



# The value of partnership working to support residents during COVID-19

*Southwark's Annual Public Health Report 2022*

**ANNUAL PUBLIC HEALTH REPORT**  
**PUBLIC HEALTH DIVISION**  
**ENVIRONMENT & LEISURE DEPARTMENT**  
LONDON BOROUGH OF SOUTHWARK

**Southwark**  
Council  
southwark.gov.uk

# 1. FOREWORD

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**This year's Annual Public Health Report highlights the value and strength of the partnerships we have in Southwark.**

The pandemic has had a huge impact on our borough, affecting the lives of our families, friends and neighbours. It has widened inequalities between our communities that we must tackle if we are to improve health and wellbeing in a meaningful way.

However, the pandemic has also shown that when we work together there is nothing we cannot achieve. Our Community Health Ambassadors and Community Support Alliance are just two examples of how we have worked hand in hand with the community to support our residents.

As a Council we have also worked closely with our NHS and wider partners to respond and manage COVID-19 outbreaks and deliver our local vaccination programme.

We need to build on these partnerships in the years ahead to ensure that everyone in Southwark has access to the support and services they need to lead healthy lives.

**I am delighted to endorse this year's report and will keep working to ensure improving health and tackling inequalities is at the heart of everything we do.**



**Cllr Evelyn Akoto, Cabinet Member for Health and Wellbeing**

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### 3. INTRODUCTION

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The first case of COVID-19 was identified in Southwark on 25<sup>th</sup> February 2020. Since then there have been over 100,200 confirmed COVID-19 cases in Southwark.

Southwark Council and our communities have worked with a wide range of partners across government, the NHS and the voluntary & community sector to tackle the virus and to support our local population. A range of interventions such as social distancing, wearing face coverings and increased ventilation were needed to most effectively limit the spread of COVID-19 in order to protect all residents from infection, but particularly those who are older or clinically more vulnerable. In December 2020 the first COVID-19 vaccination was approved for use, and from that point onwards, a dual approach of COVID-19 vaccination and interventions such as 'hands, face, space, ventilate' have helped to prevent COVID-19 infection and protect our residents. As we move into the next stage of the pandemic where we learn to live safely with COVID-19, vaccination continues to be a key tool to prevent infection and transmission. It is likely that there will be booster programmes for those who are, or work with, more vulnerable residents, and we will continue to support residents receive their COVID-19 vaccinations.

In July 2020, Southwark Council published the Outbreak Prevention and Control Plan (OPCP). Partnership work across the council, NHS and voluntary & community sector was crucial to delivering this plan, and in turn helping to support all residents during the pandemic. The OPCS has since been updated in line with changes to national guidance. The first section of this report celebrates areas where

partnership working enabled delivery of the OPCS. The work to provide access to COVID-19 testing, vaccinations and support to educational, care and workplace settings with cases and outbreaks all contributed to reducing the spread of COVID-19.

The second section looks at areas where partnership working has helped to reduce the negative impacts of COVID-19 on our residents across three areas: food insecurity, education and learning, and supporting older people. COVID-19 continues to have negative and unequal impacts across many aspects of life including employment, household income, mental health and wellbeing. Whilst it was not possible to celebrate all partnership working across the full range of COVID-19 impacts in this report, we hope this acts as a reminder of how wide and diverse our community networks are in Southwark, and the range of opportunities available to residents.

As the Director of Public Health for Southwark I'd like to thank our communities, my public health team and wider council colleagues, and the many partners who have worked together to tackle this virus. My recommendations in section 10 are to build on this excellent partnership working to support residents in improving health and wellbeing through a community-led approach which listens to, and is guided by, our residents.



**Sangeeta Leahy, Director of Public Health**

## 4. KEY ACHIEVEMENTS

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Since the start of the pandemic...



**100,200 confirmed COVID-19 cases among Southwark residents**



**5,600 residents successfully contacted by Test and Trace Southwark, and provided with advice**



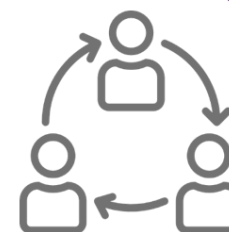
**545,000 doses of COVID-19 vaccination received by Southwark residents (across primary course and booster)**



**100 Community Health Ambassadors and Vaccine Champions have been trained**



**Young advisors handed out 10,000 lateral flow test kits to residents on their doorstep**



**650 outbreaks managed by Southwark Council's Public Health team**

(Approximate numbers)

Figure 1: Key achievements during COVID-19 in Southwark  
Source: [Gov.uk COVID-19 dashboard](#), NIMS COVID-19 Vaccination dashboard

## 5. HEALTH AND WELLBEING OVERVIEW

Health and wellbeing in Southwark has improved over recent years, but many health inequalities remain, both within different parts of the borough, and when compared to London as a whole. Our built and natural environments, social and community networks, education and employment all contribute to our health and wellbeing, as well as our healthy behaviours, so these also play a part in understanding health and wellbeing across Southwark. More detailed information on each of the issues below is available within the Joint Strategic Needs Assessment Annual Report.

