feel safe, have good mental health and wellbeing, fulfil their potential and are ready for adulthood whilst growing up with a sense of belonging.

At the end of August 2024, there were 26 City of London children and young people with an Education, Health and Care Plan (EHCP). The majority were male, and the biggest presenting need was Autism Spectrum Disorder. The number of EHCPs has increased from 14 in 2019.

With only one maintained school in the City of London (a primary school), City of London children and young people go to 66 different schools across neighbouring boroughs.

Amongst these children, 55 are receiving SEN Support in their schools.

Overall, there is currently one young person in alternative provision and one who is electively home educated. Neither have an EHCP or Special Educational Need.

Summary



We are proud that our services to children and young people with SEND are responsive, flexible and agile to respond to need.

We deliver all our EHCPs within the 20-week statutory timescale and as we have no direct provision within the City of London boundaries, we commission services that are person-centred and very much tailored to the child or young person.

We attend all Annual Reviews in person to meet with the children, young people and their families to ensure that the voice of the child and young person is paramount in the process.

Additionally, we engage with Personal Education Plans (PEPs) and Annual Reviews for children and young people for whom we are corporate parent who live and are educated outside of the City of London.

There is strong partnership working across our internal departments (Early Years, Social Care, Education and Adult Skills Education and Apprenticeships) and with external organisations such as health.

Working together, internally we keep a vulnerable children's register which includes children and young people with SEND.

Colleagues come together to regularly keep this list under review and respond to any emerging needs promptly.

Summary



We are also proud of the educational outcomes our SEND children and young people achieve and the contribution they make to their communities

Two of three EHCPs being ceased this summer are due to young people transitioning to university and/or apprenticeship.

There are strong relationships with employers through an Employer Forum and as a result seven supported internships have been developed which are available to eligible young people.

However, we are not complacent and there is always more we can do to ensure we deliver on our vision for children and young people in the City of London. To that end, we invited a peer review in Spring 2024 of our Area arrangements.

The review found that *there is a clear vision and ambition for children and young people with SEND and that professionals know children and young people well and place them at the centre of their thinking.*

Recommendations have been endorsed by our parent carer forum and an action plan is in place to address the areas for development.

For the next year, some of our focus will be on delivering our new strategy in partnership with our partners, children and young people and their families.

We will also be strengthening partnership arrangements with health and joint commissioning arrangements, reinforcing our understanding and oversight of children and young people on SEN Support in the range of schools attended and enabling more inclusive or specific activities for children and young people with SEND and their families.

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City of London context

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My London artwork by a City of London young person

Our Local Area Partnership

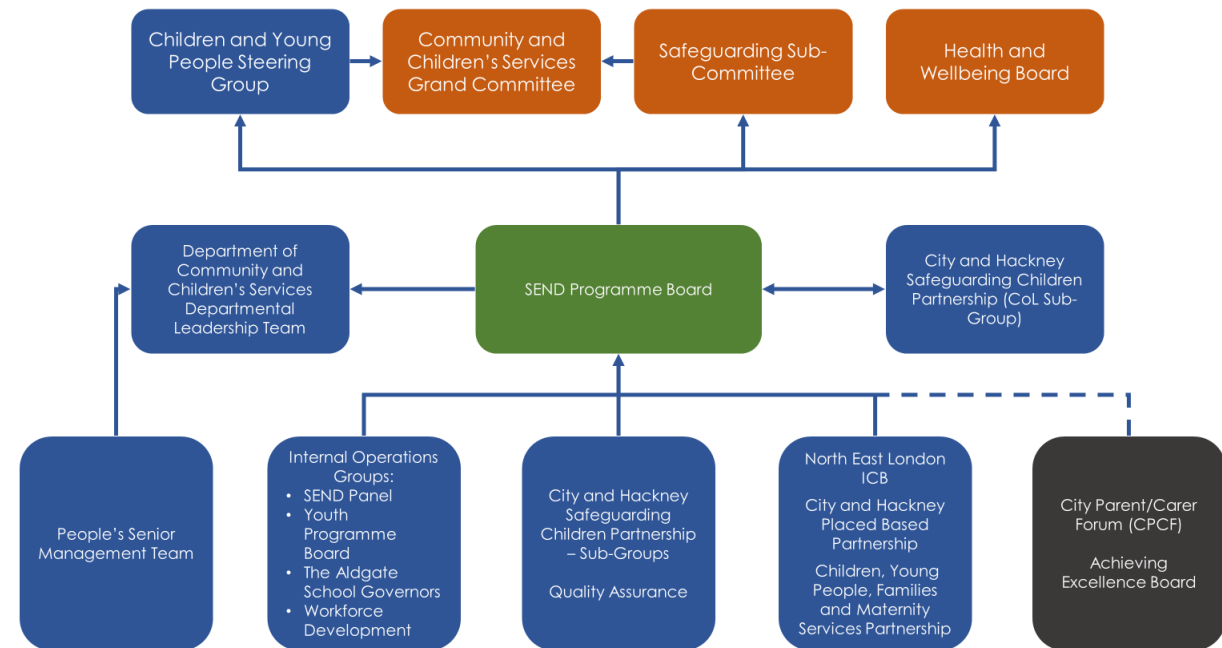


At the heart of our partnership is the Special Educational Needs and/or Disabilities (SEND) Programme Board and its collaboration with our children and young people with SEND and their families. Chaired by the Strategic Education and Skills Director, the Strategic Lead for Children and Young People (Health) and the Assistant Director – People (Social Care), it brings together parent carers, health, education, early years settings, safeguarding, information, advice and support services, and local authority partners to drive ambition and delivery.



CITY PARENT CARER FORUM

The City of London Corporation (City Corporation) operates a committee system. The Community and Children's Services Committee has responsibility for SEND. There is strong political commitment to supporting children and young people with SEND and their families.



City of London context

Our vision and aspirations



Our vision: The City of London is a place where children and young people feel safe, have good mental health and wellbeing, fulfil their potential and are ready for adulthood whilst growing up with a sense of belonging (City of London Children and Young People's Plan 2022-2025)

Our aspirations for children and young people with SEND and their families:

- support at the earliest opportunity – delivered in good quality local settings for education, health and care
- happy, healthy long lives with the support to fulfil aspirations and achieve outcomes.
- support to become independent adults, with transition enabled by education, training, volunteering and employment opportunities.
- equity and equality for our children and young people – securing access to services and opportunities that any other child would have,
- opportunities to try new things, make new friends and know that they are valued, successful members of their school, college, and community
- recognition of the experiences and expertise of our children and young people, and their families – to shape their lives, our services and our strategies

Our aspirations for the services we deliver for children and young people with SEND:

- creating a City that is a safe, accessible place to play, learn and work
- providing access as close as possible to the homes of our children, young people and families
- sharing a determination to evaluate and improve services
- building and delivering services based on a robust understanding and evidence of needs based on qualitative and quantitative information
- celebrating the diversity and strengths of children, young people and families – and placing that at the centre of what we do
- ensuring our children, young people and their families understand who does what, who is responsible and where they seek help, through communications and processes that are clear, easily found and break down barriers
- working collaboratively so that our services are joined up, designed on shared understanding, knowledge and experience of the children, young people and families we work with, and using the strength of that partnership to innovate and develop
- meeting needs by bringing together the best trained staff that can respond to the range of need and opportunity

City of London context

About the City of London



The City of London is the birthplace of the capital. At just 1.12 miles in area, it is home to 8,600 residents and a financial centre that has six hundred thousand workers. It is a place of unique and historic governance, economic vibrancy, cultural richness and diverse communities.

With just one maintained primary school (the Aldgate School) and five independent education settings within the City of London's boundaries, children and young people attend over 66 different schools across London. The population is served by a single GP practice with 20% of residents (and 50% of children with an Education Health and Care Plan [EHCP]) registered with practices within Tower Hamlets.

Like the seven London local authorities that border the City of London, areas of deprivation sit alongside affluence. Income deprivation is significantly lower than the England average, but in the east of the City of London lie areas within the top 20% for income deprivation. Academic attainment is high, and issues of crime and anti-social behaviour are consistently low.

City of London context

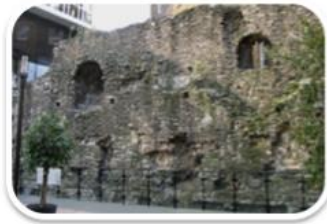


About the City of London



The City of London is home to a population in which the majority are working age, but also to 1975 children and young people aged 0 to 25 (713 aged 0-18) (Census 2021). The Census 2021 breaks down the overall City of London population into 65% White, 25% ethnic minority (6% other).

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The City of London is the oldest and most historic part of London



Smallest local authority area in the country at 1.12 miles



The Square Mile is the financial centre of the capital



We have one primary school, four independent schools, and one independent college in the City



We have a unique system of administration



Half a million workers
Ten million tourist visits



We have 8600 residents,
1975 children and young people aged 0 to 25



We provide local and police authority functions

City of London context

Understanding our need



At the end of August 2024, 26 City of London children and young people had an EHCP. Of those 26:

- 18 (81%) were male.
- 9 (35%) were under 12 years of age, the rest were between 12 and 25-years-old.
- 22 (85%) of those with an EHCP attended educational settings outside of the City of London, mainly mainstream with a small number attending specialist day provision and two are placed in specialist 52-week residential placements.
- 54% supported were from Global Majority communities.
- The primary need (65% of children and young people) supported was Autistic Spectrum Disorders.
- 1 was receiving alternative provision (EHCP finalised end of August 2024)
- There has been an increase in EHCPs from 14 in 2019 (mirroring national trend) and cases were becoming more complex.

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Of all City of London children and young people:

- 1 child is Electively Home Educated (does not have an EHCP).
- 53 receive SEN Support at their school.

City of London context

Educational attainment in City of London settings



Children with SEND in Early Years settings

In August 2024, there were 13 City of London resident children on the Inclusion Register. Of these:

- 10 children had SEN Support. Of these:
 - 1 is not attending an early years setting
 - 3 are in reception class at a school outside of the City of London and 1 is in reception at the Aldgate School
 - 4 are in an early years setting in the City of London and 1 is in an early years setting outside of the City of London
- 3 children had an EHCP (1 in reception class at the Aldgate School and 2 in nursery; 1 in the Aldgate School and 1 at a setting outside of the City of London)
- Early Years settings are making timely and appropriate referrals. More referrals are received by settings who have a trained early years SENCO

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Number of City of London children with SEND at Aldgate School who reached a 2 (expected) in at least one area of the EYFS

Area	EHCP	SEN Support
Communication and language		1
Personal, social and emotional development		
Physical development	1	1
Literacy		1
Maths	1	1

City of London context

Educational attainment in City of London settings



KS1 Teacher Assessment % of pupils achieving the expected standard or higher

Year	No Special Needs			SEN support			EHCP		
	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23
Reading	98%	90%	83%	67%	43%	55%	0%	100%	0%
Writing	94%	90%	83%	50%	43%	55%	0%	100%	0%
Maths	98%	85%	94%	83%	43%	27%	50%	100%	0%

Source: Data from the DfE website – analysing school performance

KS2 Teacher Assessment % of pupils achieving the expected standard or higher

Subject	Year	No Special Needs			SEN support			EHCP		
		2018/19	2021/22	2022/23	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23
Reading	Aldgate School	98%	90%	83%	67%	43%	55%	0%	100%	0%
	National	83%	75%	77%	75%	N/A	N/A	75%	N/A	N/A
	Gap	15%	15%	6%	-8%	N/A	N/A	-75%	N/A	N/A
Writing	Aldgate School	94%	90%	83%	50%	43%	55%	0%	100%	0%
	National	78%	66%	69%	69%	N/A	N/A	69%	N/A	N/A
	Gap	16%	24%	14%	-19%	N/A	N/A	-69%	N/A	N/A
Maths	Aldgate School	98%	85%	94%	83%	43%	27%	50%	100%	0%
	National	84%	75%	77%	76%	N/A	N/A	76%	N/A	N/A
	Gap	14%	10%	17%	7%	N/A	N/A	-26%	N/A	N/A

Source: Data from the DfE website – analysing school performance

Children with SEND at The Aldgate School

- At Key Stage One children with SEN Support achieve well:
 - the proportion of children with SEN Support meeting the expected standard for reading, writing and maths exceeded national levels in 2019, 2022 and 2023
 - in 2023 the proportion of children with SEN Support meeting the expected standard for reading, writing and maths exceeded the performance of their contemporaries at the Aldgate School without special needs
- 75% of children with SEN Support met the higher standard for reading and writing in 2023, and half for maths.
- There were no children with an EHCP at KS1 in 2022/2023.

