



South West London

# **Public Sector Equality Duty Report 2022/23**

## **NHS South West London ICB**

## Introduction

South West London is a diverse subregion and employer in London. South West London Integrated Care Board formed in July 2022, with the aims of the system to be as follows:

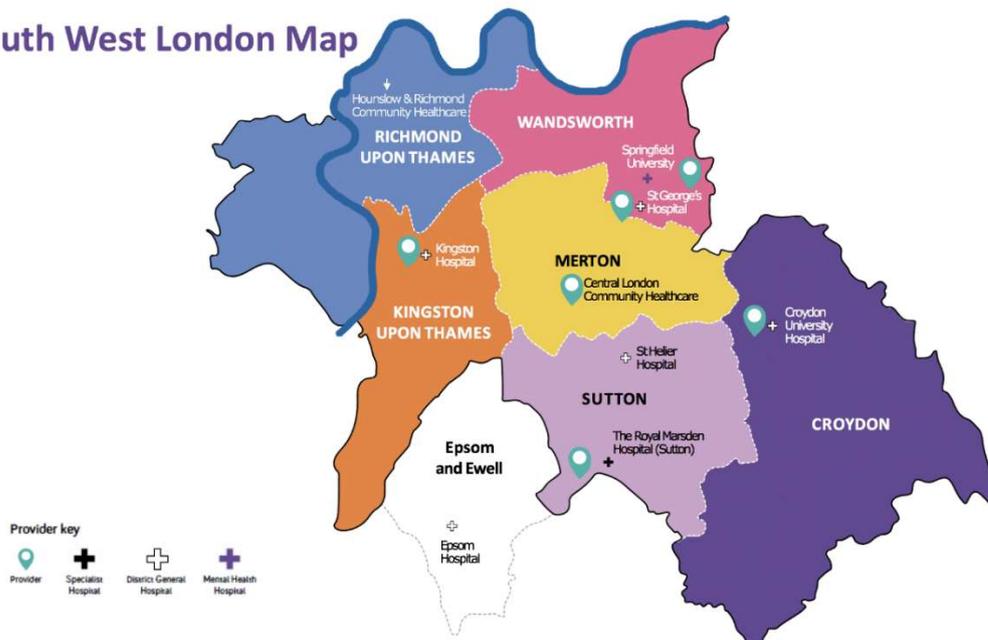
- Improve outcomes in population health and health care.
- Tackle inequalities in outcomes, experience and access to services.
- Enhance productivity and value for money.
- Help the NHS support broader social and economic development

We serve approximately 1.5 million people across six boroughs:

- Croydon
- Kingston
- Merton
- Richmond
- Sutton
- Wandsworth

This report shows equality information for South West London Integrated Care Board in 2022/23 that aligns with the Public Sector Equality Duty.

### South West London Map



## Introduction to Equality, Health and Social Care Legislation

One of our key objectives and priorities is to continue to tackle health inequalities and race disparities across our population and workforce. Across our six boroughs and all our transformation programmes, colleagues have worked with communities, the voluntary care sector, public health, and social care to improve outcomes for our disadvantaged communities.

South West London (SWL) Integrated Care Board (ICB) is committed to promoting equality and diversity for the people of South west London. We are making equality and human rights everyone's business within the ICB. The ICB has a number of statutory duties in relation to equality, diversity and inclusion.

---

### *Equality Act 2010*

---

The general equality duty under the Equality Act 2010 requires the ICB, in the exercise of our functions, to have due regard to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct that is prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristics and people who do not share it.
- Foster good relations between people who share a relevant protected characteristic and those who do not.
- The ICB will publish equality objectives at least once a year, demonstrating that it has consciously considered the three aims as part of decision-making processes.

The equality duty covers the nine protected characteristics:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation
- Marriage or civil partnership status.

The broad purpose of the equality duty is to integrate consideration of equality and good relations into the day-to-day business of public authorities. It requires organisations to consider how they could positively contribute to the advancement of equality and good relations. It requires equality considerations to be reflected into the design of policies and the delivery of services, including internal policies, and for these issues to be kept under review.

Compliance with the general equality duty is a legal obligation, but it also makes good business sense. Integrated care boards (ICBs) are public sector bodies and have a vital role in tackling inequalities in access to and outcomes from health and social care services.

---

### *Health and Social Care Act 2012*

---

Under this Act ICBs have duties to:

- Have regard to the need to reduce inequalities between patients in access to services and the outcomes achieved.
- Ensuring health service provision is integrated with health-related and social care services to reduce inequalities.
- Produce an annual commissioning plan explaining and assessing the discharge of their duty to reduce inequalities.

---

### *How do we show 'due regard'?*

---

To demonstrate 'due regard' and to fulfil our annual requirements, we: -

- Produce this PSED report every year with equality information and objectives. Equality has formed our annual reports.
- Complete and publish our Equality Delivery System (EDS) 2022 report
- Undertake Equality Impact Assessments (EIA)
- Engage with local communities who share protected characteristics and embed their voice in service delivery.

---

### *Mandatory standards.*

---

As well as the PSED, we publish information about our Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) on an annual basis.

## **How does the ICB monitor equality and diversity?**

In 2021, we established the Equality, Diversity and Inclusion (EDI) and Health Inequalities (HIE) Board and Delivery Groups. During the ICB's transition, the EDI/HIE Board was a sub-committee of the Governing Body established to support the South West London ICB in making demonstrable improvements in equality, diversity and inclusion for the organisations staff, as well as for patients, service users and carers that are affected by the activities of the ICB.

