Programme Manager	Tom Barrett	**SRO**	Andrew Eyres	**Period**	November 2020
Vision	**To improve health and wellbeing and reduce inequality for people in Lambeth**				
Programme Description	Lambeth Together is a partnership of NHS, Council and voluntary sector organisations working together with local people and stakeholders to help our residents maintain their health and wellbeing and provide more joined up local health and care. This is a programme for the delivery of a range of delivery alliances (Living Well Network Alliance, Neighbourhood and Wellbeing Delivery Alliance, Children and Young People, and Complex Personalised Support (TBC)) and an enabling programme consisting of a range of enabling, culture and ways of working elements.				

Programme status

↑	Better RAG than previous period	G	No deviation, plan is on track
→	Same RAG as previous period	A	Deviation is likely. Mitigation is being planned to remain on track
↓	Worse RAG than previous period	R	Deviation has occurred. Mitigation not planned or insufficient.

Programme/ Alliance	Overall RAG		DoT	Comments
	Last Period	**This Period**	↑→↓	*Reasons for Amber or Red status*
Programme management	N/A	A		Programme management of the Lambeth Together has recommenced and work is underway to align the programme's work with the borough recovery plan. The Lambeth Together Executive group has recommenced combined with the Covid Borough Response Group. Focus in the next period to develop the approach to equalities, enabling factors and benefits at a programme-level.
Living Well Network	A	A	→	The alliance is in the process of agreeing its business plan until March 2022 to be signed off in December 2020. This includes the relevant parts of the recovery plan, service design and physical moves. Services remain open and contingency plans continue to be deployed in line with covid regulations. The risk share agreement will also be considered at ALT in December. Alliance is part of SLaM bid for mental health transformation fund, Lambeth's share is expected to be approx. £1m for '21-'22. Key challenges in the alliance relate to maintaining support through the covid-period including staff numbers, service levels and contingency plans.
Neighbourhood and Wellbeing	A	A	→	The Alliance has re-focused and built on original objectives of delivery of services through neighbourhood communities to include implementation of the Borough Covid-19 recovery plan and supporting the response to COVID through winter 2020. The structure for leadership and delivery has been significantly revised in order to improve pace of delivery and breadth of engagement with stakeholders. The streamlined decision making and leadership structure includes the senior leadership group and six workstreams that will provide the focus for delivery. These workstreams will have a broad, inclusive membership with subject level interest or expertise - there will be a responsibility for all partners in the alliance and members of the governance structures to deliver on these priorities.. Previous delivery group will be disbanded.
Children and Young People	G	G	→	Establishment of the Children and Young People's integrated commissioning and delivery alliance board and associated workstreams. We are in the formation stages of this work at present with some of the workstreams further along than others.
Complex Personalised Support	R	R	→	Previous activity developing the complex personalised support alliance was halted during the covid period. Further work is required to identify next steps for the alliance including alignment with the appropriate part of the Borough Recovery Plan
Culture and Ways of Working	A	A	→	Communications and engagement working group has reformed and is actively contributing to engagement on the Borough Recovery Plan. Organisational development programme of activity is to be developed

Programme activity, milestones and deliverables 1/2

Programme	Milestones and deliverables achieved this period	Milestones not completed	Milestones and deliverables for next period
Programme management	• LT Executive (combined CBRG/Lambeth Together Executive Leadership Group) terms of reference developed and meetings commenced • LT Strategic Boards held (September and October) • Establish monthly programme lead liaison catch-ups	• Programme alignment with Borough Recovery Plan	• Strategic Board – 18 November; LT Executive meetings • Programme alignment with Borough Recovery Plan • Development of programme-wide approach to equalities and health inequalities, enabling outcomes and benefits
Living Well Network Alliance	• Throughout the month of October there have been a number of Black History Month celebrations on the inpatient wards and the Living Well Centre (LWC) joined in weekly sessions led by the LIT Team. • On 27th October the Slam Chair Norman Lamb had a virtual visit with the LIT virtually via Microsoft Team. • Alliance Director and Lambeth Director continued Leadership Visits to LWC and inpatient teams. • Innovation Unit agreed funding needed to restart the Alliance Workforce Development Programme (November 20-June 21). • Alliance progress report to be published imminently incl. reviewing impact of how the alliance is measured		Developing recovery plan which will be incorporated into an 18 month Business Plan incl. • Taking forward key service developments including co-producing a primary care/neighbourhood mental health support offer (Staying Well) and a new Personality Disorder pathway • Co-designing a culturally appropriate model of mental health peers support • Continuing the review and reshape of community supported living and vocational support • Review the Alliance's risk share arrangements