Educational attainment in City of London settings



	No Special Needs			SEN Support			EHCP		
Year	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23
Reading	100%	94%	91%	67%	100%	64%	N/A	50%	0%
Writing	100%	94%	93%	56%	86%	64%	N/A	0%	50%
Maths	100%	94%	82%	89%	86%	55%	N/A	50%	50%

Source: Data from the DFE website – analysing school performance

		No Special Needs			SEN Support			EHCP		
Subject	Year	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23	2018/19	2021/22	2022/23
Reading	Aldgate School	100%	94%	91%	67%	100%	64%	N/A	50%	0%
	National	81%	84%	82%	73%	44%	45%	73%	16%	18%
	Gap	19%	10%	9%	-6%	66%	19%	N/A	34%	-18%
Writing	Aldgate School	100%	94%	93%	56%	86%	64%	N/A	0%	50%
	National	88%	80%	82%	78%	30%	34%	78%	11%	12%
	Gap	12%	14%	11%	-22%	56%	30%	N/A	-11%	38%
Maths	Aldgate School	100%	94%	82%	89%	86%	55%	N/A	50%	50%
	National	87%	81%	74%	79%	40%	42%	79%	15%	16%
	Gap	13%	13%	8%	10%	46%	13%	N/A	35%	34%

Source: Data from the DfE website – analysing school performance

Children with SEND at The Aldgate School

- At Key Stage Two, children with SEN Support achieve well, exceeding national averages since 2021 in Reading, Writing and Maths.
- Where children with EHCPs were admitted for Standard Assessment Tests, children exceeded national averages, and all children with EHCPs exceeded national average in Maths by 34.5% since 2021.

City of London context

Summary of strengths

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My London artwork by a City of London young person

What works well



- SEND leadership across the City of London and **partners are committed to securing the best possible outcomes** for children and young people with SEND. Leadership of SEND is embedded in all layers of local strategic organisations through the SEND Programme Board which acts as the Local Area Partnership and is tri-chaired to reflect the education, social care and health partnership. The Board has representation from all local area partners as well as from parents and carers.
- The **SEND Programme Board provides strong governance**, and consistent and focused scrutiny for improving performance and assuring quality, delivering a co-produced [2020-2024 SEND Strategy for children and young people ages 0-25](#) which gives clear strategic direction for work with our children, families and partners. There are also comprehensive strategies, plans and guidance that support the delivery of the main SEND Strategy.
- Our SEND service is characterised by **a responsive, outcomes-based, person-centred approach**; changing needs can be responded to immediately and respond to meet individual needs with the commissioning of bespoke and specific services.
- **Our graduated approach**, known as the City of London SEND Ranges, supported by training, is proving effective in strengthening the identification and response to needs for children and young people with SEND and the quality of referrals to the SEND Panel.
- **A strong multi-agency approach** which brings Children's Social Care and Early Help, Health and Education professionals together, is an effective feature of the local SEND landscape and has a positive effect on the quality of EHCPs. The City Corporation has commissioned independent evaluation and assessments of the quality of our EHCPs.

What works well



- **Arrangements for joint commissioning** impact provision positively and produce positive outcomes for children and young people with SEND. With a culture of joint commissioning reflected across the local partnership area of the City of London and Hackney, a broad range of needs are identified including speech and language therapies and autism training. **Leaders use local intelligence well to commission the services that children need and that help them to achieve their aspirations. (SEND Peer Review June 2024).**
- Outcomes for children and young people with SEND include pupils making **good progress towards their aspirations and preparation for adulthood (PfA) outcomes** in line with their special educational needs. Outcomes and progression of each young person with an **EHCP are reviewed annually in meetings**, enabling full involvement of the parent, child or young person in order to consider their views, wishes and feelings especially when making decisions. **Planned and effective transitions are secured** through the Transition Forum which meets termly to monitor young people with EHCPs aged 14 years and over to facilitate collaboration between Children's Social Care, Adult Social Care, Health and other partners.
- The implementation of recommendations of the Local Area for SEND Inspection 2018 – reported to the City Corporation's Safeguarding Sub-Committee – have delivered **a better start and improved outcomes** for children and young people with SEND. Progress is reported to the Safeguarding Sub-Committee where there is a regular focus on SEND.
- **Support for children in the early years** is a considerable strength with a good local offer in place for families in the City of London. There is effective identification of children with additional needs by health visiting services. This enables effective signposting to services, the provision of support, and referrals for assessments where needed.

What works well



- **Professionals know children and young people well and place them at the centre of their thinking and actions.** The SEND caseworker knows children extremely well and works well with professionals to make sure that children's plans and support packages reflect their views and aspirations. There is a trusting relationship between families and the service, and any concerns or issues are resolved quickly.
- **The SENCO (Special Educational Needs Coordinators) Network** includes education settings outside of the City of London that City of London children and young people with EHCPs attend. Also provides SENCOs with a network for discussing issues – including local, regional and national developments - and sharing best practice with the support of City of London Early Years, Primary and Secondary SENCO toolkits and the SEND Ranges.
- **Co-production has been strengthened** by the development of the City Parent Carer Forum (CPCF) which includes parents with children at a mix of educational settings and with a variety of needs. Co-production played a key role in developing the SEND Strategy 2020–2024. A new strategy is currently being developed with the input of parent carers, professionals and children and young people. There are strong relationships and regular engagement with parents and carers who tell us they feel supported. Families with children and young people with SEND are also taking part in the Lord Mayor's Show.
- **Strengthened role for the Designated Medical Officer (DMO) and the Designated Clinical Officer (DCO)** with the DCO attending City of London SEND Panels so that medical information is readily available and there is a direct link for any follow up information.
- **Feedback from the Peer Review** confirmed our assessment of what is working well.

Our impact

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A drawing by a City of London young resident

Experiences and outcomes of children and young people with SEND



Children and young people's needs are accurately assessed in a timely and effective manner with:

- Emphasis on early identification of needs across the spectrum.
- All early years settings have a named SENCO, supported by the City Corporation's Early Years Lead Adviser.
- The City Corporation's Education and Early Years Service has two designated Early Years Area SENCOs supporting our settings, their staff and parents through observations, meetings and advisory support.
- Level Three SENCO training is offered annually to early years settings by the City Corporation annually.
- Settings are provided with an Early Years SENCO handbook and SEND Range descriptors based on national best practice in determining and describing the needs of children and young people.
- Referrals for support in early years are referred to the City of London SEND Panel.
- Children and young people coming into care are assessed by the Virtual Head Teacher – who collaborates, where SEND needs are identified, with the SEND teams in the authorities in which they are placed to ensure support. SEN officers support the Virtual Head with Personal Education Plans (PEPs) and annual reviews for our corporate children living and being educated outside of the City of London.
- An Inclusion Register held by the Early Years Team supports early identification of children whose development causes concerns; it is linked with attendance data to identify poor attendance among children or young people with SEND and to explore whether attendance may indicate masked SEND issues.

Experiences and outcomes of children and young people with SEND



- At the end of August 2024, there were 24 children on the Attendance Improvement Group List including children known to the Education and Early Years Service, Children's Social Care, Early Help service and the Virtual School. Children with low attendance or not attending school are at risk of not reaching their full potential and therefore a key driver to ensuring that children are safe is ensuring that they are in education. The Group also monitors children who are NEET (aged 16-18) and home-educated children where there are concerns about the suitability of education being delivered.
- Specific, higher-risk cases on the List are reviewed every half term with actions agreed. This provides support and challenge, reduces the possibility of drift and quickly highlights incidents of low school attendance and missing education so that support can be provided.
- A multi-agency professional group led by Homerton Hospital – and including the City Corporation's Early Help and Education and Early Years services - meets weekly at the Hackney Ark Multi Agency Referrals (MARS) session to consider children and young people with SEND needs; interventions include allocation of a keyworker or setting up a team around the child (TAC) meeting.
- The understanding and identification of speech, language and communication skills and needs has been strengthened by the City of London Talks and Listens Enthusiastically ([COLTALE](#)) programme - set up in 2019.
- Health visitors carry out development checks early on to identify potential risks, using Early Language Identification Measure (ELIM) – a tool rolled out alongside Speech and Language Therapy practitioners.

Experiences and outcomes of children and young people with SEND



- A lead social worker for disabled children in Children's Social Care has facilitated joined-up working with Adult Social Care and the Early Years Team in respect of children and young people with EHCPs and transitions into adulthood; the Head of Children's Social Care acts as the Designated Social Care Officer (DCSO) to strengthen engagement across teams.
- Children eligible for NHS continuing care are reviewed at the Joint Complex Care Panel (JCCP) led by the North East London (NEL) ICB with multi-agency membership across health, social care and education. Joint assessments and reviews are undertaken wherever possible and the NEL ICB supports the continuation of care packages in hospital when this supports the needs of the child, family and provider team.
- The needs of high-risk children and young people up to 25-years-old are reviewed monthly through multi-agency discussion of the City and Hackney Dynamic Support Register.
- Robust assessment and annual review processes ensure all EHCPs are issued within the 20-week timescale.
- Annual reviews are undertaken within the statutory timescales and attended by the Casework Manager, the Principle Educational Psychologist and other key partners.
- Children and young people are actively involved in their annual reviews and the PATH process is used for those at key transition points.

Experiences and outcomes of children and young people with SEND



- The City of London SEND Ranges provides a framework for staff in all settings 0-25 to address early identification of needs, provide ideas for curriculum adaptation and set out guidance on assessment and the effective deployment of resources including staff; a training package for professionals and families was piloted in Summer term 2023 at the Aldgate School; the approach has been evaluated in 2024.
- A school tracker has been developed to record the school settings that City of London children attend in other parts of London to secure better information about the children and young people who receive SEN Support.

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Independent audit May 2023

Fourteen open SEND cases were selected for independent review in May 2023. The audit noted:

Vulnerabilities associated with SEND are addressed in a timely way with appropriate intervention and allocation of services. Evidence of timely and ongoing communication between social workers and partner agencies is documented in plans, case notes and records of multi-agency/network meetings. The impact of these relationships is evident in the outcomes for children and young people.

There are excellent examples of joined up working with SEN EHC caseworker, Virtual School, Occupational Therapy, Speech and Language Therapy, Educational Psychology, Schools and Colleges and Health Professionals. There is strong evidence on children's files and in discussion with allocated workers of their understanding of the professional network and the importance of their role in coordinating services.

Our impact

Experiences and outcomes of children and young people with SEND



- The Wellbeing and Mental Health in Schools (WAMHS) Programme aims to improve mental health and wellbeing support for children and young people in schools, colleges, specialist and alternative provision education settings in City and Hackney and provides an allocated CAMHS worker bi-weekly in the Aldgate School.
- WAMHS has engaged the school community including staff and parents, to embed wellbeing initiatives throughout the school culture, and provides an adapted offer available to the independent schools within the City of London boundaries.
- Our [Local Offer](#) provides clear, accessible information about services for parents, children and young people with SEND, and practitioners supporting them - including information on the CPCF, health, short breaks, SEND, EHCPs , personal budgets and Preparing for Adulthood (PfA).
- The Local Offer can be found on the City Corporation's online Family Information Service (FIS) which maintained its quality award for information services in February 2024.
- Free, impartial advice to parents and young people with SEND is provided by the Tower Hamlets and City of London SEND Information Advice and Support Service ([SENDIASS](#)).
- Positive feedback through the Peer Review.

Experiences and outcomes of children and young people with SEND



Children and young people participate in decision making about individual plans and support

- A person-centred and multiple agency approach to EHCPs focuses on individual needs and enabling children and young people to make choices.
- A stable and experienced workforce across Education and Early Years, Children's Social Care and Adult Social Care enables children and young people to form and sustain meaningful, consistent and stable relationships with professionals throughout their life course.
- Education, Early Years and Children's Social Care services trained in systemic practice which uses relationships as a resource and empowers people to participate in decision making about their plans and support.

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I think that it [EHC needs assessment process] helped me motivate myself to go to the one-to-one tuition and pursue into a career I may be able to do.

I would say nothing [didn't go well] but maybe the fact the distance I would need to travel to come to this place but the teacher is very supportive.

Young person

Our impact

Experiences and outcomes of children and young people with SEND



- City and Tower Hamlets SENDIASS provides impartial information, advice and support for families with SEND through a dedicated worker for the City of London who works collaboratively with families, City Corporation's SEND Team and the SEND Programme Board.
- Targeted events – such as a Year Five transition event and a Let's Talk SEND event - support parents to forward plan and prepare their child for transition and strengthen their understanding of law, practice and what to expect from local authorities.
- Easy read versions of documents, such as the SEND Strategy and forthcoming Preparing for Adulthood brochure, have been produced to make them more accessible to young people.
- Tools such as images and signing support for children and young people to have their voices heard when reviewing short breaks.
- One young person with SEND participated in the local Super Youth Hub (commissioned by Public Health) to train as a young researcher – a role that has also supported their securing part time employment.
- A young person with SEND participates in the City Youth Forum.