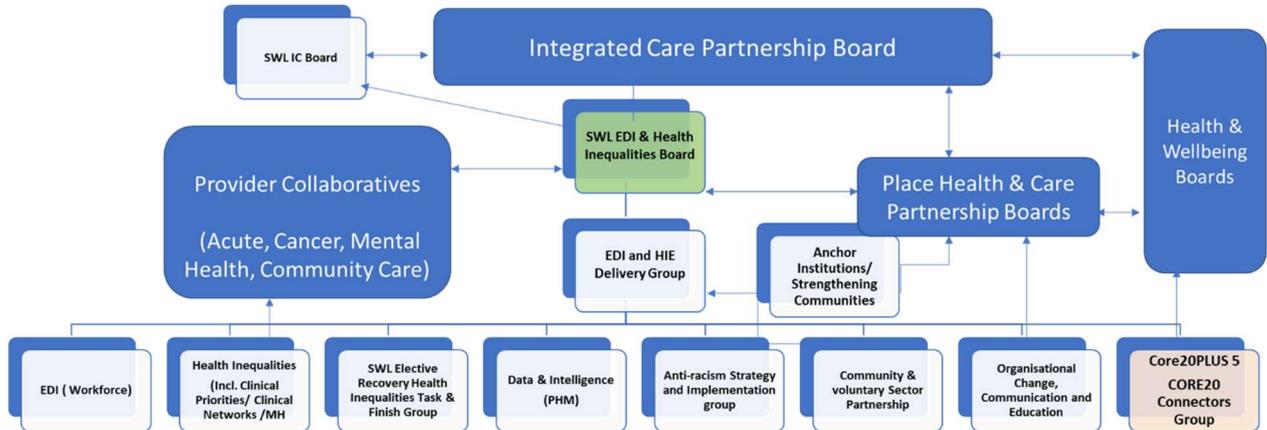
The Board meets bi-monthly, and the Delivery Group meets monthly and brings together representatives from, quality, human resources, commissioning, providers, primary care, Public Health, VSCE, organisational development, patient and public involvement, to provide leadership, oversight and role modelling to the equality's agenda, ensuring that there are clear objectives, progress on, and evaluation of all related plans.

The Board has agreed an annual workplan to ensure all statutory duties and reporting are undertaken and that the ICB is embedding a culture of reducing health inequalities and promoting equality throughout all of its functions.

South West London's HIE and EDI governance structure is below:

## SWL Equalities, Health Inequalities /Diversity and Inclusion (EDI) Governance

- A **SWL EDI Health Inequalities Committee** will oversee the key workstreams which will support work to reduce health inequalities, improve EDI and embed community-centred approaches to health and wellbeing.
- The SWL EDI and Health Inequalities Delivery Group **will steer delivery for Place partnerships to deliver programmes of work**



## South West London ICB Equality Impact Assessments

To commission high quality inclusive health services, we aim to ensure that protected groups have the same access, experiences and outcomes as the general population. In this regard, we recognise that there are many things that influence this that we may not have complete control over, but we are committed to working with the community and partners to influence our decisions. We aim to reduce inequalities in health outcomes and experience between patient groups by planning our strategic aims and working in partnership with Local Authorities and others to address the needs of protected groups as shown in the Joint Strategic Needs Assessment (JSNA).

When the ICB introduces any new policy, service, strategy or makes changes to any existing service, we are required to look at how it would impact someone with a protected characteristic. We call this an Equality Impact Assessment (EIA). The EIA provides a framework for undertaking and completion of impact assessments. This enables the EIA to show 'due regard' to the Public Sector Equality Duty and ensures that consideration is given prior to any decisions made by the ICB Board or the Executive Team that may impact on equality. The ICB continues to embed EIAs into the commissioning cycle and has this year reviewed our guidelines and processes to support development of a robust and supportive platform from which to take forward our assessments. We also have a policy oversight group for the HR policy's that include trade union reps.

## South West London ICB Equality Objectives 22/23 to 26/27

Theme	Objective
<b>Recruitment</b>	Improve the WRES indicators in relation to recruitment
	Diverse panels for band 8b recruitment
<b>Development</b>	Development of a learning and development scrutiny panel
	Develop robust process around funding for development opportunities
	Development of sponsorship mentoring programme
<b>Education</b>	Develop and deliver extensive conscious and unconscious bias and cultural awareness programmes delivered across the employee journey
	Normalise conversations around Race
	Allyship awareness
<b>Culture &amp; Leadership</b>	Compassionate and Inclusive leadership programme
	Ensuring our policies and processes are not creating systematic exclusion or discrimination against groups of people
<b>Tackling Health Inequalities</b>	Develop an anti-racism framework
	Implementing outcomes for our CYP and adults CORE20PLUS population and improving the outcomes across the five clinical areas.
	Develop a system wide health equity outcomes dashboard
	Improving outcomes for those living with mental health conditions, learning disabilities and autism.
	Improving data coding of protected characteristics in South West London

## Equality Delivery System (EDS) 2022

In February 2023, South West London published the NHS Equality Delivery System 2022 (EDS 2022). This tool is used to help NHS organisations, in partnership with local stakeholders, review and improve their performance for people with characteristics protected by the Equality Act 2010, and to support them in meeting the Public Sector Equality Duty (PSED). Currently our organisation is rated as 'Developing'. We focused on the following domains:

Domain 1: Patients and service users - Achieving

- Core20PLUS5 service – Maternity
- Small and non-complex service – Sutton Mental Health Crisis Café pilot