Children and Young People	• Integrated Commissioning and Delivery Alliance board agreed on 3x workstreams of focus:
	  • Emotional health and wellbeing
	  • Early Years
	  • Community Health
	• TORs are being finalised for all 4 (board and 3x workstreams)
	• Early Years group will meet for first time in November
	• Community Health chair will be agreed in November
	• Emotional health and wellbeing needs assessment work, which will inform the delivery, has commenced.
			• Finalise establishment of all workstreams, agree TORs and implement working group meetings.
			
			• Establish regular board rhythm and reporting – to be worked up with LT programme team.

Programme activity, milestones and deliverables 2/2

Programme	Milestones and deliverables achieved this period	Milestones not completed	Milestones and deliverables for next period

Neighbourhood and Wellbeing Delivery Alliance	• Six priority areas have been identified (EOLC, Care Homes, Chronic Pain, Prevention, Managing those at most risk, Outpatients)
	• Seven building principles have been agreed (focus for all workstreams)
	• The governance structure has been established for NWDA; streamlining operations.
	• Workstream leads have been identified for EOLC, Care Homes and Chronic Pain
	• EOLC kick off meeting held
	• Processes for engagement and comms initiated
		• SRO's, membership of all groups and leads for other workstreams to be completed in November.
		• Care Homes – draft PID/kick off meeting to be created/arranged
		• Ensure future charity & philanthropic funding is progressed -hold discussions with council and CCG.
		• Consideration of links to the wider Lambeth together partners & programmes to leverage full opportunities of Alliance
		• Review of current Neighbourhood Test & Learn schemes
		• Build on existing outcomes work to establish the an NWDA workstream outcomes framework
			• Liaise with Lambeth Together leadership to identify reference groups (at workstream level)
			• Explore and define an engagement event for Neighbourhood Test & Learns (Continence Care & Loneliness)
			• Draft rolling 3 month Comms & Engagement plan
			   • NWDA section on LT website revised with Comms & Engagement team.
			   • EOL Mapping exercise identifying current forums / reference groups
			• Workstream development
			• Continue to meet with key partners and stakeholders across Lambeth

Complex Personalised Support		• Previous programme activities were paused for Covid	• Further conversations to take place to develop next steps for the workstream in the context of the Borough Recovery Plan
Culture and Ways of Working	• Community listening event held on 4 September to support the development of the Lambeth Together Draft Covid-19 Recovery Plan • Production of a summary of the Draft Covid-19 Recovery Plan.		• Continue development of Lambeth Together Communications and Engagement Group • Development of focused and targeted engagement support offer to delivery alliances • Develop profile of Lambeth Together on social media and increase followership among Lambeth stakeholders and individuals • Begin update and refresh of content on Lambeth Together website and train new editors • Develop OD programme of work

Implications for alliance activity across a range of enabling factors 1/2 [work in progress]

Enabling Factor (see here for more detail)	Neighbourhood and wellbeing delivery alliance	Children and Young People's delivery alliance	Living Well Network Alliance
System leadership Driving improvement, innovation and transformation of services	• Governance structure revamped and agreed at NWDA Leadership Group level & Lambeth Together Exec. • Programme Director & Project Manager for NWDA in post • Currently identifying and confirming workstream leads and SRO's	• Potential OD need – addressing challenges around engagement of schools and social care with the wider health system – understanding mutual benefits across the system and how bringing them together would enable different and new thinking.	• LWNA already operating integrated systems leadership model and clear governance structure and responsibilities. • Workforce development programme has 'systems leaders' workstream.
Asset-based places Engaging communities to support integrated health and social care	• Lambeth's Food Hubs demonstrates the opportunities taken to work with and for the local communities during Covid-19. By utilising the knowledge and services available in the community alongside a team and infrastructure supported by Lambeth Council to reach out to the most vulnerable with food parcels, and identify those in the community who do not fit into statutory VCS' cohorts but live in poverty & need support. • Link Workers working in Primary Care also engage with and work alongside the local community to promote social prescribing and support the integration of health & social care.	• Need for rationalisation of wide range of engagement activity that is taking place across the CYP system – potential for development of stakeholder reference groups across each workstreams, providers and service users that is overseen by the alliance.	• Area of development around joining up and developing links with CYP Community Early Help service and Primary Care [c/f system leaderships] • Gap in terms of cross-borough map of assets in the wider community – supporting mental wellbeing in the community webinar in Nov '20 to enable greater reach into and understanding of VCS offers [c/f link to CYP Early Help and Health and Wellbeing hubs development]
Population approach Identifying and managing the health and care risks of the local population	• Working across (and collaboratively between) the six workstreams to identify specific cohorts of patients to ensure adequate health inequalities targeting. The focus on health inequality outcome measure will ensure these workstreams deliver impact & value.	• CYPHP do a lot of work in this area already and are undertaking a population health management approach. Work starting in emotional health and wellbeing workstream to develop a needs-assessment	• Potential for greater involvement of PH in terms of joint strategic needs assessment. Continuing challenges with collecting and reporting ethnicity and other demographic data – incl. consistency of collection methodology and analytical resource.