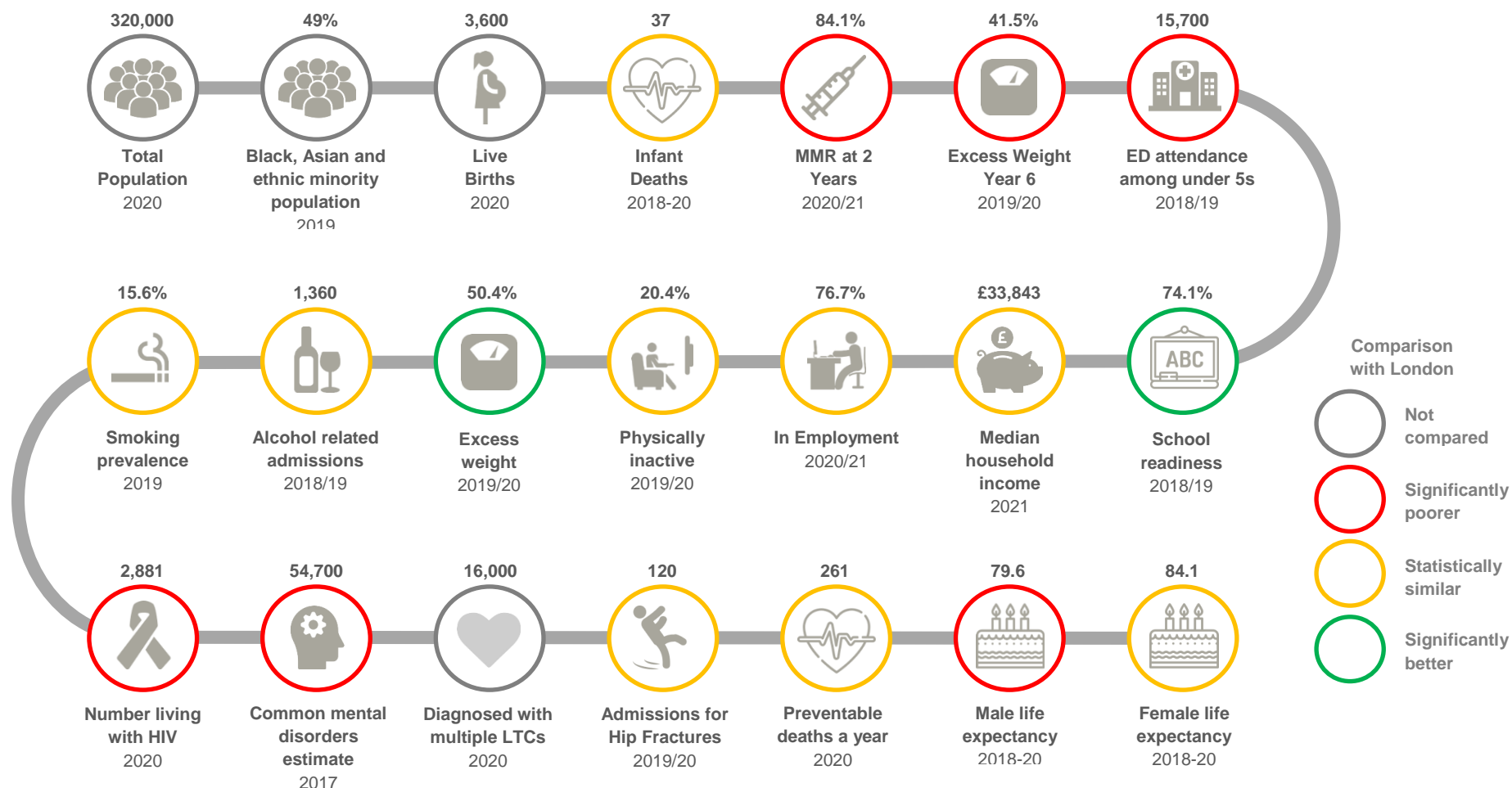


Figure 2: Health and wellbeing across the life course in Southwark infographic  
Source: Southwark Council JSNA Annual Report 2022

Health inequalities are preventable and unfair differences in health across the population and between different groups of people. These differences in health can include differences in health status (such as life expectancy), in access to care, in the quality and experience of care, in behaviours that affect health (such as smoking), and in the wider determinants of health. The wider or social determinants of health are the broad conditions that people experience over their lifetimes, including education and employment, and the places, communities, and homes in which people live. These conditions together have a large impact on people's health and contribute to health inequalities.

Across a wide range of health, social and economic measures, from child poverty through to obesity, hospital admissions and life

expectancy, outcomes are poorer in central and northern parts of Southwark. In particular, communities in Faraday and Peckham wards. However, it is important to acknowledge that pockets of inequality also exist within areas of affluence, such as the Kingswood estate in Dulwich Wood and Downtown estate in Surrey Docks.

COVID-19 has brought health inequalities to the front of everyone's focus, and reminded us that tacking inequality is everyone's business. The Joint Health and Wellbeing Strategy details how all partners can work to reduce health inequalities, as well as pushing for overall improvements for Southwark, and recommendations at the end of this report summarise ways we can all contribute to reducing health inequalities.

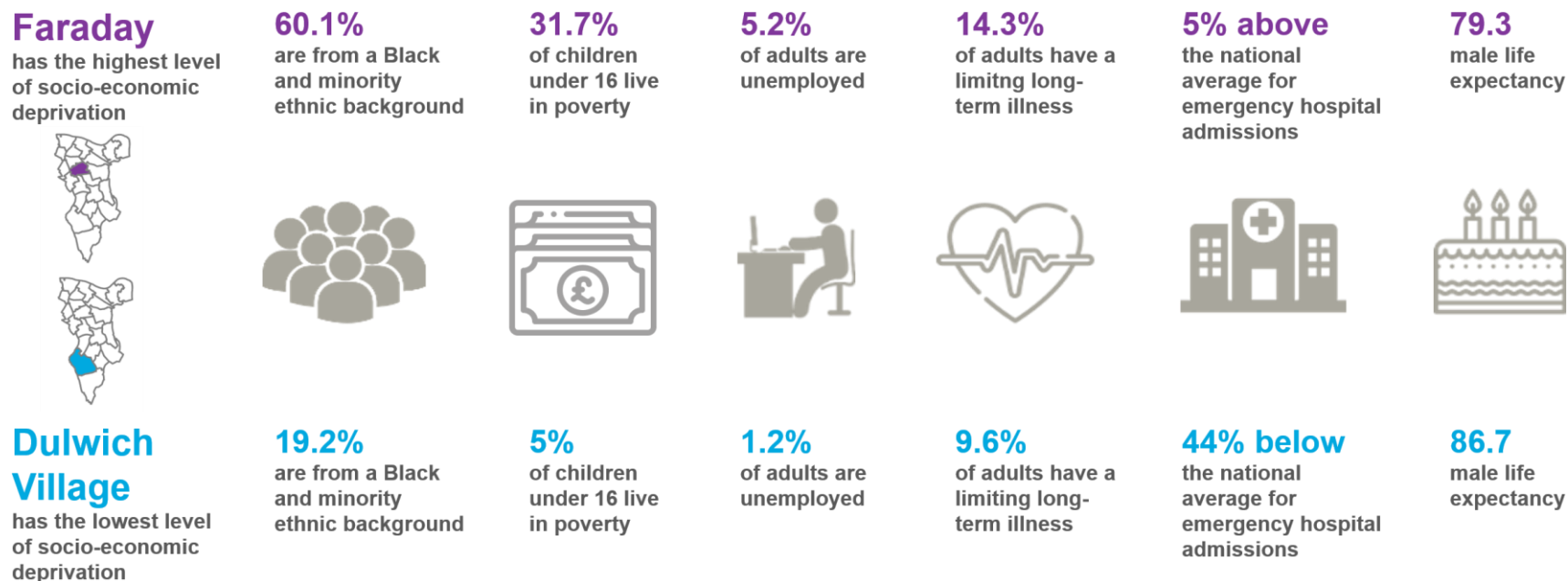


Figure 3: Geographic health inequalities in Southwark infographic  
 Source: Southwark Council JSNA Annual Report 2022

## 6. IMPACTS OF COVID-19

**Risk of COVID-19 infection, severe disease and death are unequal.** A number of national studies have found that COVID-19 has had a disproportionate impact on some communities. National evidence shows:

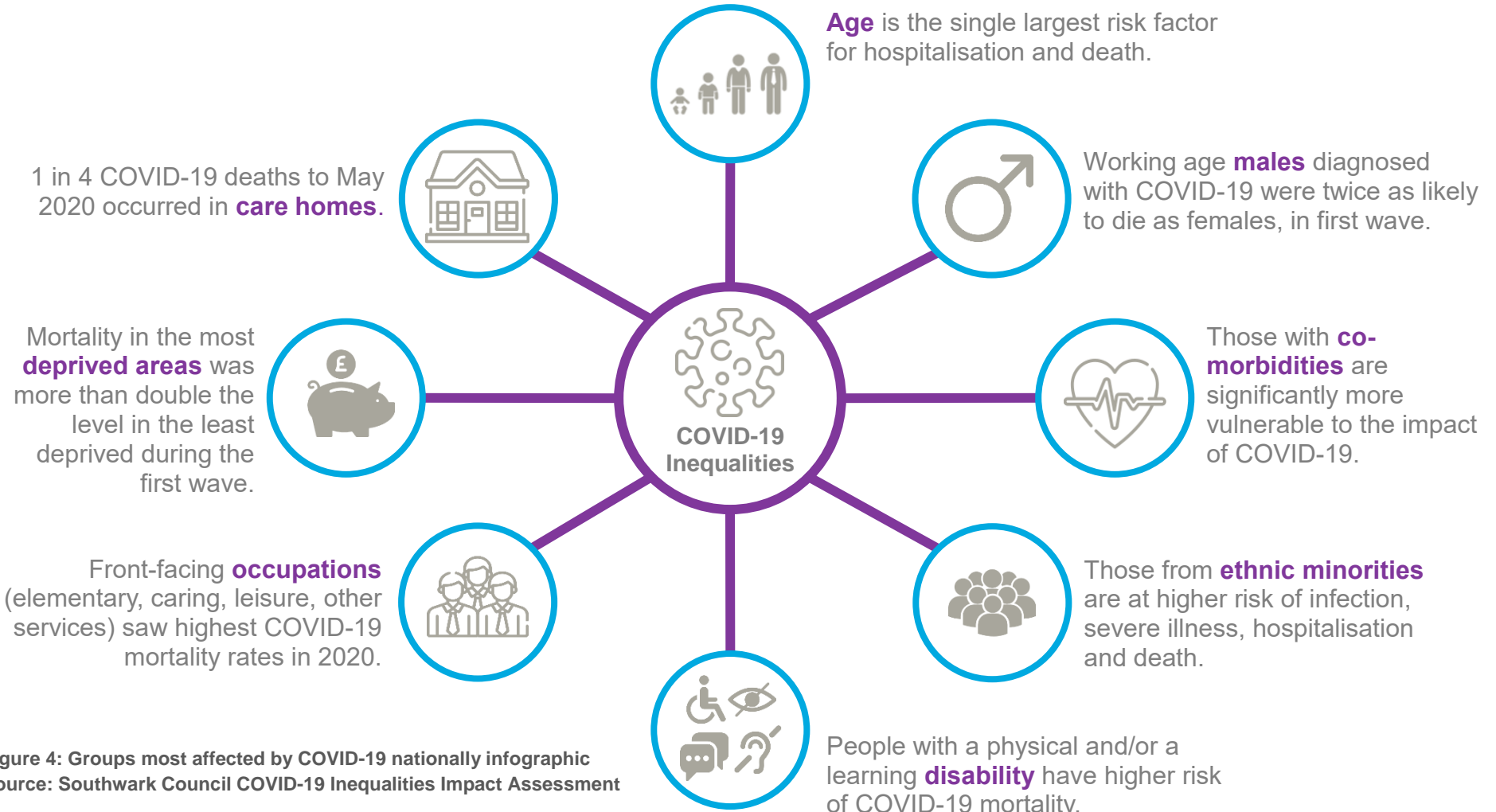


Figure 4: Groups most affected by COVID-19 nationally infographic  
Source: Southwark Council COVID-19 Inequalities Impact Assessment



**COVID-19 risk factors coincide to create substantial increased risk for ethnic minorities, and those living in areas of social and economic disadvantage.** The last 2 ½ years has shown that people in our borough who were experiencing the greatest disadvantage before COVID-19 arrived were then those most affected by its direct and longer term impacts. In particular, residents from Black, Asian and minority ethnic backgrounds, along with those on low incomes have suffered the most during the course of the pandemic.

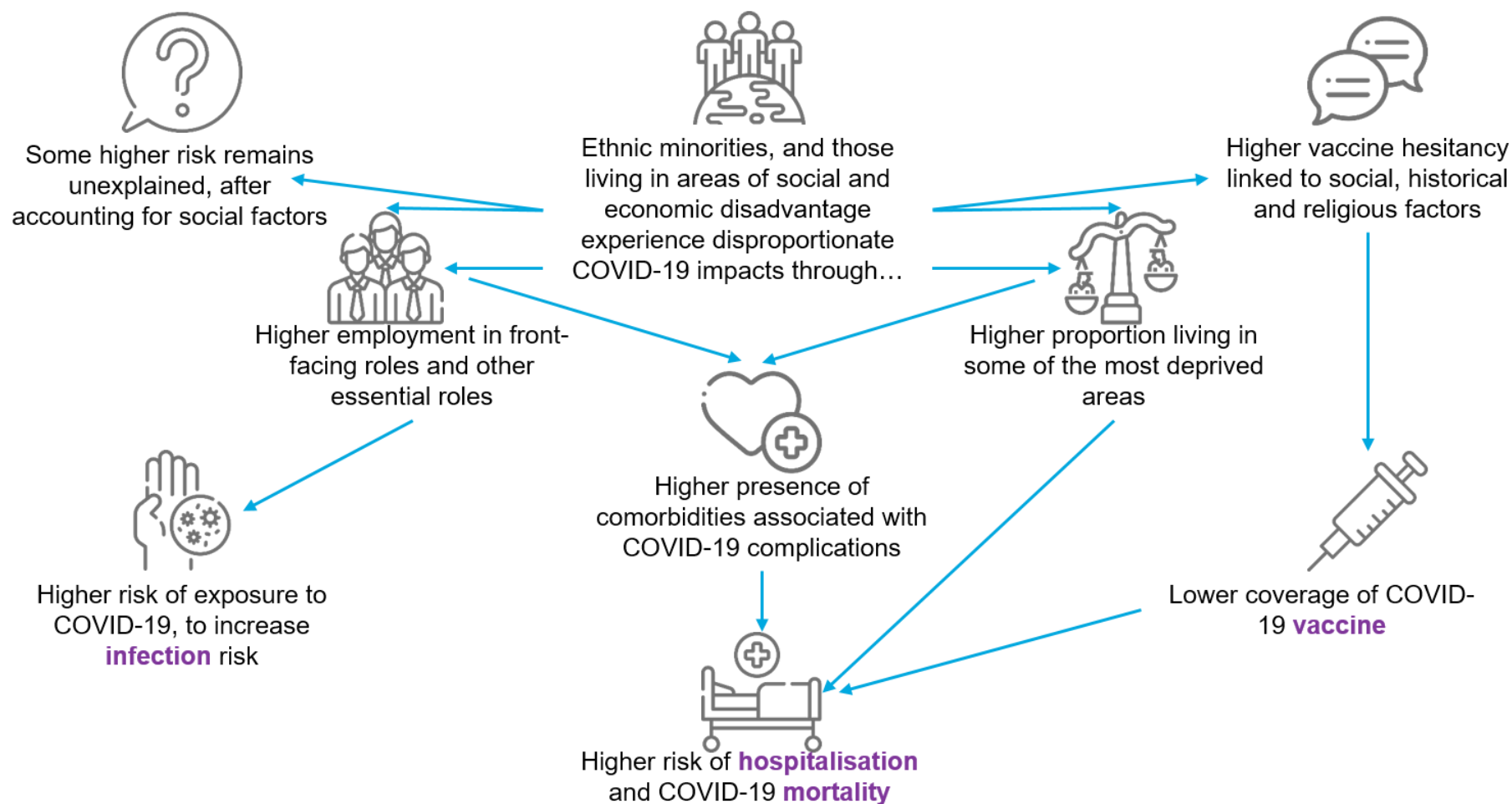


Figure 5: Disproportionate COVID-19 impacts on infection, severe disease and death for ethnic minorities and those living in areas of social and economic disadvantage infographic

Source: Southwark Council COVID-19 Inequalities Impact Assessment

## 7. OUR RESPONSE - PREVENT, IDENTIFY, CONTROL

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Southwark's Outbreak Prevention and Control Plan (OPCP) set out Southwark Council's ambition and approach to providing local leadership and support for the pandemic response. Led by Public Health, and working closely with many council, health service and voluntary sector partners, the OPCS outlined the borough's operational approaches to the challenge of coronavirus. This was organised under three main strands of interlinked work: prevent, identify and control. This spring a 5<sup>th</sup> version of the OPCS was published presenting Southwark's amended approach to the pandemic, in response to the national government's policy shift towards *living safely with COVID-19*. More information is available in the [Outbreak Prevention and Control Plan \(OPCP\)](#).