Domain 2: Workforce Health and wellbeing - Developing

Domain 3: Inclusive Leadership - Developing

Details of the EDS report can be found via this link:

<https://www.southwestlondon.icb.nhs.uk/publications/equality-delivery-system-2022/>

## Staff composition in South West London ICB

A 2022 NHS Staff Survey was conducted with a survey response of 67%. Of those who responded to the survey:

71.6% are female, 23.9% Male and 4.5% prefer not to say

96.2% are the same gender identity as their sex assigned to at birth

An age breakdown is as follows:

- 6% aged 21 to 30
- 21.7% aged 31-40
- 32.7% aged 41-50
- 38% aged 51-65
- 1.5% aged 66+

The ethnicity breakdown is as follows:

- 12.6% Asian / Asian British
- 0.8% Arab
- 18% Black / African / Caribbean / Black British
- 3.8% Mixed / Multiple ethnic background
- 62.3% White
- 1.5% Other

For sexual orientation:

- 1.5% Bisexual
- 3% Gay or lesbian
- 88.9% Heterosexual
- 6.6% Prefer not to say

For religion:

- 0.5% Buddhist
- 46.3% - Christian
- 4.5% Hindu
- 0.5% - Jewish
- 4.8% - Muslim
- 2.8% - Sikh
- 31.2% - No religion
- 0.8% - Other religion
- 8.6% - Prefer not to say

## NHS Workforce Race Equality Standard (WRES)

The NHS Workforce Race Equality Standard (WRES) is used across the NHS to narrow the gap between the treatment of ethnic minority and white staff through collection, analysis and acting on specific workforce data. In addition, the WRES aims to improve diversity of leadership and the experience of staff from ethnic minorities within an organization.

There are nine indicators, all of which draw a direct comparison between white and ethnic minority staff experience. Four focus on workforce data, four are based on data from the national NHS Staff Survey questions, and one indicator considers whether the governing body membership is broadly representative of the overall workforce.

This is the third year that the ICB's performance against the WRES indicators are published. This data allows us to take action to improve against these indicators.

---

### *Recruitment*

---

**Recruitment:** White staff are 1.1 times more likely to be appointed compared to the 20/21 figure of 1.3 and 1.8 in 19/20 This is a significant improvement from last year. The ICB is now below the London average of 1.5. This area has seen a reduction due to all the work that has taken place to ensure our recruitment panels for roles at band 8 and above have an inclusion champion 95% of the panels over band 8b have an inclusion champion.

---

### *Disciplinary Processes*

---

**Disciplinary Processes:** staff from ethnic minorities are now 0.6 more likely to undergo a disciplinary process than white staff. Any figure below 1 is considered as no difference. This is a significant improvement from the previous two year's date of 1.59. In the last year, as an ICB we have focused on resolution where possible as opposed to the disciplinary process.

---

### *Percentage of staff experiencing harassment and bullying/abuse from patients, relatives or the public in the last 12 months:*

---

Based on the NHS 2022 Staff survey, 12.0% of White staff reported experiencing harassment and bullying and 11.6% of all other ethnic groups report experiencing harassment and bullying. Important to note this has decreased from the previous year's figures, but still above the national average.

---

### *Percentage of staff experiencing harassment and bullying/abuse from other staff in the last 12 months:*

---

Based on the NHS 2022 Staff survey, 16.1% of White staff report experiencing harassment and bullying (above average) and 29.5% of all other ethnic groups report experiencing harassment and bullying this figure has improved from the 2021 staff survey data.

---

*Percentage of staff believing the organization provides equal opportunities for career progression and promotion*

---

Based on the NHS 2022 Staff survey, 52.3% of White staff in the ICB believe the organisation provides equal opportunities for career progression and promotion (below average) compared to 29.7% of all other ethnic groups (below average). Important to note this percentage has increased from the 2021 NHS Staff survey results.

---

*Percentage of staff experiencing discrimination at work from managers/team leader or other colleagues in the last 12 months*

---

Based on the NHS 2022 Staff survey, 8.7% of White staff experienced discrimination at work from managers (above average) compared to 15% of all other ethnic groups of all other ethnic groups. This is an area that we will continue to focus on.

We continue to deliver our action plan to address our performance against the WRES indicators. We hold monthly listening events to give staff the opportunity to be part of the work and to feed into the Inclusion and Belonging work stream. The action plan focuses on the key themes which form part of the South West London ICB equality objectives (on page 6), and links to the NHS People Plan and the Race Plan for London, the ICB works closely with the London Equalities team to embedded key interventions across the organisation.

- Culture and leadership
- Development
- Education
- Recruitment

We have seen improvements on the WRES indicators particularly the process indicators such as recruitment and disciplinary, there is still more work to do, particularly on the staff survey indicators. Achieving real change in equality, diversity and inclusion takes time and effort and we are committed to the development of this work at the ICB and continue to regularly engage with staff. And we will continue to double on efforts to continue to drive change and hold ourselves accountable.

## Health inequalities in South West London

### Our commitment to reducing health inequalities

Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. These include how long people are likely to live, the health conditions they may experience and the care that is available to them. The conditions in which we are born, grow, live, work and age can impact our health and wellbeing. These are sometimes referred to as wider determinants of health.

Tackling health inequalities is a core commitment of South West London Integrated Care Board and this includes how we address inequalities through a lens of poverty, anti-racism, adversity trauma and resilience in line with our values and our moral duty to deliver social justice.