Experiences and outcomes of children and young people with SEND

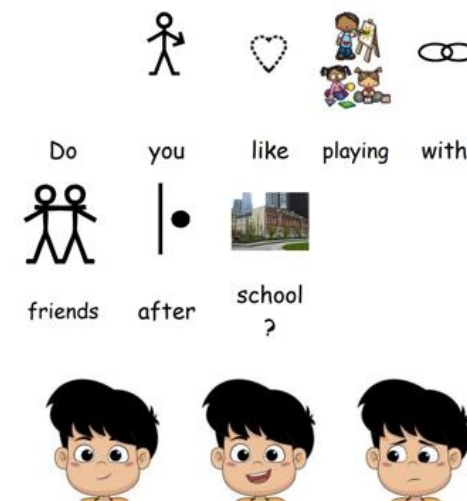
Case study

A young person with an EHCP has transitioned to a creative media college to pursue a career in creative media production. This was a setting they had researched and decided they would like to go to themselves. This has been a successful transition and they have made friends at the college and are enjoying the placement.

With the support of the SEN team, who assisted with a college application, and brought together the young person, their parents, previous school and future college, a successful transition was secured.



Children and young people have their voices heard as part of their short breaks review through images and signing. This child chose pictures to show they like singing, outside, swimming, dancing, football, music, jumping, horses, museums and computers. They do not like loud noises.



Experiences and outcomes of children and young people with SEND



Children and young people receive the right help at the right time

- The City Corporation SEND Panel, which includes professionals from Education, Children's Social Care and Early Help, Adult Social Care and the DCO, confirms provision levels and resourcing for EHCPs, recommendations for additional provision following annual reviews and early years inclusion fund requests.
 - The SEND Panel Terms of Reference have been updated to strengthen the focus on more evidenced-based and focused approaches rather than case work discussion and have widen representation to include SENCOs to provide a better balance of practical evidence and advice.
- No City of London children and young people are on the Dynamic Support Register but its review meetings retain representation and space for City children and young people so they can be quickly added.
- Children and Young People with SEND benefit from the local CAMHS alliance, including access to some services without referral to the CAMHS Service.
 - Families of children that attend the City of London's children's centre have access to emotional wellbeing and mental health support provided by Family Lives supporting parents with strategies and approaches to support their child.
 - All children and young people who are Electively Home Educated (EHE) are known to the Education and Early Years Service and are visited by an education officer at least once a year to assess suitability of education.
 - Skilled and co-located staff working across education, early years and social care enables the provision of the right help at the right time.

Experiences and outcomes of children and young people with SEND



- Workforce development has included Autism training for all Children's Social Care, Social Work and Early Help staff, along with some Education and Early Years service colleagues, to improve knowledge and skills, and anti-racism training to support the identification of the impact of identifying racism and how it affects the early identification of need in children.
- Children supported through the Early Years Inclusion Fund (which supports settings to meet their responsibilities to provide inclusive practice) are monitored by the SEND Panel to ensure that needs are being best met.
- The Inclusion Fund has enabled one child to have 1:1 support for most of the day, impacting positively on the child's development and attention span.
- A flexible approach to short breaks enables access to neighbouring borough provision or parents can be assisted to identify activities tailored to the needs of their child and use direct payments to access the identified social activity.
- Children and young people have used their short breaks to access music lessons, afterschool programmes, personal trainers, tennis lessons and horseback riding, supporting improved physical and spatial awareness, motor skills and social and communication skills. They also reduce stress and anxiety and support the development of emotional regulation.
- Short breaks enabled one young person who attended swimming lessons to increase their muscular strength and mobility and play table tennis with friends to improve their spatial awareness and motor skills, be social and build communication skills.

Experiences and outcomes of children and young people with SEND



- Assessment does not delay provision in relation to urgent need - during the period of assessment, provision can be arranged to ensure a child's educational needs are met; one-to-one tuition has been offered during the assessment stage when children are unable to attend school and while suitable school provision is found.
- Annual review meetings consider the progress a child has made towards the outcomes in the EHCP and whether any changes to their support are required for current or anticipated need – such as school transition.
- City of London children are referred to community and acute services based on their GP registration – either to City and Hackney services, or to Tower Hamlets for families registered in the local authority – and experience the same waiting times as children in those authorities based on assessment of needs.
- Waiting times are not impacting statutory EHCP processes but it is recognised that waiting times for CAMHS and neurodevelopmental assessments do impact on the experience of children, young people and families.
- The NEL ICB has invested additional funding into the 0-5 autistic spectrum disorder (ASD) pathway at the Hackney Ark and in 2023/24 the wait has reduced from around 15 months to around 12 months.
- For the over 5s, pathways waiting times are approximately 14 months (consistent with the national picture).
- There is ongoing work at the City and Hackney Place-Based Partnership and across NEL to strengthen pre-diagnostic support.

Experiences and outcomes of children and young people with SEND

Early years case study

The City Corporation's Lead Early Years Advisor worked closely with the nursery SENCO and the parents to support a child. When the child moved from the toddler to pre-school room, it was quickly highlighted that they would need additional support. Inclusion funding was applied for, to cover from Autumn term 2022 to Summer term 2023. The inclusion funding was used to provide 1:1 support for most of the child's days in nursery. Within two terms, the child's development had significantly progressed, and the child could use their voice to make choices about where to sit and which activity to be engaged in.

The child's keyperson, SENCO and parents continued to work together to support the child to develop life skills to prepare them for adulthood; through role play, understanding their world and how to keep safe and be independent. The support in place for the child's language development helped them to be confident in their community, develop friendships and play with their peers.

Early years parent feedback

'Our child's development has come very far. When they joined the nursery they could say less than 10 words. Now they can say sentences and communicate their needs. They have learnt to regularise their emotions and share their feelings with others.'
Parent.

Picture of a City Corporation Early Help worker by a child they have supported.

Thank you from the bottom of our hearts for your support throughout these years - There is a real improvement in [child's] life and we are so appreciative for the effort you put in in order to see that we are okay.

Thank you so much

Quote from a parent to one of the Early Help team.



Experiences and outcomes of children and young people with SEND



Aidhour independent audit May 2023

'Vulnerabilities associated with SEND are addressed in a timely way with appropriate intervention and allocation of services. Evidence of timely and ongoing communication between social workers and partner agencies is documented in plans, case notes and records of multi-agency/network meetings. The impact of these relationships is evident in the outcomes for children and young people.'

'Excellent examples of joined up working with SEN EHC caseworker, Virtual School, Occupational Therapy, Speech and Language Therapy, Educational Psychology, Schools and Colleges, and Health Professionals. There is strong evidence on children's files and in discussion with allocated workers of their understanding of the professional network and the importance of their role in coordinating services.'

'Examples of excellent practice were noted in many cases. As in previous reviews the relationships that allocated workers develop with children and their families are of high quality, with an emphasis on systemic practice. The review found many excellent examples of the positive impact the support offered to children and their families has had and continues to have. One review noted, 'This is a great piece of intervention with demonstrable outcomes for the child and family. The allocated worker has worked closely with the family and network and co-ordinated services and sensitively encouraged them to accept the help being offered'.'

Experiences and outcomes of children and young people with SEND



Children and young people are well prepared for adulthood and achieve strong outcomes

- Preparing for Adulthood (PfA) is a key priority in early years settings, schools, colleges, and work-based training.
- City of London SEND Ranges highlight PfA outcomes from the early years so that all settings 0-25 can plan these across the curriculum at all stages.
- A health commissioned Strategic Partnership Lead for PfA works across City and Hackney, that focuses initially on all health pathway transitions arrangements, leading on the development of a transition strategy for health pathway transition arrangements and co-produced with families and professionals.
- A Transitions Task and Finish Group - including parent carer and young people representation – was set up to agree and strengthen PfA pathways, leading to a transitions information document that was co-produced with the CPCF.
- Adult social care representatives sit on the SEND Programme Board and Transition Forum, and the service contains social worker transitions champion on transitions to enable early planning of transition cases, provides peer support and advice to other social workers when they work with children and young people at the transition stage.
- A commissioned provider of information and guidance for young people known to Children's Social Care and those who have an EHCP or SEN, attends EHCP meetings and works with the SEND team to review the progress and map out individual support plans for the year, tailored to individual needs.

Experiences and outcomes of children and young people with SEND



- This service has supported a young person to apply for work in the security industry, and a family to negotiate with an education provider.
- The City Corporation established Employer Forum provides a clear, strategic plan to identify pathways into employment, supported internships and meaningful work experience including voluntary work for young people with SEND.
- The Employer Forum aims to increase the number of supported internship provision and employer champions across the City of London and Greater London areas, and by April 2023 had seven employers committed to being part of the supported internship programme.
- The City Corporation offers two supported internships and hosted [an event](#) in December 2023 to promote supported internships and discuss what employers can offer adults with SEND.

Parent carer feedback at end of an education key stage:

What do you feel has gone well? Early discussions about transition.

What do you feel hasn't gone well? Nothing specific has not gone well.

Experiences and outcomes of children and young people with SEND



Case study

A 12-year-old with physical and complex needs has been carefully supported with their transition to a secondary school provision. The young person has attended transition days at the new school and been visited by school staff. School staff attended the EHC transition review meeting. The family is well supported by professionals from education, health and social care and has been involved in the young person's transition planning. The young person's EHCP has been updated to provide an accurate picture for the new school and the Education and Early Years Service has agreed to provide a personal budget to use for taxis to and from school. The young person will be starting at the secondary provision in September and the family feel positive about this transition. The dad shared he has valued the good and consistent support from the school and SEND Team.

Case study

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Experiences and outcomes of children and young people with SEND



Aidhour independent audit May 2023 (Children's Social Care)

EHCPs are of high quality and for the most part are easily located on files. Timescales for specialist assessments are well documented and where services are not accessible pending the outcome of the assessment there is excellent evidence of children's social care seeking out alternative provision.

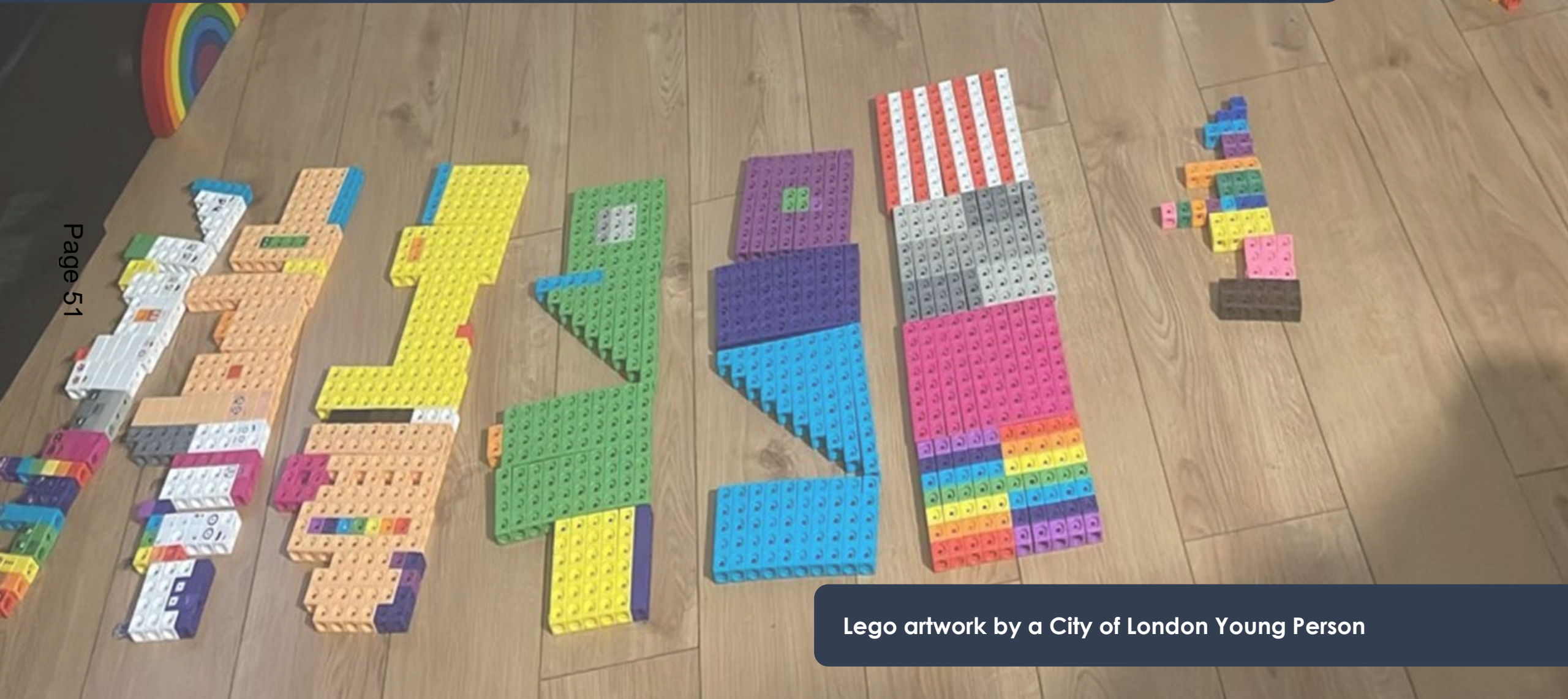
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Children and young people are valued, visible and included in their communities

- Children and young people's educational outcomes are celebrated.
- A Pan-London Shining Star award was given for exceptional progress and excellent attendance to a child in care who has an EHCP and is in a residential placement. A personal ceremony was arranged for them so that their routine was not disrupted.
- Children, young people and their families have been involved in recruitment exercises – most recently the CPCF has been involved in the recruitment process for senior staff in the Education and Early Years Service.