### 7.1 Prevent

Under the Prevent strand of the OPCS, our aim was to:

- Work with communities and settings to prevent transmission, focusing on those with greatest vulnerability
- Engage and communicate with residents on the pandemic
- Support workplaces, our high risk venues e.g. care homes, and public areas

#### COVID-19 community health ambassadors

In order to best support our residents through the additional challenges created by COVID-19 a collaborative, community-driven approach was needed, so Southwark's Community Health Ambassadors Network was set up in October 2020. Over 100 individual volunteers from a diverse range of backgrounds and communities have since signed up, with the majority active in other voluntary sector and community organisations, and faith groups. The network is jointly coordinated by Healthwatch Southwark, Community Southwark and Southwark Council.

Ambassadors have received induction training and access to a wide range of additional resources with the aim of ensuring that everyone has the most up-to-date and accurate information as they work to inform, empower and support communities during the COVID-19 pandemic and in the recovery period. Ambassadors are provided with accurate information about COVID-19, including the vaccination programme, and they help to connect community members with support on things like access to healthy and affordable food, health and wellbeing services, including mental health services, and financial support. There's no specific expectation of Ambassadors – they use their normal channels to communicate to community members and they commit as much time as they are comfortable with. Community Health Ambassadors also provided us with invaluable feedback regarding the concerns and issues being experienced by their communities, which enabled us to adjust our interventions to better support our communities. A training programme has also been developed, which has been designed to meet the interests and requirements expressed by Ambassadors.



Your magazine from Southwark Council



**Carole, an Ambassador, said:**

*“We’ve been so busy as Community Health Ambassadors. I have looked for and shared ways in which to keep people living in Southwark fed, signposting foodbanks, and where they can gain advice about their mental health. I’ve also signposted people who are being abused, to get help from pharmacies and other organisations that offer victim support.*

*... We’ve kept in contact with phone calls to the elderly who have no family at hand, delivered shopping and ‘adopted’ many elderly people during this time, and encouraged people in the community to do the same. In particular I’ve shared information about support with disabled people who are feeling marginalised and forgotten during this pandemic; especially those with ‘hidden disabilities’ like autism.”*



Figures 6-8: A copy of Southwark Life with a picture of Carole, a COVID-19 community health ambassador, a photo of a group of ambassadors receiving certificates, and a ‘Make a Difference Hero’ award for Hajia, also an ambassador



**Althea, another Ambassador, said:**

*"If not for the Ambassadorship and public health cooperation, we would have a very different outcome with COVID-19 and separating the facts from fiction. Not many people would have been well informed about COVID-19; what it is, what happens during and after COVID-19. People are more believing now because we personalised COVID-19...gave it a face and made it real and people could deal with it with the help provided. It just proved no man can be an island unto himself."*

Looking forward, we are looking to widen the focus of the Community Health Ambassadors to address other community health priorities and concerns. Ambassadors are invited to become involved in Healthwatch engagement activities in addition to activities organised by Southwark Council, NHS and other partners.

**COVID-19 voluntary and community sector prevention grants**

Grants of £1,000-5,000 have been given to a range of voluntary and community sector (VCS) organisations to promote clear messaging of safe behaviours during COVID-19. Messaging varied across the course of the pandemic, from regular asymptomatic testing, to having a COVID-19 vaccination when invited. Funding was provided by Southwark Council with Healthwatch Southwark and Community Southwark jointly coordinating the programme. Together, the grants enabled the development of hyper-local, small-scale community action projects in direct response to local needs.

As a result of the funding, VCS organisations have been able to develop projects and activities that have increased confidence in communities in understanding how to stay safe. Projects have contributed to a reported increase in the intention to take-up COVID-19 vaccination, and developed ways for the organisations to continue supporting their communities during the pandemic and improve wellbeing and social outcomes.



Figure 9: Examples of projects funded by COVID-19 voluntary and community sector prevention grants

One example is Flashy Wings Ministry, which was funded to run community workshops around vaccines. In their WhatsApp Educational Group, many members have testified that they have taken their first job because of the information they received in the sessions held in 2021. Some have even posted a photo of themselves receiving their job to encourage others. Attendees of the Zoom webinar were asked about their plans to have the COVID-19 vaccine at the start and end of the webinar, with the number who planned to have a vaccine more than tripled after the session.

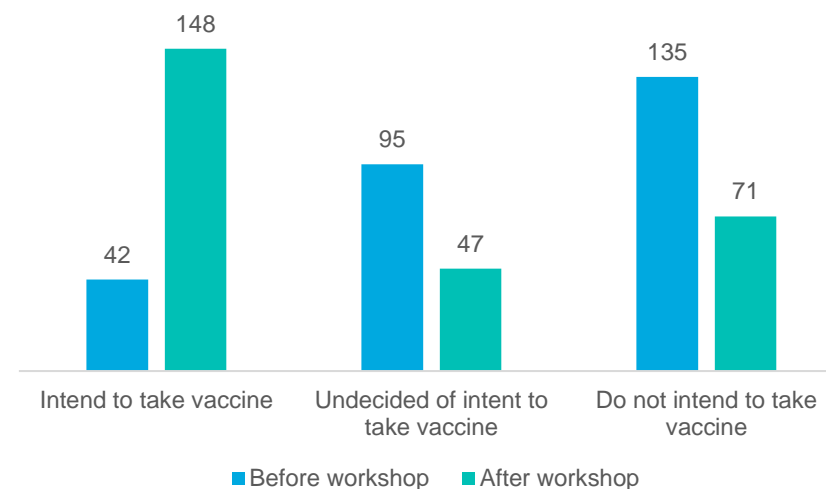


Figure 10: Change in self-reported COVID-19 vaccination behaviours before and after attending a COVID-19 vaccination webinar, delivered by Flashy Wings  
Source: Healthwatch Southwark/ Community Southwark. VCS COVID-19 Prevention Grants Pilot, October 2020-August 2021 Summary Report (2021)

## 7.2 Identify

Under the Identify strand of the OPCP, our aim was to:

- Embed testing into communities and settings
- Identify contacts, with a robust local test and trace function
- Support self-isolation in contacts and cases including practical, financial and wellbeing support

### Test and Trace Southwark

Effective contact tracing is an important tool in tackling COVID-19. By identifying and supporting residents who have been in close contact with someone who has the infection, we can help slow the spread of the disease and protect those who are most vulnerable. By notifying these contacts, they can isolate to help prevent spreading the virus any further. Cases were asked who they had been in contact with, during the period when they were likely to have been most infectious, and any locations they visited during that time e.g. workplace, restaurants, and supermarkets.