We are proud of the existing work that has taken place across the South West London boroughs to tackle health inequalities. We want to build on and scale up the work that has been delivered at system, Place and neighbourhood levels to continue to reduce health inequalities especially at a time where more people continue to be impacted by the current cost of living crisis and an increasing fuel and food poverty crisis.

We are working with local people, the voluntary care sector, public health, and social care partners in each of our six boroughs on transformation projects and programmes to improve outcomes for people who are more likely to experience poorer health outcomes, with an aim to promote equity as a golden thread. As a system, we use the 'Core20PLUS5' approach to target populations of most need, focusing on key clinical areas to reduce inequalities

### How are we responding to inequalities?

We will focus on 5 'sweet spots'



**Our Health Inequalities priorities for South West London**

We want to have a fair and equitable South West London for local communities when it comes to health and care. Health inequalities is everyone's business, and one of the ways in which we have shown a commitment to tackling, and informs the South West London ICB equality objectives (on page 6):

- Delivery of the South West London Health Inequalities strategic delivery plan
- Delivery of an antiracism framework and action plan
- Implementing outcomes for our CYP and adults CORE20 population and improving the outcomes across the five clinical areas.
- Development of an ICS wide equity outcomes dashboard
- Improving outcomes for those living with mental health conditions, learning disabilities and autism.
- Improving data coding of protected characteristics
- Building Anchor Institutions and Strengthening Communities
- Levelling up initiatives to reduce poverty deprivation
- Improve rates of our Black and ethnic minority staff in senior leadership positions
- Elective recovery inequalities focusing on waiting lists

## Activities in 2022/23

### Understanding local need

South West London is diverse in its population and health needs across the six boroughs. However, there are differences for residents across South West London when it comes to access, experience and outcomes of health and care services and treatments.

Some population groups are at greater risk of long-term health conditions or are at higher risk of death of certain health conditions due to social and economic factors like where they live, their income status, race, ethnicity, disability and sexual orientation. These health inequalities have come to the fore since the start of the Covid-19 pandemic and are at risk of worsening with the cost-of-living crisis. To understand the current health inequalities of South West London, our Business Intelligence team developed infographics, aligning the Core20PLUS5 approach.

[Core20PLUS5](#) is an NHS approach defined as:

- **Core20** – looking at the 20% most deprived population in South West London as the core population most impacted by health inequalities
- **PLUS** – other marginalised population groups that are most impacted by health inequalities e.g., ethnic minority communities, learning disability, inclusion health groups
- **5** – Five clinical areas of focus for [adults](#) and [children and young people](#)

Clinical areas for adults	Clinical areas for children and young people
<ul style="list-style-type: none"> <li>• Maternity</li> <li>• Severe Mental Illness</li> <li>• Chronic respiratory disease</li> <li>• Early cancer diagnosis</li> <li>• Hypertension case finding and lipid optimal management</li> </ul>	<ul style="list-style-type: none"> <li>• Asthma</li> <li>• Diabetes</li> <li>• Epilepsy</li> <li>• Oral health</li> <li>• Mental health</li> </ul>

The five clinical areas of focus which require accelerated improvement are detailed as follows:

#### **Adults**

- **Maternity:** Ensuring continuity of care for women from Black, Asian and minority ethnic communities and from the most deprived groups. This model of care requires appropriate staffing levels to be implemented safely.
- **Severe mental illness (SMI):** Ensuring annual health checks for 60% of those living with SMI (bringing SMI in line with the success seen in learning disabilities).
- **Chronic respiratory disease:** A clear focus on Chronic Obstructive Pulmonary Disease (COPD) driving up uptake of COVID, flu and pneumonia vaccines to reduce infective exacerbations and emergency hospital admissions due to those exacerbations.
- **Early cancer diagnosis:** 75% of cases diagnosed at stage 1 or 2 by 2028.
- **Hypertension case-finding and optimal management and lipid optimal management:** To allow for interventions to optimise blood pressure and minimise the risk of myocardial infarction and stroke.

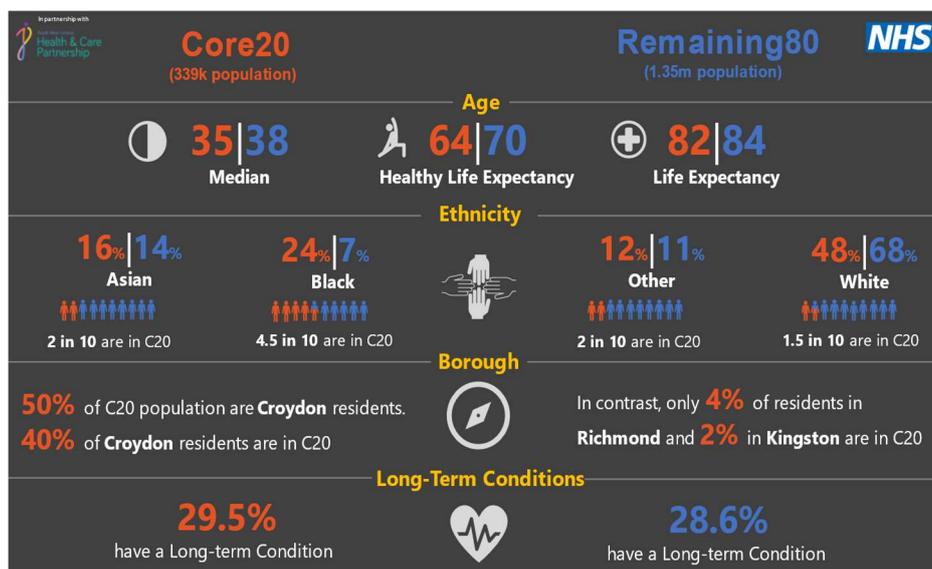
## Children and Young People

- **Asthma:** address over reliance on reliver medications and decrease the number of asthma attacks.
- **Diabetes:** Increase access to Realtime Continuous Glucose Monitors and insulin pumps in the most deprived quintiles and from ethnic minority backgrounds and increase proportion of children and young people with Type 2 diabetes receiving annual checks.
- **Epilepsy:** Increase access to epilepsy specialist nurses and ensure access in the first year of care for those with a learning disability or autism.
- **Oral health:** address the backlog for tooth extractions in hospital for under 10s.
- **Mental health:** Improve access rates to children and young people’s mental health services for 0–17-year-olds for certain ethnic groups, age, gender and deprivation.