Implications for alliance activity across a range of enabling factors 2/2 [work in progress]

Enabling Factor (see here for more detail)	Neighbourhood and wellbeing delivery alliance	Children and Young People's delivery alliance	Living Well Network Alliance
Integrated workforce Health and social care professionals collaborating to provide care and support to individuals	• Care Homes: MDT's to be established; identifying, discussing and actioning against cohort of service users across different organisations & services.	• Are some examples e.g. school nurses and mental health practitioners working together. CYPHP has already started locality working, and working out of GP surgeries. Potential need to link primary care in with the wider system including schools.	• Integrated workforce is in place and is an area of success integrating within the Living Well Centres. • Overcoming provider/professional-led culture is an ongoing and ever-present challenge [potential OD area of work?] • Is this where recruitment challenges across the system can be addressed (process, gaps, candidate attraction)?
[Technology?] Information sharing and data Digital care records and information sharing to coordinate care better and manage care proactively	• Data sharing is central across the different workstreams to identify baseline data, report/review progression and enhance at scale working approach among different services, organisations and providers. • EOLC workstream: Coordinate My Care (CMC) service is an example of information sharing among different services to deliver holistic care to local population.	• LEAP have been doing some work on drawing together SLaM and Evelina data. • [hard to complete]	• Sharing of data across the system incl. navigating data-sharing governance is a challenge – both between statutory organisations and with VCS. • Physical sharing of data due to lack of inter-operability between systems is a challenge and requires manual interventions [can this be addressed at a Lambeth Together level to enable simple sharing of data?] • Challenge of existing technology and digital inclusion/exclusion of service users.
Joint commissioning Health and social care organisations collaborating and sharing responsibility for integrated care services	• Stakeholders in all workstreams from health & social care organisations or VCS'. • Comms & Engagement Plan will allow NWDA mgmt. team to present and attend at Lambeth Together's Comms & Engagement Steering Group • SRO's and workstream leads are to be two different representatives.	• CCG and LA already integrated commissioning • Issue around siloed budgets of health, social care and education makes further development of a commissioner/provider alliance difficult.	• This is core business of the Alliance and s75 is in place. • Potential OD need in relation to the tension between an alliance/integrated culture and ways of working and how corporate/enabling support of the sovereign organisations shifts to reflect this

Programme risks

RISKS		Impact			
Likelihood		**Minor (1)**	**Significant (2)**	**Serious (4)**	**Major (8)**
	Very Likely (4)	4	8	16	32
	Likely (3)	3	6	12	24
	Unlikely (2)	2	4	8	16
	Very Unlikely (1)	1	2	4	8

Summary of Top Risks				
Risks where assurance is weakest – risk score is after mitigation				
Lead	**Progra-mme**	**Risk Description**	**Risk Score**	**Actions / Assurance**
SP	LWNA	Recovery Plan fails to deliver required savings leaving a significant cost pressure for the Alliance	12	Assurance Group driving plan. Programme Manager in place. Additional roles identified to help deliver savings in complex placements and transforming care. Procurement of block placements framework agreement increases ability to reduce contract values. £400k saved in 2019/20, £380k savings for 2020/21 identified to date.
AC	NWDA	Being able to capture shared objectives and deliver progress at pace	12	Review of governance arrangements to enable delivery at pace on identified areas of work
AC	NWDA	Covid and continuing competing pressures for partners and stakeholders	12	Reworking of delivery into 6 workstreams to enable organisations to field relevant staff with smaller more focussed portfolio's
AO	CYP	Officer capacity risks rapid development of the workstreams; both in terms of C19 wave 2 but more generally with huge workloads across the board	12	Partnership sign up to TORs and workstreams to ensure cross-partner ownership. Staggering of establishment of workstreams in order to better manage demands on colleagues' time

Programme issues

Issue severity	Description		Issue Severity	Description
Critical	Issue will stop project progress.		Medium	Issue impacts the project, but could be mitigated to avoid an impact on budget, schedule or scope.
High	Issue will likely impact budget, schedule or scope.		Low	Issue is low impact and/or low effort to resolve.