Test and Trace Southwark (TTS) was introduced on 21 September 2020 as part of a national plan for locally supported contact tracing. Test and Trace Southwark provided additional support to the national NHS Test and Trace programme. Cases who were not reached by the national system after 24 hours were referred to our team for follow up. Our call handlers were able to use local knowledge to reach out to confirmed COVID-19 cases who the national team were unable to contact. If call handlers could not get through to a case, council staff would carry out a home visit to check in on the case, and offer support. Colleagues across Public Health, Environmental Health, Housing and our contact centre worked together to ensure that TTS could reach as many residents as possible and provide additional

guidance on where to find local support if residents were struggling with food, finance or other isolation related issues.

TTS ended on 21 February 2022 after those with COVID-19 were no longer legally required to isolate. Building on our good practice, we have plans in place should we need to reintroduce contact tracing for any reason in the future.

### Community asymptomatic testing

Asymptomatic testing became available in late 2020, and supported people to feel more confident in their decision to attend work or school, and visit friends and family. Public Health worked with colleagues across the council to coordinate access to lateral flow testing. We provided a mix of testing sites to ensure a range of options. Assisted tests were available at high street pharmacies and asymptomatic testing sites across the borough. Between January 2021 and March 2022, residents were able to access tests at ten pharmacies across Southwark. Pharmacies were selected across the borough to ensure ease of access to those most in need of testing as the pandemic progressed. To deliver the service the Council worked in partnership with local pharmacists, the Local Pharmaceutical Committee and wider NHS colleagues. Over 4,000 tests were carried out across the ten pharmacies since testing began. Looking forward, the success of this partnership working can provide a model for other services to be delivered within a community pharmacy setting, such as stop smoking services and sexual health testing.

Mass asymptomatic testing sites were positioned across the borough, and changed location to meet demand. These were supported by pop-up sites in areas with higher rates of transmission.



**Figure 11: Photo of lateral flow testing mobile unit in Peckham Square**

Residents were able to collect test kits from libraries and pharmacies, as well as ordering from the national website. Test kits were provided to educational, care and workplace settings to support outbreak management at short notice.

Targeted door drops of test kits were conducted in areas of high infection and/or lower coverage of COVID-19 vaccination. In July 2021, Southwark's Young Advisors worked to distribute around 10,000 test kits to residents on their doorstep in communities across the borough and promoted local vaccination pop-up clinics. This combined effort was focused in areas of the borough where COVID-19 vaccination coverage was lower, to both help residents receive their vaccination and increase testing in communities where transmission is more likely as people were less protected against infection.

### **Kingsdale Foundation School – testing for staff and students**

Kingsdale Foundation School is a large secondary school and sixth form centre based in West Dulwich with designated specialisms in mathematics, physical education, & the performing/expressive arts.

Daniel Harding, acting deputy headteacher, spoke to us about the challenge of testing in a large school, with almost 2,500 students.

As part of the return to in-person teaching for all students in March 2020, staff and students were asked to carry out twice-weekly asymptomatic COVID-19 testing, using lateral flow test kits. In addition, at times of high case numbers school settings were asked to carry out surge testing to help identify additional cases and prevent onward transmission. Surge testing varied depending on the situation, but often required a whole school year group (and all staff that interacted with the students) to have daily testing, equalling around 700 tests required each day.

At one stage, Kingsdale operated three testing sites in the school:

- Mass asymptomatic testing site in the sports hall
- On-site routine testing for vulnerable & key-worker children
- Testing in the medical room for staff

The mass testing site could test up to 200 students an hour, which helped to limit the disruption this had on the working day for children. This scale of testing could not have been delivered without the support and contribution of teachers and parent volunteers who helped deliver and manage the sites.



Figures 12-14: Kingsdale Foundation School lateral flow testing centre  
Source: Daniel Harding, Acting Deputy Headteacher





### 7.3 Control

Under the Control strand of the OPCP, Southwark aimed to:

- Advise on effective outbreak management
- Contain variants of interest and concern
- Support the delivery of the NHS COVID-19 vaccination programme (including boosters)

#### Acute Response Team (ART)

Southwark's Acute Response Team (ART) aims to mitigate the negative impacts of COVID-19 on Southwark's population and communities, and facilitate a safe recovery from the disruption caused by the pandemic.

Since February 2020, ART has maintained a single point of contact for individuals and organisations across Southwark to seek public health advice and support. Since June 2020, ART has comprised the CONTROL strand of Southwark's Outbreak Prevention and Control Plan (OPCP).

Working alongside Council and SEL CCG partners, as well as national and regional partners, including the UK Health Security Agency and the London Coronavirus Response Cell, ART has also played a key role in managing COVID-19 outbreaks across Southwark. This has included supporting individuals, organisations, workplaces, schools and communities across Southwark in applying national guidance, providing health protection advice, facilitating access to infection prevention and control advice, COVID-19 testing and personal protective equipment, as well as supporting implementation of control measures to prevent onwards transmission.

As the pandemic has progressed, ART has continued to evolve to reflect the changing needs and nature of the situation. While currently supporting the transition of acute COVID-19 outbreak management to regional specialist teams, ART continues to support local partners, with a focus on protecting our most vulnerable local populations.

#### Cherry Garden School

Cherry Garden School is an Ofsted outstanding special school based in Peckham for pupils aged 2-11 years old who have severe learning differences, complex needs, and autism. From their new building, opened in 2019, the school provides a range of learning to maximise opportunities and meet pupils' specific needs. Before COVID-19, the school would seek guidance from the Public Health team in response to viral outbreaks e.g. norovirus, and this working relationship developed significantly during the pandemic.

Cherry Garden School was supported by the ART who provided regular advice to staff on the latest public health guidance, and how the national guidance can be best applied, noting the additional challenges that special schools faced in infection prevention and control.

Simon Wright, Assistant Headteacher, said that he found the relationship between the ART and the school to be "massively helpful" and "a perfect example of collaboration between education and public health". The senior leadership team at the school in turn became more confident in the messaging they were sharing with teaching and support staff, and were more able to explain why actions were in place and answer any staff questions. "It was a careful balancing act of keeping the school to the highest quality we can and being safe in a pandemic".

In the later stages of the pandemic, as restrictions were eased, Simon found the continued support of the ART helpful to understand what public health measures could help to continue to protect the high number of clinically vulnerable children. “Over time, we felt empowered to make decisions in response to an outbreak so could act faster and stop the spread quicker”.

Simon also highlighted how a longer-term positive outcome of the school’s adaptations during the pandemic was an increased awareness for hand hygiene, social distancing, and hybrid meetings for staff and parents. Meetings with parents such as those to review children’s educational health and care plans can now be done remotely to “allow greater flexibility, especially for multi-disciplinary meetings where normally lots of people have to convene in one place”.

### Care and residential settings

The pandemic has been extremely challenging for the adult social care (ASC) sector. Staff and providers working in ASC have done incredible work under immense pressure to care for our elderly and vulnerable residents and people with complex needs.