Our impact

The impact of leaders and local partners



How local partners work together to plan, evaluate and develop the SEND system



Leaders are ambitious for children and young people with SEND

- A golden thread sets out strong strategic ambitions for children and young people with SEND and their families across the local partnership and system to ensure:
 - there is a robust and inclusive multi-agency approach to identifying, assessing and meeting the needs of children and young people with SEND
 - all children and young people with SEND are well prepared for and have successful transitions to adulthood
 - children and young people with SEND are integral and valued members of the City of London community
- The SEND Strategy links ambitions in the City Corporation's Children and Young People's Plan 2022-25 which sets out the City Corporation's vision and expected outcomes for all children and young people, including that children can meet their full potential and are ready for adulthood.
- The City Corporation's Corporate Plan includes the objective to provide 'excellent services supporting people to live healthy, independent lives and achieve their ambitions'.
- The NEL Integrated Care System priorities include 'the best start in life for babies, children and young people of North East London' and includes specific objectives around 'supporting our children and families with SEND through strengthening safeguarding, addressing workforce challenges and supporting data capture' and 'extending our services for autistic children and young people including the introduction of a new keyworker scheme'.
- At a local place level, the City and Hackney Placed Based Partnership sets out a priority to give every child the best start in life, accompanied by a transformation programme focused on children, young people, maternity and family services (CYPMFS).

How local partners work together to plan, evaluate and develop the SEND system



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- A City and Hackney Emotional Health and Wellbeing Partnership Board delivers a system response to increasing Child and Adolescent Mental Health Services (CAMHS) demand and provide oversight and scrutiny of the shared commitment to provide help at the point of need.
- A CAMHS Crisis Summit and Autism Summit have shaped our partnership's focus on the integration of neurodevelopmental pathways across providers to improve efficiencies and a Single Point of Access (SPA) to City and Hackney CAMHS services since November 2022 – an initiative welcomed by schools who have experienced shorter times from referral to allocation.

Feedback on partnership working

'Having worked with colleagues from the City of London and from feedback given by parents, we would agree that the City of London uses a multi-agency approach and works well with other departments, agencies, and organisations to ensure that the outcomes are met for children and young people with SEND. They have demonstrated this commitment through working collaboratively on cases where children and young people have EHCPs as well as those on SEN Support. They have been able to bring together colleagues from education, health, and social care as well as voluntary organisations to support young people to improve outcomes. They use a positive outcomes approach and are able to identify and set achievable targets.'

Tower Hamlets SENDIASS Family Partnership Officer.

The impact of leaders and local partners

How local partners work together to plan, evaluate and develop the SEND system



Leadership and governance are effective because leaders' responsibilities are aligned with their legal duties and there is strong oversight at various levels.

- An effective SEND Programme Board brings together partners from health, education, Children's and Adults Social Care, SENCOs, and the CPCF, and makes decisions about our statutory responsibilities.
- The City Corporation's Achieving Excellence Board (AEB) was established in 2020 to drive the transition to and sustain excellence across services for children including SEND.
- Elected member oversight is provided by a lead member as SEND champion and oversight by the Safeguarding Sub-Committee (of Community and Children's Services), the Health and Wellbeing Board, and Health and Social Care Scrutiny Committee.
- The City and Hackney Health and Care Board brings together the executives of health and social care providers at place level, to provide strategic direction and ambition.

How local partners work together to plan, evaluate and develop the SEND system



Leaders actively engage with children, young people and their families

- City Corporation staff and relevant health organisations actively engage with the CPCF and bring together parents and carers of children and young people with SEND in the City of London.
- The CPCF has been involved in a range of work including the SEND Ranges and associated training, the local leisure centre programme and development of the SEND Programme Board.
- City Corporation staff and senior leaders met the CPCF to hear directly from parent carers and a “you said, we did” approach has been developed to provide transparency and accountability around decisions and actions in response to their feedback.

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A City young person with SEND was appointed as a young researcher within the Super Youth Hub (a service across City and Hackney to promote the health and well-being of young people) to collect and develop the understanding of young people’s views around health, well-being, mental health, alcohol and drug use and sexual health.

- CPCF influenced planning officers to create an inclusive play area at the St Paul's Gyatory development.
- Children, young people and their families co-produce the SEND and AP Strategy.
- Young people produced a film – [What Makes Me Happy](#) was introduced by and involved the elected Member with responsibility for children and young people.
- A five-year City and Hackney Autism Strategy was published in 2020 and was co-produced with local residents.
- The SEND Programme Board enables better sharing of ideas, development of practical solutions and improved communication.

The impact of leaders and local partners

How local partners work together to plan, evaluate and develop the SEND system



- Parent carers were involved in the development of the City Corporation's new Carers Strategy 2024-27 strengthening the reflection and ambition for that group's needs.
- The Children's Social Care Team has reviewed and co-produced a standalone parent carer assessment in response to a parent carer request. This focuses solely on the parent carer's needs.
- The Local Offer was reviewed with families, young people, and partners in 2021, and redesigned to reflect parents' request that information was accessible by both age range and by information area.
- Resident engagement and co-production is central to the Local Area Partnership, but the small population of the City risks overburdening residents with engagement requests.

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Leaders have accurate, shared understanding of needs

- A SEND data dashboard is reviewed quarterly at the SEND Programme Board meetings to provide line of sight and inform decision making and strategic priorities.
- Previous Public Health Needs Assessments (HNAs) include a Disabled Children's Needs Assessment (2017) and a 0-19 year old assessment which includes a chapter on SEND to strengthen insight and understanding of the health and wellbeing needs of children and young people with SEND; a new HNA is being undertaken.
- Health assessment data (e.g. timescales) has been more difficult to secure but is now coming through, and the Local Area Partnership will continue to work together to improve this.

The impact of leaders and local partners

How local partners work together to plan, evaluate and develop the SEND system



Leaders commission services and provision to meet the needs and aspirations of children and young people

- The NEL ICB commissions statutory services, such as therapies for City of London children, augmented by the commissioning of City and Hackney Public Health of health visiting and school nursing service.
- There is continued focus on hearing the voices of children, young people and families to ensure services meet local needs.
- A review of the Speech and Language Therapy Service is underway to rationalise the approach to commissioning, and to strategically rebalance the service to offer more early intervention support and less need for specialist support.
- Verbo, a digital platform developed by Homerton Hospital to strengthen universal screening and intervention with recorded targets and outcomes, is being piloted in the Aldgate School.
- Wellbeing and Mental Health Support in Schools (WAMHS) is well embedded within the Aldgate School and again supports a whole school approach.
- The Director of Integrated Commissioning has the mandate to ensure all statutory responsibilities across education, health and social care are reflected in system commissioning plans.

How local partners work together to plan, evaluate and develop the SEND system



Leaders commission services and provision to meet the needs and aspirations of children and young people

- Commissioned provision by the City Corporation strengthens our approach and can respond swiftly to need; includes spot purchase of alternative provision, SEND mediation, educational psychologists, home to school transport and independent travel training.
- The London Borough of Tower Hamlets is commissioned to provide youth justice services in the City of London. In September 2024, the Tower Hamlets/City of London Local Area Partnership was awarded the Youth Justice SEND Awards Quality Lead with Child First Accommodation issued by Microlink and the Association of Youth Offending Team Managers. The quality mark reflects effective SEND practice in the youth justice system.
- The commission of universal services – such as youth services, have a requirement to deliver SEND inclusion.
- There are low levels of alternative provision use for City of London children and young people.
- Children and young people are only placed in alternative provision that is Ofsted rated good or outstanding.

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The impact of leaders and local partners

How local partners work together to plan, evaluate and develop the SEND system



- Commissioned contract arrangements are in place for tuition services which can be accessed in situations and circumstances where tuition is an interim provision.
- Homerton Hospital is commissioned to deliver a range of services including effective speech and language therapies which during 2022-23 delivered nine specialist interventions at the Aldgate School resulting in 78% of targets fully met and 22% partially met.

Leaders evaluate services and make improvements

- In August 2022, the Education and Early Years Service commissioned the National Development Team for Inclusion (NDTi) to review the City Corporation's EHCPs. The work identified improvements secured since the SEND Area Inspection in 2018.
- Colleagues across education, health, social care and early help have ensured a more consistent use of PATH and worked to ensure that the language in EHCPs is more "ordinary", the outcomes (particularly around friendships) are more specific and that the EHCPs are even more accessible to young people and parents.
- Children, young people and families with an open case in Children's Social Care (including those with an EHCP open to Early Help or Children in Need) are surveyed annually by Action for Children.
- The City Corporation commissioned an external consultant to review SEN provision at the Aldgate School, supported by the City Corporation's Principle Educational Psychologist and the Lead Early Years Advisor. This raised the profile of SEND and increased the Governor for SEND's awareness of the issues and quality of provision, and secured the Trust Board's agreement that SEND was a key area for development.

How local partners work together to plan, evaluate and develop the SEND system



Action for Children survey August 2023

Overall, the majority of responses (66%) indicate a good or very good satisfaction level with the social work support they receive – an improvement on 2022 when 46.3% expressed dissatisfaction. They describe staff as considerate, attentive and calm. They feel listened to and have regular, proactive contact/visits.

Most of the families interviewed have children with disabilities and/or SEN. They gave examples of positive input (e.g. provision of disability aids and equipment for the home, effective care packages and after-school activities, excellent therapeutic placement). One participant said 'my last social worker had a disabled child herself. She understood' and another shared that 'we now have an EHCP, we have direction.'

Families also raised issues including 'monthly payments are a great source of worry' and 'we always go on waiting lists'. They shared concerns around complex multi-agency involvement and accessing appropriate medical, mental health, educational and recreational services.

Families in this cohort shared suggestions for improvements and further advice/support including clearer explanations as to entitlements and rights, and how to access services, greater support around housing needs, and financial advice and support.

A 'You Said, We Did' document is being developed to capture feedback and track what was done, or not, in response to aid transparency and provide a clear feedback loop. This will appear on the Local Offer.

How local partners work together to plan, evaluate and develop the SEND system



Leaders create the environment for effective practice and multi-agency work to flourish

- There is effective joint working between the Education and Early Years Service and Children's Social Care, with both the Children's Social Care and Early Help Team Manager attending SEND Panel meetings, EHCP review meetings and staff from the education service attending children in need (CIN) meetings and TAF (Team around the Family) meetings when required.
- A lead role for children who are disabled in social care strengthens links and shared learning and meet twice yearly with the CPCF, together ensuring children who are disabled have social workers who understand their needs and support their transition to adulthood.
- A multi-agency practitioner forum develops effective strategies to support families, children and young people.
- The development of an integrated outcomes framework for children and young people's services has begun through the City and Hackney Place-Based Partnership, and the integrated Population Health Hub (Public Health).
- The Place-Based Partnership is working with the ICB to contribute to the development of a SEND dashboard for London, informing the priorities in place.
- No City of London child or young person with SEND is involved with the youth justice service, but positive relationships are in place with the provider - Tower Hamlets Service - to enable support to be activated should it be required.

Areas for development

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My London artwork by a City of London Young Person



Priority areas for development



The areas for development identified following the SEND Peer Review will be addressed through an Area Action Plan.

Co-production

- Continue to strengthen communication with families around access to services and pathways across borough boundaries.
- Review the Local Offer with the CPCF and respond to learning from the Peer Review.
- Implement findings from audits about strengthening the voice of the child, building on the work of Inclusive Solutions during the person-centred planning process, annual review activity and film production.
- Fully involve families in the co-production and development of the SEND and Alternative Provision (AP) Strategy 2025-2029. Project plan signed off by Departmental Leadership Team following consultation with key stakeholders.
- Strengthen our co-production including working more closely with the CPCF and exploring innovative ways of engaging more children, young people and their families. Develop a new approach to reward and recognition for co-production as exemplified by our SEND and AP strategy 2025-2029 activity.

Priority areas for development



Preparing for adulthood

- Further strengthen pathways to internships, apprenticeships and employment by promoting the opportunities acquired as an option for eligible young people. Seven supported internship vacancies have been sourced as available for eligible City young people.
- Case file audits of any young people transitioning to Adult Social Care will be undertaken annually as part of a programme of case file audits led by the Principle Social Worker for Adults, building on the existing Transition Forum arrangements.
- Further develop the pathway plan for 15 3/4 to 25-year-olds with complex disabilities which brings partners together to set goals in every aspect of a young person's life, as this will be a new area for care leavers as the cohort ages.