		Summary of Top Issues		
Ref	Progra-mme	Issue Description	Impact	Actions
1	LWNA	Continued inability to recruit to core health posts	High	Recruitment plan is in place in SLAM, which is being supported by the Trust. Where appropriate we are looking at a flexible approach to role in the Alliance and using opportunities with the partners where appropriate. We are planning a joint AMT/AOT session to identify solutions to recruitment.
2	LWNA	Insufficient available funding to implement agreed model and develop new prototypes	High	Contract Tracker completed. Services such as Staying Well will be introduced later than planned and piloted on a smaller scale, which will reduce costs in 20/21.
3	LWNA	Covid 19 means we have insufficient staff to deliver services	High	Emergency rota in place in SPA with crisis and urgent cases being prioritised, LWCs have been consolidated to two, with high and medium risk cases being prioritised along with depots/clozapine. Social workers are prioritising safeguarding and welfare cases. Staff set up to work from home wherever possible. Twice weekly COVID 19 borough meetings to respond to system challenges. AOT and AMT are both now returning to BAU as part of reshaping plan.
4	LWNA	Surge in demand for MH support at all levels following Covid 19-19 that we cannot meet demand.	High	Reshaping plan to maximise availability and productivity of staff, continued collaboration across system (e.g. IAPT), regular monitoring of activity, development of staying well offer will improve 'on the ground intelligence' and our ability to maintain people under primary care support
5	LWNA	We fail to find savings to meet the estimated £4m Lambeth revenue pressure from Douglas Bennett House.	High	A workshop with key clinical stakeholders has been held to discuss how this financial gap would be filled, which provisionally identified £5m of savings – although when probabilities were applied this left a gap of c. £0.5m. The Finance and Performance Group will be reviewing DBH proposed savings in more detail.
6	NWDA	Resetting governance and work programmes	High	Lambeth Council are developing proposals for a formal VCS framework to support co-production. Rapid set up of workstreams through Oct 20
7	NWDA	Covid continuing to disrupt resumption of service delivery	High	Workstreams structure should enable focus on recovery and delivery of alliance objectives, and inclusion or refresh of pre Covid plans where appropriate
8	NWDA	Financial pressure across the system	High	Streamlining of leadership and focus on Borough recovery plan

Strategic programme risks and issues (work in progress)

Likelihood		Impact			
		Minor (1)	Significant (2)	Serious (4)	Major (8)
	Very Likely (4)	4	8	16	32
	Likely (3)	3	6	12	24
	Unlikely (2)	2	4	8	16
	Very Unlikely (1)	1	2	4	8

Draft Top Programme Risks (where assurance is weakest)

Ref	Risk Description	Risk Score	Actions / Assurance
	The financial position of one or more partners, or one or more alliance, results in an inability to deliver programme outcomes		[needs completing]
	Organisational change and churn threatens the development of relationships, trust and leadership in the system		[needs completing]
	System leadership is not focussed and short-term demands are prioritised over Lambeth Together work		[needs completing]
	Failure to effectively engage including with Lambeth's diverse communities		[needs completing]
	'Second wave' of covid-19 results in the redirection of resource away from Lambeth Together activity	16	[NWDA] Reworking of delivery into 6 workstreams to enable organisations to field relevant staff with smaller more focussed portfolios

Issue severity	Description	Issue Severity	Description
Critical	Issue will stop programme progress.	Medium	Issue impacts the programme, but could be mitigated to avoid an impact on budget, schedule or scope.
High	Issue will likely impact budget, schedule or scope.	Low	Issue is low impact and/or low effort to resolve.

Top Programme Issues

Ref	Issue Description	Impact	Actions
	Covid-19 results in inadequate resource to deliver recovery/transformation plans	High	Alignment of borough recovery and delivery alliance plans