In addition to Core20PLUS5, our work also aligns with the [NHS five priority areas](#), as well as local Health and Care Plans and local Health and Wellbeing Strategies (see Appendix for links to these local plans).

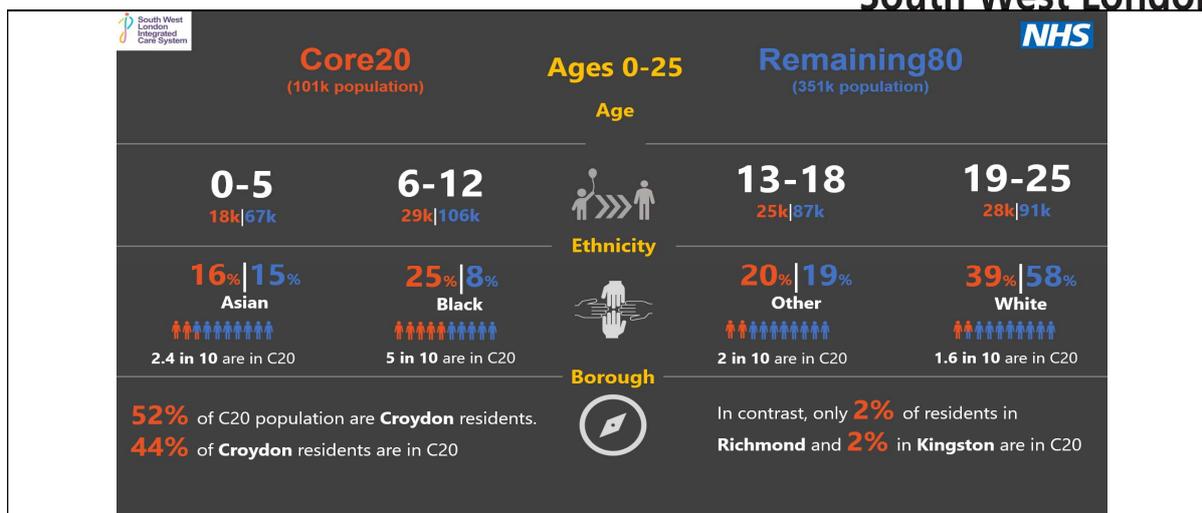
Approx. 340,000 residents are of the 20% most deprived, also referred to as the ‘Core20’ population. In South West London, 50% of the Core20 population live in Croydon. The infographic below shows the difference between the Core20 population and the remaining population for life expectancy, disproportionate representation of people from minority ethnic backgrounds, boroughs and having a diagnosed long-term condition.

**Figure 1 – South West London population**



In South West London, there are approximately 450,000 children and young people aged 0-25 years, of which 101,000 live in the ‘Core20’ population. The infographic below shows similar inequalities with 52% of children and young people who are Core20 living in Croydon and are disproportionately represented by those from minority ethnic backgrounds.

**Figure 2 – Children and Young People South West London population (aged 0-25yrs)**



In addition to the infographics, the Quality Team conducted a rapid mapping exercise of local joint strategic needs assessments, health and wellbeing strategies and health and care plans to assess common priorities, using the life course approach Start Well → Live Well → Age Well.

**Figure 3 – Common health and care priorities across South West London**

The common priorities across all six boroughs in South West London are as follows:



The local data helped inform where we put our efforts and focus on improving health inequalities projects across the system, including how we have allocated NHS England Health Inequalities Funding in a fair and equitable way.

### Co-producing with our Core20 Communities

#### Insights from South West London residents

South West London Communications and Engagement Team conducted a survey with the Quality Team from July 2022 to December 2022 to capture feedback from South West

London residents, particularly in the Core20 areas to understand their health and care priorities. South West London received 630 responses, with key findings as follows:

- We asked people to choose one thing that's their biggest priority. The highest responses were physical health (24%) and family health (23%). The lowest responses were spending time in nature (1%), housing (2%), taking exercise (3%) and feeling safe (3%)
- We asked what people would do if they could easily improve their health starting tomorrow. The highest responses were change eating habits (31%), take more gentle exercise (26%) and spend more time outdoors/in nature (24%). The lowest responses were work less (6%), volunteering (6%), join an exercise class (8%) and get counselling (8%)
- We asked about concerns that get in the way of maintaining health. The biggest concerns were air quality/pollution (30%) debts/finances (29%) and being able to afford gas/electric (26%)

In addition to this survey, we have received insights from residents through community connectors who are supporting through health and wellbeing events and activities in Core20 areas, focusing on the five clinical areas of Core20PLUS5. Examples of stories and case studies are provided below.