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Identifying children on SEN Support

- Further embed the school tracker and develop this to request data on children and young people who have been placed in alternative provision by their schools. Currently we know that our resident children attend 66 schools across greater London and receive data from those schools.
- School attendance for children with SEND is available to the SEND Programme Board for scrutiny through the dashboard.
- Maintain an overview of the quality of education for children and young people who are in settings outside area boundaries, particularly those on SEN Support through the lens of attendance. Ofsted status of schools educating children with EHCPs is reported to SEND Programme Board.

Summary of areas for development

Priority areas for development



Area development work

- Health partners are leading on a review of the primary care offer of annual learning disabilities health checks to ensure that those entitled to one receive it and access the services and support offered within health services, building on the existing offer for quality assurance purposes.
- Accelerate plans for the development of a Neighbourhood health model so that children and young people with SEND can access the health services they need in their local area.
- Consider options to develop the cross-border commissioning of services to improve the SEND Local Offer, and particularly to increase the local availability of health services and specialist school places.
- Ensure the SEND Health Needs Assessment adequately reflects City of London needs through disaggregated data feed for City of London residents, recently made available in part.
- Strengthen City of London specific data from health services including agreeing a strategic approach to data collection of specified vulnerable cohorts in the City of London, through disaggregated data feed for City of London residents, recently made available in part.
- Continue to ensure SEND is high on the political agenda by working closely with the SEND Member champion to ensure children, young people and families continue to influence the political environment.
- Respond to a local review of the children's centre model to support children, young people and families up to the age of 19 (or 25 for young people with SEND). Existing services continue to be fully available.

Priority areas for development



Quality assurance

- Develop a multi-agency quality assurance framework for SEND that can be used by partners. A more formal quality assurance process would be of benefit for the EHC assessment, planning and review process.
- Develop a quality assurance framework for alternative provision to strengthen existing bespoke spot purchased arrangements.
- Drive our ambition to further develop local systems to enable more joint commissioning for children and young people with SEND.
- To continue the evaluation of our EHCPs by the National Development Team for Inclusion
- To build on the external evaluation of our SEND Ranges (graduated response) work.

SEND Ranges

- Further disseminate the City of London SEND Ranges in schools and early years settings to build upon their introduction and welcomed receipt, including hearing Partnership feedback and producing a parent-friendly version and in translations into community languages.

Agenda Item 7

Report to: City of London Health Scrutiny Board

Title: Immunisations in the City of London

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Date: 9 October 2024

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1. INTRODUCTION

- 1.1. Over the last decade, coverage for routine immunisation programmes nationally, regionally and locally has been declining and there are significant inequalities in uptake by ethnicity, geography and social vulnerability. Aggregated data shows the rate of decline being particularly pronounced for City and Hackney combined. However, there are some recent positive signs of recovery (Appendix 3).
- 1.2. As coverage is currently below the recommended 95% threshold needed for herd immunity, London as a whole, has seen a marked increase in the number of vaccine-preventable diseases and outbreaks, particularly for infections such as measles and pertussis. The ongoing risk underscores the need for targeted action to improve coverage.

2. CITY OF LONDON PICTURE		
Vaccination Programme and Pathway	Data Sources	Coverage
Antenatal vaccinations are typically administered through maternity services within acute trusts (e.g. Homerton Healthcare NHS Foundation Trust), GPs, and other providers such as private hospitals.	Insight into this performance at place level is unavailable.	Prenatal pertussis (whooping cough) vaccine coverage for pregnant women for North East London ICB from January to March 2024 was 30%. This is below the national average of 59%.
Childhood immunisations are delivered primarily through primary care/GP practices.	Disaggregated data for City is currently unavailable, and where available, may be inaccurate due to several challenges: <ul style="list-style-type: none"> Immunisation providers often combine data for City, with that for Hackney. This likely results in the underestimation of City-specific coverage due to considerable differences in socioeconomic and population-demographic factors. 	<u>Coverage</u> for the hexavalent (6-in-1) vaccine for City and Hackney combined, measured at 12 months for 2023-24, stands at 64%, which is lower than both the London (86%) and national average (91%) (Appendix 1). By comparison, coverage for all routine immunisations administered at the Neaman Practice is 92% or higher (Appendix 2); which is also higher than estimates reported by neighbouring

	<ul style="list-style-type: none"> The City's single GP practice, The Neaman Practice, serves 78% of the population. The remaining population is mostly registered with Goodman's Field (10%) and Spitalfields Practice (8%), both located in Tower Hamlets. Estimates based on The Neaman Practice alone may therefore not accurately reflect the true immunisation coverage for the City. 	<p>borough practices, ranging between 75% to 89%.</p> <p>Additionally, 2023/24 performance for Neaman Practice indicates improvements over 2022-23 on MMR and DTaP-related measures, with some now exceeding the WHO 95% target for herd immunity (Appendix 3).</p> <p>Coverage for Goodman's Field and Spitalfields Practice is summarised in Appendix 2.</p>
<p>School-age vaccinations are provided through the school-age immunisation service (SAIS) (Vaccination UK). Seasonal vaccinations are available through the GP and pharmacies.</p>	<p>Data for the school-age vaccination programme is available through the SAIS provider and is not published publicly.</p>	<p>The results of the 2023-24 school-age vaccination programme indicated that secondary schools in the City of London performed above the national average on most programmes. Only one school fell below the average for Year 8 HPV (girls) vaccination coverage.</p>
<p>Winter vaccinations</p>	<p>The JCVI sets guidance and recommendations for seasonal vaccinations. While flu vaccination cohorts are generally stable, COVID-19 (booster) eligibility has been narrowed following evidence of reduced severity from COVID-19 variants, and existing population vaccination coverage.</p> <p>Although flu vaccination coverage by local authority is available via Fingertips, there is no data available for the City of London.</p>	<p>The data for 2023/24 highlights that flu vaccination coverage exceeded the London average across all cohorts (Appendix 4). Coverage is comparable to or higher than the national average for certain cohorts, including at-risk individuals and 2-3 year olds.</p> <p>As of January 2024, 70% of City of London residents aged 20 and over had received at least one dose of the COVID-19 vaccine. This is compared to 66% in Hackney and 70% in London as a whole (Appendix 5).</p>

	<p>Coverage for COVID-19 at local level is not publicly available, however, NHS England publishes data on the total number of vaccinations provided for the current eligible population by region.</p> <p>The NEL ICB publishes internal data and performance, including coverage for care home residents, housebound individuals and health and care workers (where eligible).</p>	<p>Performance for the 2023/24 autumn booster programme (for City and Hackney combined) highlighted increasing uptake with age (Appendix 6), with optimal coverage in care homes (69%).</p>
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3. IMMUNISATION PROGRAMME CHALLENGES

- 3.1. **Data limitations:** As outlined in the table above, most immunisation data is aggregated to the City and Hackney combined level. Therefore, we are unable to analyse immunisation data by bespoke geographies, population groups and trends. This is a longstanding issue which, despite multiple attempts to escalate and/or co-develop a solution, we have not been able to resolve. As City and Hackney Public Health are not the immunisation data owners, we have been escalating this issue to the NEL data team and NHSE London commissioners to try and identify a solution. Although there were discussions within NEL to develop an immunisation data dashboard, as is in place in other Integrated Care Systems, progress towards this appears to have stalled. Attempts to access data directly have also been unsuccessful. This situation results in efforts being less data-driven, impacts our ability to identify and address inequalities in immunisation uptake, and prevents us from monitoring and evaluating local initiatives (including our ability to monitor and evaluate the impact of the new Strategic Action Plan described below).
- 3.2. **GP population representation:** A key challenge is the incomplete representation of the population in GP practice records, due to many residents being registered with GP practices in neighbouring boroughs. This data limitation should be resolved with the development of the North East London Immunisation Dashboard although, as described above, progress towards its development appears to have stalled. As such, there are potential risks associated including a false sense of security regarding immunisation coverage (when using Neaman Practice as a proxy for estimating immunisation coverage).
- 3.3. **Insufficient and non-recurrent funding:** Funding to support the implementation of the City and Hackney Immunisation Strategic Action Plan

(2024-27) is insufficient. In particular this relates to budgets for targeted and co-produced communications campaigns, engagement and potential partnership work with community and voluntary sector organisations, and optimising service delivery (including call/recall and establishing clinics in community settings to increase access). Additional funding received tends to be non-recurrent and associated with a specific campaign and therefore does not support a strategic approach. Programme management support for delivery of many of the items within the plan is unclear past March 2025 when funding for the post runs out.

- 3.4. **Unregistered population:** Information from the Child Health Information Service (CHIS) database has shown that approximately 6.7% of children aged 1-11 (out of 443), are not registered with a GP. As a result, these children are less likely to be up to date with their routine immunisations.
 - Efforts are being made to obtain contact details for affected families to assist with GP registration, and provide information and access to childhood immunisations.
- 3.5. **Schools not listed on CHIS database:** A discrepancy has been identified where children registered on the CHIS lack a listed school. This issue affects call/recall activities through the SAIS provider, and limits targeted support for schools with potentially lower vaccine uptake.
 - Efforts are ongoing between City of London Education and the CHIS to update records, supported by Public Health and the immunisation commissioner, NHS England.

4. **COLLABORATIVE ACTION TO IMPROVE IMMUNISATION UPTAKE**

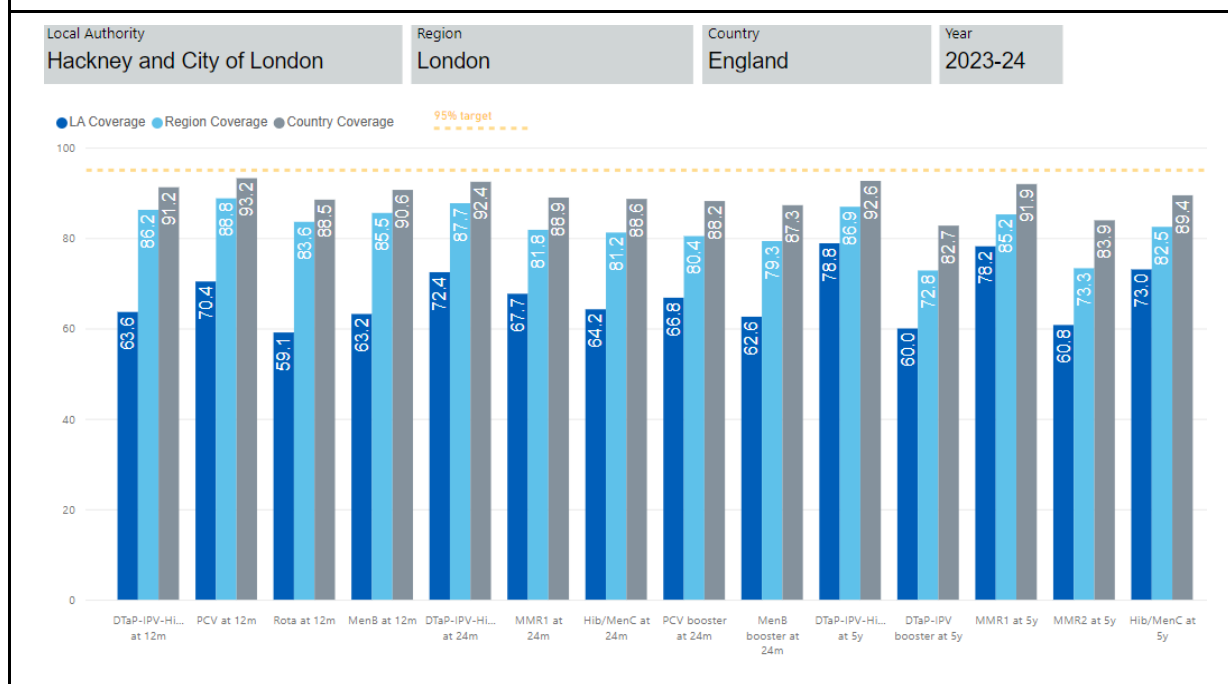
- 4.1. The responsibility for commissioning and delivering vaccination programmes sits with the NHS. However, City and Hackney Public Health continue to work with system partners, including those within the NHS, local GPs, and the community sector to understand barriers to immunisation uptake and implement initiatives to increase coverage, while maintaining a focus on addressing inequalities.
- 4.2. A new City and Hackney Immunisation Strategic Action Plan (2024-27) has been developed and is currently undergoing ratification. The overall accountability for the plan will sit with the City and Hackney Health and Care Board.
- 4.3. The strategic plan's vision is to safeguard all communities from vaccine-preventable diseases by increasing and addressing inequalities in immunisation coverage through action of community-, data- and system-led insights.
- 4.4. The plan is underpinned by a multi-pronged and evidence-based approach. The key strategic priorities are:

- Improving communications and outreach for inclusion health groups
- Co-producing community-informed campaigns
- Using data to guide activities
- Optimising service delivery
- Promoting vaccination advocacy across services engaging with eligible cohorts

- 4.5. The plan's implementation is already underway, with communications, engagement and outreach activities initiated throughout 2024, including:
- An immunisation clinic trialled at the City of London's Children's Family Centre, selected due to familiarity to families and proximity to Portsoken.
 - A 'family-fun-day' event held at Hackney Town Hall, targeting undervaccinated children aged 11 and below, resulting in 88 vaccinations administered (combined for both City and Hackney).
 - Additional MMR call/recall to undervaccinated populations in collaboration between City and Shoreditch PCN.
 - Roll out of the NEL ICB 'Bright Start to Life' and 'Protect their Potential' campaigns, which aim to raise awareness of the importance of immunisations in safeguarding children and young people's health.
 - Maintaining and disseminating immunisation-related content through local [websites](#), together with the Communications team.
 - Promoting vaccination within asylum-seeker accommodation settings.