Multiple teams within Southwark Council and across the NHS have worked closely with providers and care settings in response to COVID-19. Providers were able to raise and address any questions or concerns at regular forums convened for care homes, supported living and home care settings. Convened more frequently during periods of high community infection rates, these forums offered opportunities for regular information sharing, including on changes to national guidance, and discussion and engagement between providers and council teams.

The ART worked alongside SEL CCG, Council and regional Health Protection partners to support ASC settings in responding to COVID-19 cases and outbreaks. Collaborative work between providers, registered managers and partners ensured deployment of setting-specific responses. This included application of national guidance, health protection advice that considered the particular context of each situation, as well as drawing upon the expertise of providers.

SEL CCG and Public Health worked to deliver infection prevention and control (IPC) guidance and training to providers. These included:

- Virtual IPC training webinars for all care homes, led by an IPC Specialist nurse
- Specialist advice and support to contain the spread of COVID-19 cases/outbreaks
- Bespoke IPC refresher training sessions for specific providers following outbreaks, in response to requests from providers

With support from Public Health, NHS SEL CCG also launched the South East London Infection Control Community Care Champions Education Programme in September 2022. Convened quarterly, the programme includes presentations experts in IPC issues, training and best practice and is attended by ASC staff from across Southwark and other South East London boroughs.

### Supporting COVID-19 vaccination in residential and care settings

Ensuring high uptake of the COVID-19 vaccine within care homes was one of the main tasks of the vaccination programme. These are often the most vulnerable in society and the vaccine offers the best

protection against the pandemic.

A partnership of colleagues from across the NHS and local authority was established early on, with the aim of promoting the vaccine and addressing concerns of both staff and residents. To date 90% of all residents in older people care homes have been fully vaccinated against COVID-19.

### **Community COVID-19 vaccinations at local pharmacies**

COVID-19 vaccinations were delivered at GPs, hospitals and pharmacies, as well as a range of pop-up events. Patricia Sydney is a pharmacist at Asda Old Kent Road and gave vaccinations to residents, as well as answering questions and concerns they may have had. Patricia thought the main challenge to the COVID-19 vaccination programme at her pharmacy was the 'mistrust by the public', caused by messages they had received from anti-vaccination campaigners. Questions asked by Black, Asian and minority ethnic background customers focused on concerns of ethnicity-motivated negative impacts. Patricia said 'Although it was not an easy challenge, I was able to address their concerns and offer them reassurance of the benefit of the vaccine which outweighed any risk they had envisaged'. Asda Old Kent Road has given out over 6,000 doses of COVID-19 vaccination.

Partnership working was 'vital' to the successful vaccination programme, with regular contact with London regional NHS team and Southwark Clinical Commissioning Group (CCG). Pharmacies supported each other through WhatsApp and Telegram group chats with ideas of how to increase uptake and provide support to each other.

Looking forward, Patricia says the pharmacy is much busier than

usual as 'people trust us more. They know Asda pharmacy [has] people they can talk to and [who] understand them. They are more open and freer to discuss their fears and worries'.

### **Pop-up COVID-19 vaccination sites**

Residents could access COVID-19 vaccinations at a large number of healthcare sites across the borough. In addition, several vaccination pop-ups were organised to increase vaccine uptake in areas where coverage was lower. Pop ups were at a variety of venues, including Millwall Football Club, Tate Modern and Peckham Islamic Centre, as well as over 100 community outreach sessions in Peckham. These were made possible due to collaboration between the Council, NHS and host locations who kindly hosted a vaccination team and sometimes also helped promote the vaccination to their community.

The COVID-19 vaccination programme continues to deliver vaccines to our communities. We have vaccinated thousands of people and had a positive impact on people lives in many ways, but we must and we will do better to reduce the health inequalities this virus has brought into sharp focus. We will continue to reach out to communities across the borough to hear and address concerns, and provide support and information to people who have questions about the vaccines. We are proud of our joint working with system partners to support this.



**Marie says:**

**"I had Covid at the end of July and it was really horrible. I am young and healthy and I couldn't believe how sick I got. I have also been enjoying going back to gigs and festivals lately and I know that's only possible because of the vaccine"**

Figures 15-17: Local COVID-19 vaccination clinics at Millwall Football Club, Tate Modern, and a quote from a resident who had the vaccine  
 Source: South East London Clinical Commissioning Group

## 7.4 Communications and Engagement

As part of our response to COVID-19, an OPCE Communications and Engagement group was created, led by the External Affairs team at the Council. The group brought together a range of partners from a variety of key council services, as well as colleagues from Community Southwark, and the NHS.

Public Health provided regular updates on the current COVID-19 situation across the borough, highlighting where differences were seen in infections, testing behaviours and vaccination coverage. These updates were combined with local knowledge, and the findings from our engagement work to build an evidence-led picture of what communication activities were needed, and ensured that we could be both targeted and adaptive in our approach to best meet the current situation. Our focus was to build a shared knowledge and understanding of community concerns and views on a range of COVID-19 topics and to co-ordinate our local communication and delivery plans. The group played a vital role in increasing local testing and boosting vaccination uptake among our most vulnerable residents.

The group used a range of borough-wide and hyperlocal initiatives to address community outbreaks and low vaccine coverage, including sharing clear, accessible information in a variety of languages with residents. Knowing that a lack of trust in authorities was a barrier for some residents in complying with government advice, we worked closely with local community groups, faith leaders, tenant and resident associations, community health ambassadors and businesses to develop messages that would reach those most in need. We took those messages into our neighbourhoods, through special editions of Southwark Life magazine, digi-van advertising,

park banners and vaccine popups, and used social media to reach many residents, especially younger age groups, with factual information and signposting.

In addition to the engagement activities detailed in the Prevent, Identify and Control sections, specific engagement work was also carried out with local business. Working together with our business improvement districts and other forums we provided support during lockdown periods and together addressed the challenges of reopening under restrictions.

## 8. VALUE OF PARTNERSHIPS

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Southwark Council and local voluntary and community sector (VCS) organisations have come together during the pandemic to support residents. The Council have worked to support a wide range of VCS projects which supported health and wellbeing in the borough. These have included existing partnerships, as well as provided an opportunity to build new ones. The connections formed, grown and strengthened during the pandemic provide an opportunity to further improve health and wellbeing of our residents and address the inequalities we see in the borough.

This section will look at three areas which were negatively impacted by COVID-19, along with examples of how partnership working across the council and VCS supported residents.

### 8.1 Food insecurity

Before the pandemic, almost 1 in 4 Southwark respondents to a London-wide survey in 2019 reported experiences of food insecurity, where people have limited or uncertain availability of healthy food. Some people are more likely to experience food insecurity than others, with the following groups shown to be more likely:

- People who were unemployed, are in unstable employment, on benefits (particularly when transitioning to universal credit) or have financial and debt difficulties.
- People who are disabled or suffering from chronic mental or physical conditions.
- People who live in social housing, poor conditions, or are socially isolated.

- Elderly people, single parent households, large families, low-income families with school age children during school holidays, young people leaving care, young parents (16-24) and their children.
- Ethnic minorities, refugees and asylum seekers, individuals without recourse to public funds, or people who face language barriers.

During the pandemic, issues with food availability, household income and unemployment further increased the number of residents who were food insecure. Locally, food bank referrals rose by almost 4 times between April-Nov 2020 compared to 2019, and the number of people referred to access food assistance from the Southwark Emergency Support Scheme increased by 19 times, between April 2020 to January 2021.