---

### *Elective inequalities: Recovery and waiting lists*

---

In South West London, we are committed to restoring services inclusively including elective recovery in a fair and equitable way. To help inform this, the Business Intelligence Team conducted a data deep dive on patients on the waiting list looking at: geography of patients on the waiting, demographics (age, ethnicity, deprivation and gender), comparing the Core20 population with the remaining 80% population, and specific clinical areas.

This work was presented to our Health Inequalities and Equality, Diversity and Inclusion Board, with a recommendation to work with the NHS Acute Providers Collaborative and Clinical Networks to further understand the findings and consider improvement actions. This work is aligned to the Population Health Management workstream.

---

### *Anti-racism framework*

---

In South West London, we oppose all forms of racism and will actively work to dismantle racist and discriminatory policies and practices across all of health and care. We want to make anti-racism everyone's business. We want to be an anti-racist system by developing an anti-racism framework, focusing on the strategic commitments:

- **Leadership commitment:** to being anti-racist health and care systems and organisations, with Board representation, strategy development and anti-racist approach to all policies.
- **Commitment to our ethnic minority workforce:** to support our ethnic minority staff and create enabling workplaces.

- **Commitment to target health equity:** to prioritise and deliver evidence informed, culturally competent interventions to narrow the gap, by reducing inequities people from ethnic minorities face in access, uptake, experiences and outcomes of our health and care services.
- **Commitment to becoming an anchor institution:** to leverage our positions as anchor institutions to tackle the wider determinants of inequality.
- **Commitment to our local communities:** to work with our communities to amplify their voices, in the decision, design and delivery of services, to rebuild trust and confidence.

We have set up a South West London anti-racism strategy and implementation group represented by health inequalities and/or EDI partner from the NHS, local authorities and VCSEs. The group will provide strategic direction and inform the development of the anti-racism framework. We will use data analytics to help inform racial equity in the workplace and contribute to the recommendations and delivery of the anti-racism framework

---

### *Investment, innovation and evidence of improvement*

---

#### **Health Inequalities Fund 2022/23**

South West London received £4.3 million of additional health inequalities funding for 22/23. The additional funding is to help systems to maintain work to reduce health inequalities, including the NHS Five priority actions and Core20PLUS5, while achieving financial balance and elective recovery.

A wide variety of strong and diverse projects and programmes to tackle health inequalities were received, and that is testament to the system's appetite and commitment to tackle health inequalities for their local population. Some include:

<b>Core20 population</b>	<ul style="list-style-type: none"> <li>• Programmes to tackle deprivation and poverty focused on adults and Children and Young People</li> </ul>
<b>PLUS groups</b>	<ul style="list-style-type: none"> <li>• Programmes focused to target Black, Asian and other minority ethnic communities</li> <li>• Physical disabilities</li> <li>• Learning disabilities and autism</li> <li>• Homeless and rough sleeping communities</li> <li>• Refugee and asylum seekers</li> <li>• Care leavers</li> </ul>
<b>5 clinical areas</b>	<ul style="list-style-type: none"> <li>• Significant focus on mental health, including preventative approaches to detention and restrictive practices particularly amongst Black and ethnic minority people, people with a learning disability and autism.</li> <li>• Other programmes focused on Maternity and Cancer</li> <li>• General themes around Prevention and managing Long Term Conditions, including Hypertension and lipid optimal management, and Respiratory</li> </ul>
<b>Other areas</b>	<ul style="list-style-type: none"> <li>• Fuel poverty</li> <li>• Sickle cell disease</li> <li>• Women's health</li> </ul>

	<ul style="list-style-type: none"> <li>• Support for Carers</li> <li>• Social prescribing</li> </ul>
<b>NHS five priority actions</b>	<ul style="list-style-type: none"> <li>• Digital inclusion</li> <li>• Accelerating preventative programmes that proactively engage those at greatest risk of poor health outcomes (e.g., healthy weight, physical activity)</li> </ul>

Details of the Health Inequalities Fund process in South West London can be found in the October 2022 ICP Board report (pages 40-50)

<https://www.southwestlondonics.org.uk/content/uploads/2022/09/South-West-London-Integrate-Care-Partnership-meeting-in-public-pack-October-2022.pdf>

---

### *South West London Health Equity Dashboard*

---

South West London ICB are developing a dashboard of outcome measures for health inequalities. The measures were mapped using the life course approach - Start Well, Live Well and Age Well. With approval from the Health Inequalities and EDI Board.

In conclusion, South West London continues to demonstrate its commitments across organisations, places, collaboratives, neighbourhoods, and the system to tackle health inequalities and wider determinants of health, with the aim to **promote equity as a golden thread**.

---

### *Outcomes for Core20PLUS5 (adults)*

---

#### **Cancer**

At South West London, our aim is to reach the target of 75% of cases diagnosed at stage 1 or 2 by 2028. Work is underway to increase awareness, screening coverage and uptake, particularly in the Core20 areas and PLUS groups. The South West London ICB Cancer Team with the RMP Alliance have been working with partners across the system in the following ways:

- Croydon's Black and South Asian Cancer awareness project: Croydon BME forum (VCSE delivery partner of the Core20PLUS Connectors programme) ran a full-day cancer conference in Dec 'Can you C me': <https://www.canyoucme.org/>
- Asian Resource Centre Croydon (VCSE delivery partner of the Core20PLUS Connectors programme) produced video promoting cancer awareness in their community. Both groups continue to run local community-based events and develop localised literature: <https://youtu.be/lve4hSKBPZw>
- Wandsworth Community Empowerment Network community champions are delivering targeted awareness raising of prostate cancer in Merton and Wandsworth
- Engaging with practices with the lowest screening performing to develop improvement action plans
- South West London Bowel Screening Service continuing to deliver community-based events aimed at increasing awareness of the benefits of bowel screening
- Targeted Lung Health Check programme being rolled out in wards with highest smoking levels
- High level data population segmentation was conducted, focusing on deprivation, to increase targeting of comms and engagement interventions.