APPENDICES

Appendix 1: Childhood Vaccination Coverage: City of London and Hackney (2023/24)



Appendix 2: Childhood vaccination coverage at GP practices serving City of London residents, compared to London and national averages (2023/24).

GP Practice	6-in-1 vaccine (12 months)	MMR 1st dose (24 months)	DTaP/IPV (5 years)	MMR 2nd dose (5 years)
Neaman	93%	94%	92%	92%
Goodman	89%	82%	90%	81%
Spitalfield	84%	83%	75%	75%
London	86%	82%	72.8%	73%
National	91%	89%	83%	84%

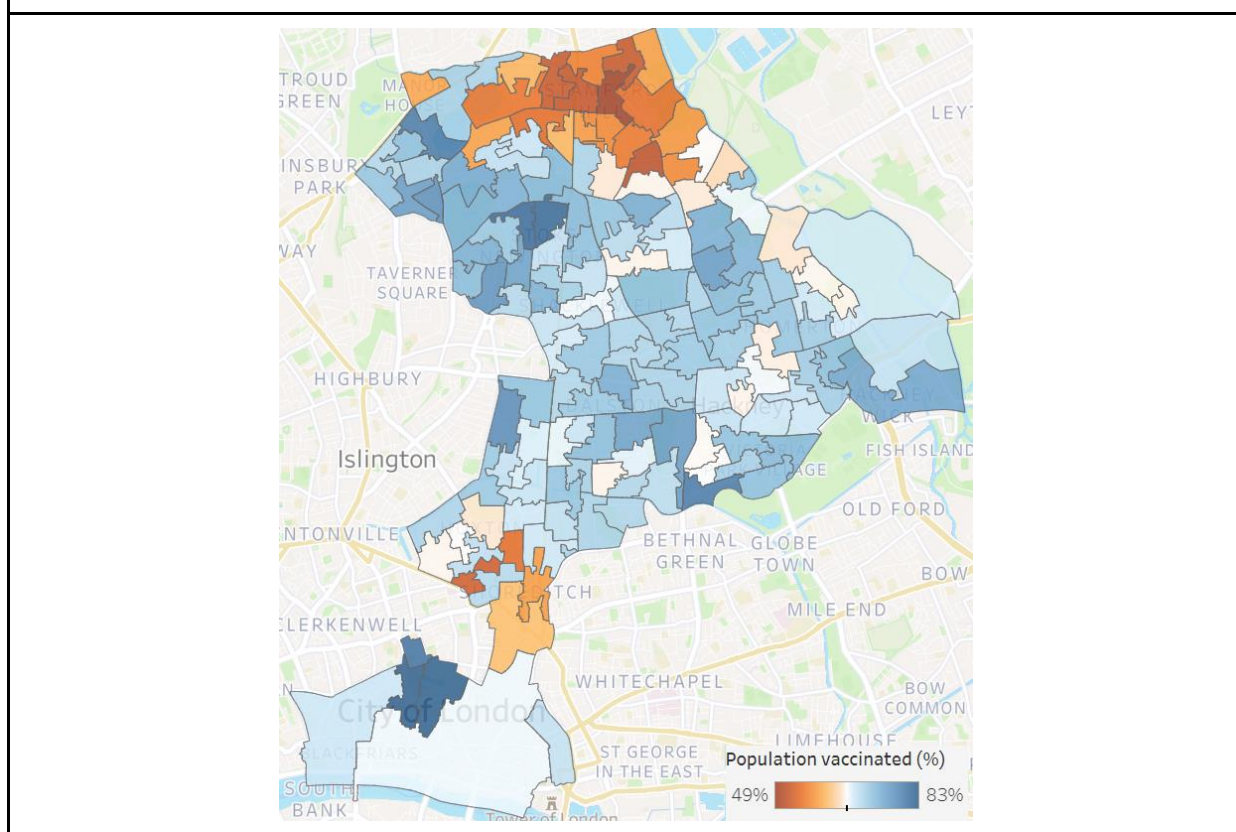
Appendix 3: Childhood vaccination coverage at Neaman Practice (2022/23 to 2023/24)

Vaccination Programme	2022	2023
DTaP/IPV/Hib/HepB (12 months)	91.7%	92.5%
DTaP/IPV/Hib/HepB (24 months)	90.4%	95.7%
MMR 1st dose (24 months)	86.5%	93.5%
MMR 1st dose (5 years)	93.3%	96.0%

MMR 2nd dose (5 years)	81.7%	92.0%
DTaP/IPV (5 years)	80.0%	92.0%

Appendix 4: Flu Immunisation Uptake 2023/24 in City of London and England			
Vaccination Cohort	City of London	London	England
Aged 65 and over	70%	66%	78%
At risk individuals	44%	35%	41%
2 to 3 years old	49%	37%	44%
Primary school aged children	46%	46%	55%
Care home residents	60%	N/A	N/A

Appendix 5: Percentage of the adult population that have received at least one dose of the COVID-19 vaccine by Lower Super Output Area (LSOA)¹, coverage, City and Hackney residents, April 2023



¹ Lower Layer Super Output Areas (LSOAs) are small geographical areas consistent in population size, with between 1000 and 1500 residents.

Appendix 6: COVID-19 2023/24 autumn booster uptake for City and Hackney, as of January 2024.

Cohort	Uptake
Care homes	69%
Health care workers (self-declared)	60%
80	53%
75-79	54%
70-74	47%
65-69	39%
At-risk	19%

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Your voice counts

Healthwatch City of London
Annual Report 2023-2024



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Message from our Chair

Welcome to Healthwatch City of London's latest annual report which covers the period from 1 April 2023 to 31 March 2024. This year's annual report, **Your Voice Counts**, demonstrates the increasing influence and the impact we are making in both the City of London and more widely in North East London. Serving a small residential population means that it is important that the City voice is not lost, particularly when there are so many pressures across North East London as a whole. Making sure that the impacts of changes are transparent and relevant to those living here is an important part of our work. Our focus has been to make sure that the needs and concerns of those living in the City are reflected back to key decision makers. We believe this report demonstrates that we have succeeded in this objective, making sure the City voice is heard. Whilst our strategic impact has increased, we have not forgotten that what matters most to people is that local services are of a high quality, delivered in a timely way and that those working with patients, carers or relatives are responsive and compassionate to individual needs.

This year, more people have contacted us about their concerns, and we have been able to bring these to the attention of the NHS and social care, seeking answers and keeping residents informed. Through our patient panels we have been able to make contact with and hear from a larger number of local residents and not just through digital platforms, but also face to face. Keeping it local and relevant is paramount in our work.

Working in partnership with all communities across the City of London is something we will strive to improve on next year and is a key objective for 2024-2025. There is still much more to do to ensure that services remain responsive to need and that those who direct policy and strategy listen and take note, so we will increase our activities in this area.

I would like to thank the staff at Healthwatch City of London for all their hard work and commitment to making our organisation a success, my fellow Trustees and associate board members for their support throughout the last year alongside our band of amazing volunteers and of course the many organisations we work with. Most of all I would like to thank you, the residents of the City of London for supporting our work.

Gail

Gail Beer, Chair, Healthwatch City of London



'what matters most to people is that local services are of a high quality, delivered in a timely way and that those working with patients, carers or relatives are responsive and compassionate to individual needs'



Gail Beer
Chair
Healthwatch City of London

About us

Healthwatch City of London is your local Health and Social Care champion.

We make sure NHS leaders and decision-makers hear your voice and use your feedback to improve care. Helping you to find reliable and trustworthy information and advice through a locally based team.

Our vision

For Health and Social Care services to be truly responsive to the needs and requirements of the residents, students and workers of the City of London.



Our mission

To be an independent and trusted body, known for its impartiality and integrity, which acts in the best interests of those who live and work in the City of London.



Our values are:

- Respecting and encouraging diversity
- Valuing everyone's contributions
- Maintaining integrity
- Creating inclusiveness



Year in review

Talking and Listening to you:

An important part of our work is keeping you informed and listening to you. Last year we produced nine newsletters, along with multiple information leaflets and reports, including one on deaf awareness and our regular information sheet informing you about health services' opening hours during the Festive period. In addition, we held five Patient Panels, numerous community events, including a Coronation tea party, as well as holding one board meeting in public and our Annual General Meeting.



All the information and insight we gain from these events is used to inform our work.

Over 5,234 visits were made to our website and we have 911 followers on social media to keep us connected. We have regular articles in Barbican Life magazine and City Resident newsletters.

Our resources that work for you:

We're lucky to have **13** outstanding volunteers who gave up their time to make care better for our community.

We're funded by our local authority. In 2023 - 24 we received

£99,192 which is 14% more than the previous year.



Our Team:

We currently have **One** Chair, **Five** Trustees

Three Associate Board Members

Three members of staff

All who help us carry out our work.





Working for our community

Health and Social Care services can't make improvements without hearing your views. That's why, over the last year, we have made listening to feedback from everyone in the community a priority.

This allows us to understand the full picture and feed this back to services to help them improve.

How we work with our community for our community

Over the past year we have continued to work closely with those in our community to ensure that we are able to champion your voices to create change for your Health and Social Care Services.

It is an essential role for us to be able to use our platform within North East London to directly share how you feel to ensure Health and Social Care services listen.

In this report we outline how we work closely with our local GP Practices to ensure they are receiving and listening to your feedback. We explain how we represent you in meetings across the system, share your feedback and the thoughts of the community, and highlight projects we are undertaking on your behalf as well as the issues that you have faced regarding your Health and Social Care.

In the City there are many passionate and dedicated people who are working to improve issues in the community and who are leading or a part of voluntary groups. We work closely with both voluntary and funded groups.

One patient's journey:

This year we may have met many new people from across the community. One resident has let us share her story with you.

We first met our resident at the Cancer Screening Awareness patient panel, held with NHS Cancer Alliance. Shortly after the event our resident got in touch with us. She attends routine screenings but had been misinformed as to where to attend her latest mammogram. She had been told that she had to go to Kentish Town or Stratford for the test, we contacted the NHS Cancer Alliance who clarified that screenings are still available at Mile End Hospital.

Our resident also has partial deafness and uses a hearing aid. Her journey to obtain the correct diagnoses included several visits to hospital with various diagnosis:

- Complaining of a severe headache she attended the Royal London walk-in clinic and was triaged for a sinus infection and received a number of tests.
- The results showed that they had contracted shingles, which had impacted the optic nerve in their head; they were then prescribed an anti-viral medication, which, however, was not effective.
- The resident later got severe head pain, which was the exact same pain as previously felt, along with a hissing sound in her ear with feelings of a lack of stability and balance.
- After a fall in public, she was advised to go to the GP with a suspected benign ear tumour (acoustic neuroma). Her GP, sent them to the London Independent Hospital, for a hearing test appointment. Although this is a private hospital, the initial appointment was NHS funded.
- The result of the test was that high frequency hearing loss was diagnosed.
- They received hearing aid care at the Royal London Hospital, with an initial hearing aid fitting.
- Finally, the patient was diagnosed with partial deafness, they met with a counsellor from the Royal London Hospital who was able to walk the patient through her diagnosis and provide support.

Our resident attended our Deaf Awareness Patient panel and was able to share her experience and knowledge on the subject. Raising awareness of this topic is important to her and she was grateful to be given the opportunity to share her story.

Our work in the Big Conversation

The Big Conversation is an initiative led by North East London NHS working with Health and Social Care across North East London, to help deliver joined up health and care services that are targeted for you. The Big Conversation concentrated on four topics based on your feedback.

These included:

- Babies, children and young people
- Long term health conditions
- Mental health
- Local employment and workforce

Healthwatch City of London supported this programme by holding a focus group with the Older Peoples Reference Group (OPRG) to explore how older people felt about these priorities.

Our group focused on Health and Social Care, Mental Health and Long-Term Conditions.