Southwark Council has proactively worked with our community partners across several initiatives, projects, and programmes to support residents.

#### Southwark Community Support Alliance (CSA)

The Community Support Alliance (CSA) was established in March 2020 to support people who are vulnerable to, or should be shielded from, COVID-19. It was a joint voluntary and community sector, Southwark Council and NHS initiative to provide support and assistance to those who were isolated and could not get support from friends or family. It also provided advice and assistance on a range of issues related to COVID-19, from advice on parking for keyworkers

to delivery of emergency food parcels.

CSA proactively contacted residents known to the council as clinically extremely vulnerable or identified as vulnerable by council services. Residents were also able to self-refer to the CSA or be referred by elected members or a VCS organisation.

The most frequent requests for support were around food. Residents could be referred on to local food hubs who would then provide local support.

### Southwark Food Action Alliance (SFAA)

SFAA is an independent, borough-wide, cross-sector partnership working together to tackle food insecurity. As of July 2021, it had 130 organisations as members. SFAA aims to 'get beyond the foodbank' by creating a more holistic, long-term co-ordinated response to food insecurity, and meets for networking, learning and sharing best practice.

During the pandemic, many local organisations in SFAA were able to access a regional offer of surplus food delivered by Fareshare and The Felix Project.

### School Food Voucher Scheme

The School Food Voucher Scheme, led by Southwark Council's Education team, funded local schools to offer food vouchers during October half-term, Christmas, February half-term and Easter holidays 2020-21. Over 10,000 children received vouchers each school holiday, with vouchers equivalent of 149,000 meals being distributed during Christmas 2020 alone.

### Holiday Activity and Food Programmes

The Holiday and Activity Food programme, led by Southwark Council's Public Health team, began in summer 2020 to provide holiday club places for children aged 4-16 years old who receive benefits-related free school meals during term time. The programme is funded by Department of Education and provided 70,000 holiday club places in 2021. There are around 35 providers who deliver holiday clubs with healthy meals, enriching activities, nutritional education and signposting and referrals at around 50 programmes across the borough.

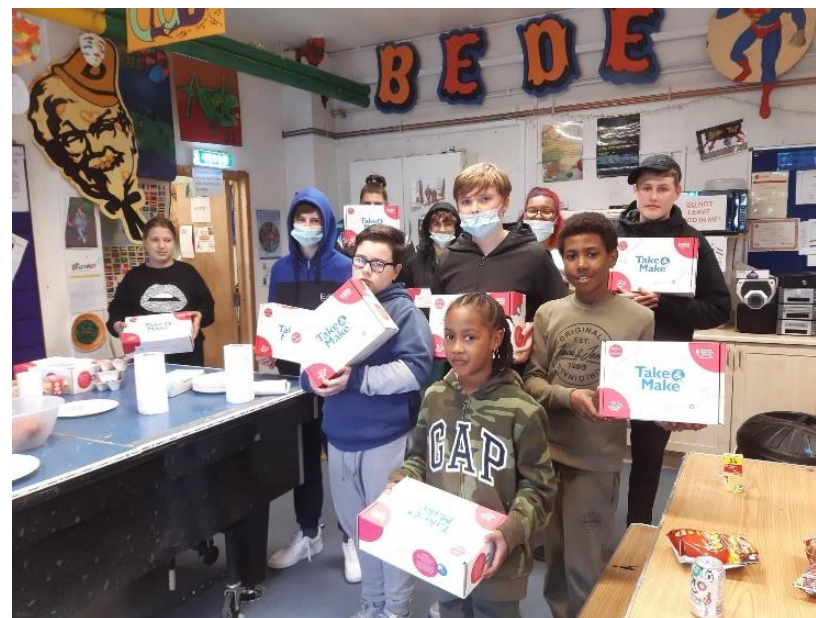


Figure 18: Children with their Take and Make boxes as part of the Holiday Activity and Food programme

One example of a Holiday and Activity Food programme is Spring Community Hub who provide 250 places a day during school holidays across 7 sites in Camberwell, Walworth and East Dulwich. The Hub provide specialist services for children and young people with additional needs, and music and dance session for the older children (12-16 years old). Spring Community Hub have received additional funding from Southwark Council to build kitchen facilities to prepare meals for all seven locations and other nearby holiday clubs, both ensuring healthy meals are provided and creating local employment opportunities.



Figures 19-20: Children at Spring Community Hub, funded by Holiday Activity and Food programme

The programme will continue to receive funding from Department for Education to December 2024. The Public Health team continue to work with providers to further improve the programme, including:

- Southwark Council's Special Educational Needs and Disabilities (SEND) team to continue to raise standards of SEND provision
- Millwall Community Trust to raise additional funding
- Southwark Culture Health and Wellbeing Partnership (SCHWeP) to continue to provide opportunities for children to engage in free creative and cultural activities

## 8.2 Education and learning

Disruption to education through school closures and isolation in response to COVID-19 infection and/or closure of bubbles significantly impacted on children's learning and their wellbeing. Children who had insufficient technology, no quiet space to focus, had parents with limited English skills or caring needs for family members were most affected by school closures.

Despite the additional challenges to continued education, both when teaching had to be remote for most children and when in-person learning was impacted by COVID-19 restrictions, schools have made great efforts to limit the disruption to students as much as possible.

### Laptops for Learning

The Laptops for Learning campaign was delivered in partnership with the London South Teaching School Hub to get laptops to schools to support education of children and young people across the borough. 1,708 devices were provided to 93 schools, with laptops and iPads made available to students for at-home learning. This was possible



through a combination of donated devices from businesses and laptops bought through donated funds and council-matched funding.

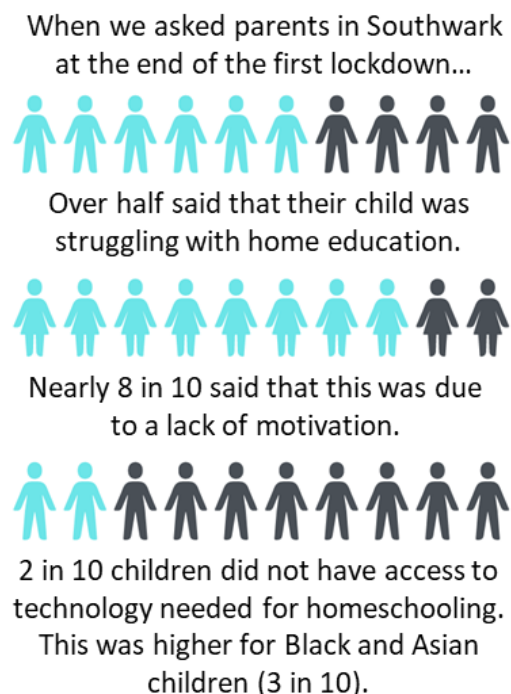


Figure 21: Findings from summer 2020 COVID-19 impacts survey (Social Life) infographic

### Kingsdale Foundation School - collaborative adaptations to COVID-19

Kingsdale Foundation School is a large secondary school and sixth form centre based in West Dulwich with designated specialisms in mathematics, physical education, and the performing/expressive arts.