- Example of a South West London community health fair in Mitcham - <https://www.southwestlondonics.org.uk/local-stories/mitcham-community-health-fair/>

### Chronic respiratory disease

South West London ICB are committed to improving uptake of COVID, flu and pneumonia vaccines, particularly reaching underserved and health inclusion groups.

The Vaccination team developed a calendar of pop-up events in collaboration with ICB borough leads and local authority colleagues. Pop up events were held in areas of low provision, low uptake, areas of high deprivation (Core20) and with specific community groups such as those living in sheltered accommodation, traveller communities, people living with mental health conditions and Learning Disabilities. Over 100 events were held by the roving team, with the majority taking place for Core20PLUS communities.

The team has made good use of our ICB dashboards (Health Insights) and Foundry data to pinpoint areas of low uptake within significant cohorts. The analysis drills down to both Primary Care Network level and Ward level. We have been able to use this information to both inform our pop-up locations and targeted communications into specific geographical areas and communities.

In addition to the work by the vaccination team, our Core20PLUS Connectors have raised awareness on vaccinations in these Core20 areas. Examples of approaches are detailed below.

Finally, the Long Term Conditions team are working with the Health Innovation Network (through NHS funding for the Innovation in Health Inequalities Programme) to improve access to Asthma Biologics therapies and identification of patients with severe asthma and improve access to assured primary care diagnostics. The project will focus on Croydon, given the high population of Core20 residents and location of diagnostic hubs.

### Maternity

South West London are committed to ensuring Continuity of Care as a key Core20PLUS5 metric, particularly amongst women of Black, Asian and minority ethnic backgrounds. To help inform this outcome, the ICB Maternity Team have been developing a South West London Equity and Equality Action Plan in partnership with the Local Maternity and Neonatal System:

- Croydon Health Services NHS Trust
- Epsom and St Helier University Hospitals NHS Trust
- Kingston Hospital NHS Foundation Trust
- St George's University Hospitals NHS Foundation Trust
- Maternity voices partnerships (MVP)
- Local authorities
- Voluntary and community sector organisations.

The enabling policies and reviews that informed this action plan include the MBRACE-UK report, The Donna Ockendon review, NHS RHO rapid evidence review and Birthrights report recommendations. The Maternity Team used both national and local indicators to determine a baseline and improvement areas which helped inform the plan (including the Core20PLUS5 metric - Continuity of Care) and will continue to work with the Business Intelligence Team to develop a local dashboard to track progress of these measures, and the ongoing delivery of the plan.

A series of engagement activities and stakeholder sessions have taken place, with the plan to published on the South West London ICB website in 2023. Activities from the action plan will also help inform the wider South West London Maternity response to the Kirkup report.

The Maternity Team contributed to the Equality Delivery System 2022 report as the chosen Core20PLUS5 commissioned service. Evidence that was collated and scored showed that the ICB is 'Achieving'.

In addition to this work, the Maternity Team are working with the Health Innovation Network (through NHS funding for the Innovation in Health Inequalities Programme) to improve the coordinated care and clinical management of Black, Asian and minority ethnic women who are at risk of pre-eclampsia by increasing engagement with services, increased self-efficacy via increased use of Placental Growth Factor testing and home blood pressure monitoring devices. The project will focus on Croydon as it has the highest percentage of Core20 residents in South West London.

### **Severe Mental Illness (SMI)**

In South West London, we aim to ensure that annual health checks are completed for 60% of those living with Severe Mental Illness. The ICB Mental Health Transformation Team have devised an approach to tackling health inequalities for those with SMI through the following ways:

- Exploring Population Health Management approaches with Primary Care Networks to focus segmenting data for inequalities and risk stratification.
- Delivering the remote monitoring kit to Primary Care Networks to support delivery of the health checks in a person's home or within the Community.
- Engaging with communities to determine what barriers are preventing them from accessing the health checks and working with the Voluntary Community Sector on outreach to target marginalised communities.

### **Hypertension case finding and lipid management**

South West London Long Term Conditions and Prevention Team are working with partners to optimise blood pressure and lipid management. Activities to help inform this include:

- Expanding the number of Community Pharmacies providing Blood Pressure Checks and improving pathways
- Blood Pressure Monitoring at home
- Community Empowerment outreach using asset-based community development methodology building relationships with those communities who are experiencing poorer health outcomes, access and experience of health and care, building capacity by training-up local trusted people to deliver health and wellness checks, co-produce prevention programmes, have health coaching conversations and sign-post people to local services

In 2023/24 we will continue with the activities for Core20PLUS5 for adults and will work with system partners to consider our approach for Children and Young People's Core20PLUS5, building on the development of the South West London infographics with the BI Team.

---

### *Core20PLUS Connectors programme*

---

The Core20PLUS Connectors programme is an NHS national programme which develops and support community-based roles to support the CORE20PLUS5 approach, focusing on barriers and enablers to reduce health inequalities and connect people with decision makers. This includes taking local interventions in excluded communities, with focus on the five clinical areas and other locally needs.