People were most concerned about waiting times, shortage of follow up appointments and lack of aftercare post discharge from hospital care. Some of which relates to the management of their conditions, but their concerns highlights more general worries about services which we will follow up on.

When discussing mental health, the group highlighted the need for preventative action, including a larger focus on mental health, and suicide prevention at schools, as well as a greater understanding of the role of the City of London Corporation and how they can support better mental health.

Ideas included:

- GPs or the local council keeping a register of everyone living alone in all age ranges and who may need mental health check-ups.
- That health services need to focus on holistic measures when treating Long Term Conditions, such as the importance of one's social health and wellbeing
- Social isolation and loneliness be given more consideration when supporting people to cope with their Long-Term Condition.
- More emphasis on and access to social prescribing
- That wastage of mobility aids, such as wheelchairs and crutches needed to be addressed including recycling as there are long waiting times to receive them.

Lack of community support groups and cuts in groups that used to exist to bring people together have had an impact locally

Healthwatch City of London are waiting for a report to be issued and we will be making sure there is good follow through.



Championing your views

Over the past year, we have worked hard to make sure we champion people's views. We champion what matters to you and work with the providers and planners of your Health and Social Care services to find ideas that work.

This year we have made your voices heard by:

- Working closely with the Neaman Practice to implement improvements
- Campaigning for the continuation of services that are important to you
- Ensuring that health services in the City of London know what matters to you
- Making your voice heard across North East London

Continued access to Foot Care

Toenail cutting is so much more important than people realise. It is an essential part of our physical health and wellbeing; it impacts the ways we walk and wear shoes, poor foot health increases the likelihood of developing infections. Difficulty in cutting toenails can affect all ages and be caused by any number of illnesses or disabilities. We have maintained a long campaign to ensure fair access to foot care and toenail cutting services. This year we campaigned again for the funding for toenail cutting services to be extended and remain free and accessible: we are proud to say we have been successful.

As a result of our campaigning and the continued support of the City of London Corporation, toenail cutting services provided by Hoxton Health have resumed at the Neaman Practice. Discussions are ongoing to develop a long-term solution and contract, enabling Hoxton Health to be less dependent on grants, so resulting in a continuous service without gaps.

Our work with the Neaman Practice

The Neaman Practice, provides care for 80 percent of the City residents. Over the past year we have strengthened our relationship with the Neaman Practice, becoming a critical friend. Our feedback based on your comments to us have been vital in this conversation and have been well received by the Practice.

We have continued our quarterly meetings with them which gives us the opportunity to hold honest conversations about issues that you may be facing. Dr Chor, GP and Partner at the Practice attended our February Public Board meeting and was able to highlight the numerous services that the Neaman Practice provides as well as taking questions from the public on issues you care about. This has enabled patients to gain a better understanding of the services they can ask for and expect to receive.

As a result of our feedback the Neaman Practice have widened the advertising of their Patient Participation Group (PPG) meetings which gives a greater voice to patients. The staff have undergone customer service training and we have created a better understanding of the role that confidentiality plays and the importance that it has when discussing patients' details.

The Neaman Practice have also increased the range of services they provide, developing their health and wellbeing offering called, The Together Better programme, which includes, a walking group, arts and craft sessions and a coffee morning. Working in partnership we advertise each others' events and activities.

Responding to your concerns

Digital apps project

This year we have started our Digital Apps Project that is exploring the current ways in which you can access your care and information using your digital devices.

Our preliminary work identified that it is possible to have nine NHS apps on your phone, including the NHS App, Patient Knows Best portal, MY chart and the Dr IQ app. We will be seeking to understand how each app and platform communicates with each other, how accessible and easy they are to use and how you are able to access your services and very importantly, what happens if you are unable to use these apps and portals.

What we are doing to address the issue:



In the coming year we will be handing out surveys and holding focus groups to hear directly from you and how your experience with these apps have shaped your care from your health services.

Over-dispensing at a local pharmacy

We were made aware of an issue regarding over-dispensing of repeat prescriptions at a local pharmacy. A resident reached out to us after they were given their old prescription and new prescription by a local pharmacist.

We raised this concern with the NHS North East London and the Health and Wellbeing Board. The medicines optimisation team investigated, and their findings led to measures being put in place to ensure that the issue will not happen again.

As a result of our intervention



- The Pharmacy now have one specific member of staff managing the repeat prescribing requests. Additional processes were also put in place by both the Pharmacy and the Neaman Practice to ensure that there is a vigorous process to manage repeat prescriptions. Senior pharmacists from the Pharmacy also attended the GP practice to ensure that better communication is established in order to prevent this from happening again.
- As a follow up we held a Patient Panel focusing on the importance of medicine management with Lead Pharmacist, Deborah Osowa from the Neaman Practice. This was to ensure patients are aware of how their medications should be managed and the importance of the annual checks they should be receiving from their pharmacy and GP.
- We will also be talking to other local pharmacies, to check this isn't happening elsewhere.

Our Enter and Views

What is an Enter and View?

Healthwatch have a legal power to visit health and social care services and see them in action. The purpose of an Enter and View visit is to collect evidence of what works well and what could be improved to make people's experiences better. Healthwatch can use this evidence to make recommendations and inform changes both for individual services as well as system-wide.

Goodman's Field Medical Practice with Healthwatch Tower Hamlets

This year, we made one Enter and View visit. In September HWCOL, along with colleagues at Healthwatch Tower Hamlets carried out an Enter and View at the Goodman's Field Medical Practice.

Although Goodman's Field Medical Practice is located in Tower Hamlets, many of our residents in the Portsoken area are their patients. Therefore, it was important to us to directly understand how the Practice was performing and how patients felt about their experiences.

The rationale for conducting the Enter and View Visit to Goodman's Field Medical Practice was based on data collected from various sources – NHS, Care Opinion, Social Media and App stores.

The feedback indicated that the GP practice performed exceptionally across areas such as treatment, communication and staff attitude. The main area of concern was related to service access, telephone service, referral process and the functionality of the Dr IQ app.

Outcome:

Overall, the visit to Goodman's Field Medical Practice was very positive with some areas of minor improvement identified. Recommendations for improvement were suggested and the practice has taken them on board.

The report has now been published and is available on the HWCOL website, <https://www.healthwatchcityoflondon.org.uk/report/2024-04-12/enter-view-report-goodmans-field-medical-practice>

St Bartholomew's Hospital Cardiology Department

In the next year we will be undertaking an Enter and View at St Bartholomew's Hospital. We have had feedback from patients about poor communication at St Bartholomew's Hospital, particularly in their cardiology department, ranging from lack of details on appointment letters, including crucial information such as dates, times, or the location of where the appointment is being held. Patients have also received both a text message and a letter with contradictory details with no information on whom to call to confirm their appointment.

In June, we will be holding an Enter and View at St Bartholomew's to speak directly to staff and patients and see firsthand how we can work together to tackle these issues.

Representing you at a wider level

We attend many meetings on your behalf which give us the opportunity to represent you and your thoughts at a wider level. Here are the meetings we attended in 2023 to 2024.

Neaman Practice Patient Participation Group and quarterly meeting



The Neaman Practice now hold their Patient Participation Group (PPG) every three months. Following our recommendations, the Practice have now widened the membership of the group and advertise the dates on their website and via text messages. The group discuss the services delivered by the Practice, and how improvements can be made for the benefit of patients.

HWCoL also hold private quarterly meetings with the Practice to raise any concerns you may have.

North East London Integrated Care Board



NHS North East London is responsible for planning and commissioning health services across North East London to meet the population's needs, making sure all providers of care across the region work effectively together. We attend meetings of the board to ensure that the needs of City residents are recognised and to feedback your views.

This year a lot of the focus of the Board has been on the Big Conversation, which you can read about earlier in this report.

North East London Integrated Care Board Healthwatch Meeting

A meeting with the Chair of the Integrated Care Board and all NEL Healthwatch to share resident involvement and insight gathered by NEL Healthwatch. This gives us direct access to the Board of the Integrated Care system which allows us to raise any issues directly. It also gives us the opportunity to have open discussions on areas that need improvement, project work, and on any concerns we have.



Integrated Care Communications and Engagement Enabler Group



This group supports and facilitates effective engagement with key stakeholders in the Integrated Care System (ICS) and voluntary sector in the City of London and Hackney. Working on co-produced projects and increased engagement with residents across the City and Hackney.

We make sure the City's population has a big voice.

Representing you at wider level continued

City of London Health and Wellbeing Board



This board aims to align the City's approach to the NHS Outcomes Framework, the Adult Social Care Outcomes Framework and the Public Health Outcomes Framework through improving the integration of services – positively influencing the health of everyone who lives and works in the City, enabling them to live healthily, preventing ill health developing, and promoting strong and empowered groups of individuals who are motivated to drive positive change within their communities and businesses. We raise the issues that are of concern to you, such as access to equitable healthcare, where and when you are cared for, and other such matters that you have told us about. This year we have raised the need for improved and accessible premises for the Neaman Practice, and for an additional GP Practice in the City.

Our reports have encouraged more support from the City of London Corporation at Health, Social Care and wellbeing meetings. The Corporation is now a very active participant in important meetings at the local and North East London level.

The redevelopment of St Leonard's Hospital project made no progress during this year. This was put on hold last year, and there is yet to be an update on its status. The services offered at St Leonard's play an important part in the delivery of care to City residents. Without a clear strategy, there is some uncertainty about the future of the site, the services provided there, and the likely impact on residents.

Health and Social Care Scrutiny Committee

This committee fulfils the City's Health and Social Care scrutiny role in proactively seeking information about the performance of local health and care services and institutions, challenging the information provided to it by commissioners and providers of services for the health service and testing this information by drawing on different sources of intelligence. Healthwatch City of London have a seat on this committee.



Representing you at a wider level continued

City and Hackney Safeguarding Adults Board



This committee oversees the discharge of the City of London's and Hackney's responsibilities for safeguarding those adults who have been identified as requiring support and protection. We raise any safeguarding issues that we have been alerted to and monitor historical concerns to ensure they are properly addressed, and statutory requirements are met. This year we were involved in shaping the priorities and objectives for the committee.

City of London Adult Safeguarding Sub-Committee



This committee is an important sub group of the City and Hackney Safeguarding Committee. It specifically oversees the discharge of the City of London's responsibilities for safeguarding those adults who have been identified as requiring support and protection. We scrutinise the work of the Adult Social care team and its interaction with other City services such as the City of London Police and Fire Departments.

Shoreditch Park and City Neighbourhood Forum



The Neighbourhoods forums are designed to bring residents, voluntary sector, health, education and care services together in the Shoreditch Park and City Neighbourhood, to work together on what matters to local people and address health inequalities.

This year we have ensured that at least three of the forums were held in the City, to allow City residents to easily attend, rather than having to travel to Hackney. We have raised the issue of services being accessible in Hackney only and not in the City. There is currently a project underway looking at physical activity in the City and improving choices of this to City residents.



'Healthwatch City of London has great reach and impact for a small organisation'.

Stakeholder feedback

Our Team

Our Board

Gail Beer – Chair

Lynn Strother – Trustee

Malcolm Waters – Trustee

Steve Stevenson – Trustee

Judy Guy-Briscoe – Trustee

Janet Porter – Board Associate

Stuart MacKenzie – Board Associate

Dr Cynthia White – Board Associate



Our staff team

Rachel Cleave – General Manager

Liesa Sandt – Communications and Engagement Officer

Caitlan Barrow – Volunteer and Projects Officer



Following the expiry of their original terms of office, the majority of our Trustees were reappointed for four years. Gail Beer, Steve Stevenson and Lynn Strother were reappointed in August 2023 and Malcolm Waters was reappointed in November 2023.

Welcome to...

Judy Guy-Briscoe who has joined us as a trustee.

Caitlan Barrow joined us as a Volunteers and Project officer.

Our thanks to...

Habiba Shaikh left Healthwatch City of London in September 2023, Habiba was the Volunteers and Project Officer, who was instrumental in organising and setting up our volunteer network.



Informing and involving you

Our role is to keep you informed and involved in local developments and issues.

This year we've helped people by:

- Providing up-to-date information people can trust
- Helping people access the services they need
- Informing people on essential NHS health programmes

We do this through

- Sharing a newsletter full of essential information regarding your Health and Social Care
- Keeping you updated through our social media platforms
- Attending and holding community events to directly hear from you

Patient Panels

This year we continued our Patient Panels series. These sessions provide the opportunity for you to hear about topics you are interested in. We bring you together with an expert in the field to explore and create greater understanding of the subject enabling feedback to service providers that they can take away. At the end of the sessions we produce a report with the information on our website and in our newsletters ensuring that we spread the knowledge.

This year we held five Patient Panels; each session attracted new members of the community.