Several changes introduced to the school in response to COVID-19 restrictions have remained in place as restrictions have eased, and provided an opportunity to try out new ways of working that best suit students, staff and parents. Daniel Harding, acting deputy headteacher, said that COVID-19 had led to “technological advances” for the school – students can now do consent forms for school trips online rather than paper-based, and online learning has been fully mobilised so any future disruptions e.g. snow will not impact continued learning for students. Online parents evening were first introduced to limit risk of COVID-19 transmission, but have been largely supported by parents as allow greater flexibility around work/child care commitments. Operational change to the school day such as staggered lunch times were first introduced to avoid year group bubbles mixing, but have been a successful way to improve flow through the school canteen.

Before the pandemic, the monthly parent’s forum had very good attendance with “hundreds” of parents attending. During COVID-19, engagement grew and parents became more active in working with the school to improve the day-to-day life for students. One parent has helped the school to understand the importance of ventilation for children’s learning and has built HEPA filters (high-efficiency particulate absorbing filter) for the school to install, with filters now installed in the assembly hall.

### 8.3 Older people

Older people have been most vulnerable to the direct health impacts of COVID-19, reflecting the increased risk associated with older age itself, as well as the greater likelihood of having existing health problems that increase risk of serious illness from infection. This meant that the need for isolation and shielding during lockdowns was

particularly important in this group. However, this also led to negative impacts on physical activity, levels of social interaction, and mental health and wellbeing.

### **Safe and Independent Living (SAIL)**

SAIL is a partnership team of statutory and VCS providers. During the pandemic, they contacted anyone who had accessed Age UK services in the 18 months before March 2020 (first lockdown), with priority given to the older age groups. Missed phone calls were followed up with letters. Residents were able to find out about local services which could provide support to their individual needs during COVID-19, as well as a chance to have regular check in calls with someone. Some were able to raise welfare concerns, with a focus on access to food during the initial stages of the lockdown.

### **Age UK**

Age UK helped to coordinate residents with GoodGym, Southwark Community Hub, Food2You, and other local groups who could provide support. During the early stages of the pandemic, there was a focus on access to food, whilst welfare concerns focused on mental health, loneliness and bereavement became more frequently discussed as the pandemic continued. Facilitators were able to signpost and refer to services such as Improving Access to Psychological Therapies (IAPT) and Cruse Bereavement Care, and where residents declined referral, staff continued to contact on a regular basis to check in.

### **Yalding Healthy Living and Learning Centre**

Age UK's Yalding Healthy Living Centre in Bermondsey is open to

everybody aged 50 years old and over with an ethos to "make later life fun and fulfilling". The centre organises packed programmes of weekly activity sessions, learning and skills development opportunities, meals and excursions for older adults living in Southwark, all to support their wellbeing.

In November 2021, centre members discussed the ways in which COVID-19 had impacted on their lives with officers. The main themes discussed related to isolation from family members, bereavement, and the need to maintain independence.

- One member had not seen her daughter and grandson since the start of the pandemic, as her daughter is a midwife, and she is clinically vulnerable. She said that she couldn't fully enjoy phone calls with her grandson because she couldn't see him.
- Another member spoke about the impact of not visiting loved ones in hospital when ill and having to grieve alone.
- Many members experienced isolation, even outside of periods of lockdown, as they feared catching COVID-19 on busy public transport.

Staff at the centre had built strong and trusting relationships with members prior to the pandemic, which helped them to encourage members to have open discussions over phone calls about the difficulties that they were experiencing so that the centre could support them or signpost to services that could best support the individual's needs.

Despite the challenges posed by the pandemic, and recognising the new difficulties that members faced, the Yalding team, led by Katrina Jinadu, went out of their way to ensure that they could reach out to

members and support them. Firstly, they contacted their members via the telephone to discuss how they were coping, difficulties they were facing and what support they could offer, tailoring their frequency of contact, welfare support and services to people's individual needs.

*“Older people are not a ‘one box fits all’. They are not all sitting at home, they are not all sad and lonely. We tailored our phone calls according to the support that people needed”*

Remote online sessions, as well as delivering food packages, activity packs and Christmas dinners to people's doors, were organised. They also worked to tackle misinformation spreading within the community. This recognised the differing levels of access to and familiarity with digital and online approaches, with more specific support from the team helping to connect older people with services that they needed.

Following the relaxation of restrictions, the team were able to return to in-person services at Yalding centre, in line with government guidance, as well as trips to theatres and the Royal Albert Hall. Members also valued the opportunity to engage in exercise classes again, with several noting that their mobility and that of their friends deteriorated during lockdowns.

Both Katrina's team and members mentioned that a key positive feature of the pandemic has been the way in which it encouraged members to support one another and stay in contact even outside of their time at the centre, building lasting friendships, and this is something that they would like to continue going forwards.



**Figures 22-23: Officers meeting with members of Yalding Healthy Living and Learning Centre to understand how COVID-19 affected them**

## 9. SUMMARY

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COVID-19 has had a significant, and unequal, impact on Southwark. We know that people from Black, Asian and minority ethnic backgrounds, and those who live in more deprived areas are at higher risk of infection, severe disease and death related to COVID-19. Many people experienced a larger number and/or more significant negative impacts on their financial situation, employment, education, wellbeing and mental health.

As our focus moves to recovery we must ensure all partners concentrate on reducing inequality in both access and experience of services, as well as in population outcomes. From reducing NHS waiting lists, to delivery of council and voluntary services, it is everyone's responsibility to work to reduce health inequalities in Southwark.

Partnership working was key to overcoming the many challenges created by COVID-19. Southwark Council, NHS, local businesses, education settings, care settings, and voluntary and community sector organisations all worked together to help reduce the negative impacts of COVID-19 on our residents. The success of many partnership approaches acts as an always-important reminder that everyone has a role to play in improving health for our residents.

In order to reduce health inequalities in Southwark, all local players must bring together what they know about health and wellbeing across our communities, and how they think we can improve it. Everyone will contribute something new, so partnership working is key to making health inequalities everyone's business. The more we collaborate, the better our impact can be – health inequalities will only reduce if we all play our part.

## 10. RECOMMENDATIONS

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COVID-19 has not disappeared, but we hope to be past the worst of its impacts. Now as we look forward to living safely alongside COVID-19, the Director of Public Health for Southwark has five recommendations:

1. Work more closely with residents to listen to their concerns about health and wellbeing, and work together to design and implement solutions. In order to make collaboration part of residents' everyday life, we should meet our residents in community venues such as mosques, churches, local shops and youth centres.
2. Build on the excellent work of our COVID-19 Community Health Ambassadors to broaden their work across health and wellbeing. This will support a community-led approach to health improvement.
3. Continue to support our schools, universities and care settings with a wider focus on health and wellbeing. For example, support schools with promoting healthy eating and support care homes with seasonal vaccination programmes.
4. Build on the existing relationships that have strengthened over the pandemic, with partners such as primary care and local hospitals to deliver NHS services in innovative ways to maximise uptake, especially amongst Black, Asian and Minority Ethnic groups and those living in areas of social and economic disadvantage.
5. Support voluntary and community sector organisations to always have a seat at the table and to play a principal role where statutory services have in the past traditionally led.

## 11. ACKNOWLEDGEMENTS

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Thank you to everyone who has contributed to supporting residents during COVID-19, and in shaping the scope, content and recommendations of this report.

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