The Connectors programme builds on and relates to many other community-based initiatives and extensive experience of largely volunteer roles that impact on health improvement and inequalities, including Community Champions, Vaccine champions, Link Workers, Peer Advocates, and the extensive network of (salaried) Social Prescribing link workers. South West London is part of the Wave 1 cohort, and our delivery model is based on the asset-based community development

(ABCD) methodology. We currently have over 30 connectors across the system and are investing health inequalities funding for additional connectors.

Below are summaries of work that is taking place in each borough led by local Voluntary Sector organisations.

### Croydon

Croydon has three Voluntary Sector delivery partners for the Core20PLUS5 Programme, all of which have developed and delivered health and wellbeing events and activities in the Core20 areas, particularly in Thornton Heath, Fairfield and Addington.

Croydon Voluntary Action are our host organisation on behalf of all Core20PLUS5 Voluntary Sector delivery partners in South West London. The organisation delivers Asset Based Community Development training for Connectors and supporting local Croydon neighbours by creating Community Champions.

Asian Resource Centre for Croydon have been hosting health awareness events, particularly amongst Asian communities. These events have involved health checks for hypertension, diabetes and lipid management. In addition to this, the organisation has worked with Royal Marsden to increase cancer awareness with the Man Van initiative.

Similar to Asian Resource Centre for Croydon, the Croydon BME Forum have been supporting communities particularly from Black ethnic backgrounds through [health awareness events](#) to raise awareness on cancer, long term conditions including diabetes and promote health and wellbeing.

### Kingston

Kingston Voluntary Action as lead delivery partner of the Core20PLUS Connectors programme in Kingston have been upskilling health coaches and organising health and wellbeing sessions and activities in Core20 areas: Beverly, Berrylands and Cambridge Estate. They have been engaging with minoritized communities, including the Korean Community and Islamic Resource Centre.

Clinical areas of focus include respiratory – encouraging uptake of Covid and Flu vaccinations, and mental health, cancer, hypertension, diabetes and lipid management. During the winter months, there has also been a focus on cost-of-living impact amongst residents.

### Merton

Merton Connected as lead delivery partner of the Core20PLUS Connectors programme in Merton have been leading on meaningful engagement with minority ethnic groups and grassroots community organisations, particularly in East Merton including Cricket Green, Pollards Hill, Lavender Fields, Graveney, and Figges Marsh.

Their approach focuses on clinical areas hypertension case-finding and lipid optimal management, mental health and diabetes, using culturally sensitive health promotion interventions, good representation of black and minority ethnic communities among staff, and trust-building dialogue with service users.

### Richmond

Ruils as lead delivery partner of the Core20PLUS Connectors programme in Richmond have identified three Core20PLUS localities as noted above in the Borough of Richmond Upon Thames where health inequalities are most pronounced, particularly in Heathfield, Whitton, Hampton North and Ham & Petersham.

Their approach is to seek to identify, advise and support residents living with these health inequalities, with a focus on the following groups: Those living with hypertension, diabetes, depression, impacted by the cost-of-living crisis and the isolated and lonely. Their approach is through health and wellbeing events, fairs, outreach work, with an aim to build a deeper engagement, trust and an understanding of the barriers local residents are facing and how best to signpost them to solutions.

### Sutton

Healthwatch Sutton with NHS Sutton Place as lead delivery partner of the Core20PLUS Connectors programme developed a Sutton Engagement Place approach to ensure trusted relationships are built with the communities over a period of time, particularly in Central Sutton, Wallington and St Helier (Housing estates and homeless).

This includes mapping of local assets in each of the deprived areas in order to connect with key people to start forming solid relationships and trust. Working in collaboration with Sutton key partners such as Sutton Housing Partnership, local Councillors, Sutton Council, Public Health, and Voluntary Sector, to start a conversation with residents in deprived wards and ensure a wide system approach to tackling their needs. Their approach focuses on clinical areas hypertension case-finding and lipid optimal management, respiratory, mental health, cancer and maternity.

Examples of work they have done with estates includes a collaborate approach with residents of Shanklin Village Estate, building trust and working with the community to co-produce engagement sessions to promote healthier lifestyles. This was to help reduce loneliness by connecting residents through these engagement sessions, working in collaboration with charities and organisations such as Sutton Housing Partnership to enable a broad range of knowledge and expertise to be shared with Shanklin residents.

This resulted in weekly and monthly activities including a diet and healthy food club, chair exercises and a monthly topic of the estate's choice.

### Wandsworth

Wandsworth Care Alliance as lead delivery partner of the Core20PLUS Connectors programme in Wandsworth are running a grants programme, which offers grants community groups to recruit community health champions. The grants will enable voluntary and community groups to run activities which support a healthy lifestyle or address some of the barriers that people experiencing health inequalities associated with chronic obstructive pulmonary disease (COPD), cardiovascular disease (CVD) and those underrepresented within the COVID vaccination programme.

The funding builds on activities groups already do which are relevant to the programme's themes or can be used to start something new, and are targeted in Core20 areas, as well as Black, Asian and minority ethnic groups, and other marginalised communities.

Activities include weekly healthy eating programme, informal conversations through weekly drop-in coffee chats surrounding health topics, conversations at group workshops, walks and online workshops. Activities that are planned include equipping/training champions with awareness of COPD and cardiovascular disease, facilitating seminars/conversations in community health clinics, and health events which will provide health checks, signposting to services/advice and a range of physical exercise classes which will provide "to-do-at home" exercises.



**South West London**

## **Looking forward to 2023/24**

We will continue to work with our wider partners as part of the Integrated Care System and Integrated Care Partnership to commit to our equality objectives and priorities for Health Inequalities and Equality, Diversity and Inclusion, working closely with our workforce and communities.