Cancer Screening awareness

In September, our Patient Panel was on the Cancer Screening Programmes and the effects they have on patients in the City and North East London. We were joined by Caroline Cook, the Early Diagnosis Programme Lead at the North East London Cancer Alliance. Those who attended were able to learn about the three NHS Cancer Screening programmes, for Bowel, Breast and Cervical cancers. It was a great opportunity to understand how important preventative cancer screenings are, and how and where to access them.

Discussions also came up when talking about the difference between screening programmes and diagnostic testing and the barriers that prevented access to screening.

Following this session, we published information on where to get prostate-specific antigen (PSA) tests and what hospitals you would need to go to for certain cancer screenings.



New Cancer Wait Times Standard and the effect on patients in North East London

In November, we discussed the New Cancer Wait Times Standard and the effects it will have on patients in the City and North East London.

We were joined by Wayne Douglas, who is the lead for diagnosis and treatment at the NHS North East London Cancer Alliance, who explained these changes and answered questions and addressed concerns about the new changes.

Following this session, we published information on the new cancer wait times standard and how they will directly impact the timeline of your cancer journey.



Patient Panels

Increase your understanding of deaf awareness

In January, our Patient Panel explored deaf awareness. We were joined by Jane Richardson, a qualified speech and language therapist. Jane, who is deaf herself is passionate about raising awareness of how to communicate with those who are deaf or hard of hearing and the difficulties they face on a daily basis. Those who attended the session were able to take away ten tips on communicating with those who are deaf or hard of hearing.

This advice was published on our website and sent out in our newsletter. Along with these important tips, we also included information on where you can access help and resources if you, or someone you know, is deaf or hard of hearing.

Learn about safeguarding and how to identify and report concerns

In February, we held a Patient Panel on safeguarding and how to identify and report concerns. We were joined by Dr Adi Cooper, Chair of City and Hackney Safeguarding Adults Board who explained what safeguarding is, how you can report issues and what the responsibilities are of the Safeguarding Board and the City of London Corporation.

During the session, residents asked about the safeguarding training received by staff working for the City of London Corporation, emphasising the importance that the training of estate managers would be valuable as they are the eyes and ears of the City. We were later able to clarify that all Estate Managers do receive this training.

The session enabled a wider understanding of the importance of safeguarding in our community and some of those present were able to share this with other groups they are involved with.

Cardiopulmonary resuscitation (CPR) Training with the London Ambulance Service

In March, we focused on CPR training with the London Ambulance Service who were able to train our attendees on CPR and lifesaving skills.

During the session attendees were taught how to recognise symptoms of cardiac arrest, put an unconscious patient in the recovery position, perform Basic Life Support (BLS), and use a defibrillator..

This has since provoked discussion on CPR training and the location of defibrillators at the City of London Health and Wellbeing Board. It has also encouraged debate on CPR and first aid training for City residents.

Our Public Meetings

Public meetings are an important part of what we do and give you the opportunity to hold us to account as well as hear about our work. At each meeting we are also joined by a speaker on the subject of interest in Health and Social Care.

This year we held two formal public meetings, including our Annual General Meeting and our Board meeting in Public. At our AGM we were joined by Ian Thomas, the Town Clerk of the City of London Corporation and at our public Board meeting we were joined by Dr Chor, GP and Partner at the Neaman Practice.

Annual General Meeting

In October, we held our Annual General Meeting with Ian Thomas, the Town Clerk of the City of London Corporation. It was a great opportunity to hear directly from the City of London about their work and their 5 year plan for Health and Social Care, giving you the opportunity to directly pose any questions to Ian Thomas.

Ian highlighted how committed he and the City of London Corporation (COL) are to improving health and wellbeing. He stressed the need to make sure these new organisations' achievements and impacts were relevant to local residents. He also spoke about the Col's support for another GP practice, while acknowledging the difficulties of justifying a second surgery. The importance of charities and the public sector working together more effectively for the benefit of residents was acknowledged.

Attendees raised questions about the suitability of the standard of the premises at the Neaman Practice and the opportunity for a more modern site. Utilisation of the City's empty space for volunteer groups to use was also brought up as well as the lack of access to affordable healthy food in the City.

It was pleasing to have the support of members of the policy team from the City of London Corporation, colleagues from City Connections and Dr Anu Kumar from Shoreditch Park and City PCN at the AGM. A discussion was held on resident engagement and feedback to the Integrated Care Board and decision-making bodies. Work is already underway to ensure that the patient voice is heard and acted on with an increased involvement of the Col policy team.



Well-run event, I learned a lot from the Q&A session and the AGM report. Thank you

Resident feedback

Board Meeting in Public

In February, Dr Chor, GP and Partner at the Neaman Practice joined us and provided an update on the enhanced range of services offered by the practice. He was also able to provide an update on returning GPs and answer any questions.

Dr Chor highlighted that the range and breadth of services at the Practice has expanded, these include footcare, physiotherapy, diabetes care, medicine management, vaccinations and immunisations and dermatology. Of particular interest was the increase in the number of GPs, including the return of those on maternity leave.



“They have often had decision makers and people with power attending their meetings and events enabling local people to hold them to account”

Resident feedback

Our community events

Enabling us to bring you together to get to know your neighbours and the people in your community. Two of our events are described below:

Coronation tea parties

In May last year, we invited you all to join us for a tea party to celebrate King Charles III coronation and to showcase our volunteering opportunities. For The Coronation, King Charles encouraged communities to come together and volunteer to help others, making volunteering a cornerstone of The Coronation celebrations.

We held Coronation Tea parties at the Golden Lane Community Centre and the Portsoken Community Centre. It was great to see everyone who attended the events. There were new faces who joined us as volunteers which was very encouraging.

Festive tea party

We held a festive afternoon tea party in December last year and it was lovely to see familiar and new faces, enjoying a mince pie over a cup of tea. We know that the holiday season can be a lonely time for many of those in our community and many of your neighbours may have struggled during the holiday time. Our afternoon tea provided an opportunity to get together with those across the City, with residents from Golden Lane, Barbican and in Portsoken.





Volunteering

We're supported by a team of amazing volunteers who are at the heart of what we do. Thanks to their work in the community, we're able to understand what is working and what needs improving.

This year our volunteers:

- Were involved in project briefs and the mapping of our projects
- Attended community meetings on Healthwatch City of London's behalf
- Carried out enter and view visits to local services to help them improve

Your voice in the community

Our volunteers

We have a fantastic group of volunteers who help us with events, research, projects and community engagement. This year we have held a full training session for our volunteer team, and two specialised training days on Enter and View, allowing us to have 13 authorised representatives.

Our Public Representatives

Public representatives (reps) are the voice of local residents within the Health and Care system. They are residents of City and Hackney who generously volunteer their time to influence decision-making and contribute to the development of local services.

In the City, we have four reps who represent the City's voice at focus groups, public consultations and local meetings.

Patient-led assessments of the care environment (PLACE)

Our volunteers and a member of staff were involved in this **Barts Health NHS Trust PLACE Assessments**. These assessments take place to understand the current state of hospitals based on their environmental cleanliness with volunteers going through the hospital with a member of staff and rating each space based on specific areas. The areas looked at in the assessments include ward food, privacy, dignity and wellbeing, disability, dementia, condition, appearance and maintenance and cleanliness.

The Trust has overall scored 93.29% which is 3.13% above the national average of 90.16%. St Bartholomew's Hospital was the highest scoring hospital across the Trust with a score of 96.49%.

The reports from those assessments have now been published.

You can read the report on our website:

<https://www.healthwatchcityoflondon.org.uk/news-and-reports>



'carrying out the PLACE assessment gave me a fascinating insight into the hospital from the viewpoint of the patients. I would recommend, if you get a chance to take part, to take the opportunity'

Liesa Sandt, Communications and Engagement Officer, Healthwatch City of London





'I have been volunteering at the City of London Healthwatch for about a year now.

I've particularly enjoyed working on the Digital Inequalities project, where we are researching how digital apps offered by GPs serve the public.

Working with the Healthwatch team has been a rewarding experience, and I hope this project will contribute to a better understanding of how people use these healthcare apps daily and how they can be improved to be accessible to everyone'.



Saorise –
Healthwatch City
of London
volunteer



'I've only recently joined the Board as a Trustee at Healthwatch City of London, but I can immediately see the passion and dedication of both the staff team and our volunteer team.

I am really impressed with the amount of work they all undertake to make a difference for the residents of the City'




Judy Guy-Briscoe
Healthwatch City of
London Trustee

Do you feel inspired?



We are always on the lookout for new volunteers, so please get in touch today.

 www.healthwatchcityoflondon.org.uk

 00203 745 9563

 info@healthwatchcityoflondon.org.uk



Finance and future priorities

To help us carry out our work we receive funding from our local authority under the Health and Social Care Act 2012.

Our income and expenditure

Income		Expenditure	
Annual grant from the City of London Corporation	£92,722	Expenditure on pay	£54,831
Additional income	£6,470	Office and other expenditure	£7,722
		Consultancy	£3,593
		Rent	£9,016
Total income	£99,192	Total expenditure	£75,162

ICS funding

Healthwatch across North East London also receives funding from our Integrated Care System (ICS) to support new areas of collaborative work at this level. We received £5000 for an additional project.

Next steps

Over the next year, we will keep reaching out to every part of society, especially people in the most deprived areas, so that those in power hear their views and experiences.

Our current contract from the City of London expires in September 2024. Our plans for continuing our work beyond that date therefore depend on being granted a new contract by the City.

We will also work together with partners and our local Integrated Care System to help develop an NHS culture where, at every level, staff strive to listen and learn from patients to make care better.

Our top local priorities for the next year are:

- 1) Deliver 10 patient panels to inform residents about Health and Social Care topics relevant to them.
- 2) Hold a summer information event in June and our AGM in October.
- 3) Undertake two research projects – the use of digital applications in Health and Social Care; the extent of Social Isolation in the City.
- 4) Carry out two Enter and Views – Barts Cardiology Department and the Neaman Practice.
- 5) Maintain, train and utilise a dedicated team of volunteers.
- 6) Scrutinise how the City of London Corporation awards and monitors its contracts for Social Care provision.
- 7) Making sure City residents voices are heard at regional level



Statutory statements

Healthwatch City of London

Portsoken Community Centre

20 Little Somerset Street

London E1 8AH

Healthwatch City of London uses the Healthwatch Trademark when undertaking our statutory activities as covered by the licence agreement.

The way we work

Involvement of volunteers and lay people in our governance and decision-making

Our Healthwatch Board consists of eight members who work on a voluntary basis to provide direction, oversight and scrutiny to our activities.

The Board members consist of five Trustees, who are the sole voting members, and three non-voting Associate Board Members who participate fully in Board meetings but act in a consultative and advisory capacity. Our Board ensures that decisions about priority areas of work reflect the concerns and interests of our diverse local community.

Throughout 2023/24 the Board met 10 times and made decisions on matters such as organisational design, budget setting, objectives and priorities as part of the business plan and using insight from public forums. We ensure wider public involvement in deciding our work priorities.

Methods and systems used across the year to obtain people's experiences

We use a wide range of approaches to ensure that as many people as possible can provide us with insight into their experience of using services. During 2023/24, we have been available by phone, and email, provided a web form on our website and through social media, as well as attending meetings of community groups and forums.

We ensure that this annual report is made available to as many members of the public and partner organisations as possible. We will publish it on our website and a physical copy will be available.

Responses to recommendations

We had no providers who failed to respond to requests for information or recommendations. There were no issues or recommendations escalated by us to Healthwatch England Committee, so no resulting reviews or investigations.

Taking people's experiences to decision-makers

We ensure that people who can make decisions about services hear about the insight and experiences that have been shared with us.

In our local authority area for example we take information to the Health and Wellbeing Board, the Health Scrutiny and Insight Committee and the City and Hackney Adults Safeguarding Board. We also take insight and experiences to decision makers in NHS North East London For example, we attend the Integrated Care System Board and the Integrated Care Partnership Board alongside the other seven Healthwatch in North East London. We also share our data with Healthwatch England to help address health and care issues at a national level.

The way we work

Healthwatch representatives

Healthwatch City of London is represented on the City of London Corporation Health and Wellbeing Board by Gail Beer, Chair of Healthwatch City of London. During 2023/24 our representative has effectively carried out this role by producing and presenting a quarterly report to the Board and by raising issues on Health and Social Care at the Board meetings.

Healthwatch City of London is represented on North East London Integrated Care Partnership and on North East London Integrated Care Board by Rachel Cleave, General Manager of Healthwatch City of London.

Our thanks


We would like to extend our thanks to the City of London Corporation for their continued support, and funding, of Healthwatch City of London, especially to our Commissioning Manager, the Executive Director of Community and Children's Services and the Head of Strategy and Performance, Department of Community and Children's Services.

Our thanks also to the Chair and members of the City of London Health and Wellbeing Board, who ensure that issues and concerns raised by us are addressed.



Healthwatch City of London
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By virtue of paragraph(s) 3 of Part 1 of Schedule 12A of the Local Government Act 1972.

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