

”NHS organisations in North West London are working in partnership together as ‘Anchor Institutions’ to reduce health inequalities and improve wider determinants of health through influencing local social economic conditions by adapting the way we employ people, purchase goods and services, and use building and spaces”

North West London Integrated Care System NHS Anchor Institutions Charter

Version 1.8 - December 2023

Draft for approval by
signatory organisations in
readiness for NWL ICP
Meeting in December 2023

Executive summary

We will maximise our impact as ‘anchor’ organisations by focusing on wider social determinants of health, targeting improvements towards the most deprived 20% of the population in North West London. We will use the CORE20PLUS framework to underpin this work.

This Charter was developed with and informed by community leaders from North West London and will be delivered with their involvement and in collaboration with local authority and community partners.

Our overall aim is to create employment opportunities for people who live in the local area and are from CORE20PLUS populations, and to increase the proportion of our workforce from this population.

We will focus on four broad areas of anchor activity, with a particular focus on employment and skills, and deliver work through our own organisations and collectively through ICS programmes to go further and faster in reducing health inequalities in North West London, delivering on several key pledges in 2024/2025.

We commit to leadership in this area, embedding an anchors approach within our organisations and working in partnership to maximise impact and learning. This will include using common metrics and committing to jointly reviewing our progress and impact against these.

Areas of focus:

As employers we will improve access to quality **employment and skills** development

We will use our **purchasing power** locally and for social benefit

We will use our **buildings and assets** to support communities

More equitable delivery of health services will improve how we reach and benefit local deprived populations

Joint pledges for delivery in 2024/2025:

- All NHS Trusts to become and remain London Living Wage accredited
- Pre-work programmes to facilitate local people to gain employment in their local NHS Trust
- Providing guaranteed interview opportunities for people from pre-work programmes into a proportion of entry level jobs
- Full use of the Apprenticeship Levy and work to increase spend on local people from CORE20PLUS populations

- Initiatives to support businesses owned by and employing CORE20PLUS local populations to supply good and services to public sector organisations

- Supporting communities through paid use of community venues where possible for NHS events, and increasing the community benefit derived from NHS buildings (e.g. offering space for community meetings or as warm hubs)

What is an Anchor Institution?

‘Anchor institutions’ are usually large public sector organisations rooted in and connected to their local communities. They can improve health through their influence on local social and economic conditions by adapting the way they employ people, purchase goods and services, use buildings and spaces, reduce environmental impact, and work in partnership.

An anchor institute is a place-based organisation invested in its local area. Examples include councils, universities, colleges, housing associations and emergency services. These organisations spend substantial amounts of money within the local area. While most of their employees are likely to live within the local area, and spend their wages there, they also have significant procurement and investment spend which can also be spent locally. They have a collective interest in seeing their local area improve.



The NHS is **the UK’s biggest employer**, with 1.6 million staff



In England alone, **the NHS spends £27bn every year** on goods and services



The NHS occupies 8,253 sites across England on 6,500 hectares of land

Source: The Health Foundation

Why are NHS organisations in NWL jointly signing up to an Anchor Institutions Charter?

Individual NHS and local authority organisations in North West London already carry out work as Anchor Institutions, and the success of this work relies on the commitment of both leaders and staff working within those organisations.

NHS organisations in North West London (and local authority and community and voluntary sector partners) also wish to align their work in this area and focus their collective ambition on reducing health inequalities and supporting economic and social development in North West London and linking this work to the priorities of the health and care strategy as an integrated care system.

By working jointly, NHS Anchor Institutions in North West London will share learning and achieve better outcomes than working alone. By signing this Charter, signatory organisations are demonstrating their commitment to make this work core to their business.

This North West London Anchor Charter also affirms our collective support for and involvement in London-wide Anchors work as well.

An Anchors approach focuses on both:

Community wealth building

Strong community links, bottom up,
Place-based focus

Social and economic development

The fourth aim of integrated care systems,
could be macro, including large commercial
organisations

Signatories to this Charter

Central London Community Healthcare NHS Trust
Central and North West London NHS Foundation Trust
Chelsea and Westminster Hospital NHS Foundation Trust
The Hillingdon Hospitals NHS Foundation Trust
Hounslow and Richmond Community Healthcare NHS Trust
Imperial College Healthcare NHS Trust
London Ambulance Service
London North West University Healthcare NHS Trust
West London Mental Health NHS Trust
NHS North West London

This Charter focuses on the collective development of NHS organisations as Anchor Institutions in North West London, however it recognises the essential nature of joint work with local authority and VCSE partners to effectively co-produce approaches with local communities and to address health inequalities and the wider determinants of health.

By being signatories to the Charter, NHS organisations commit to delivery of the collective pledges and to measure progress against common priorities.

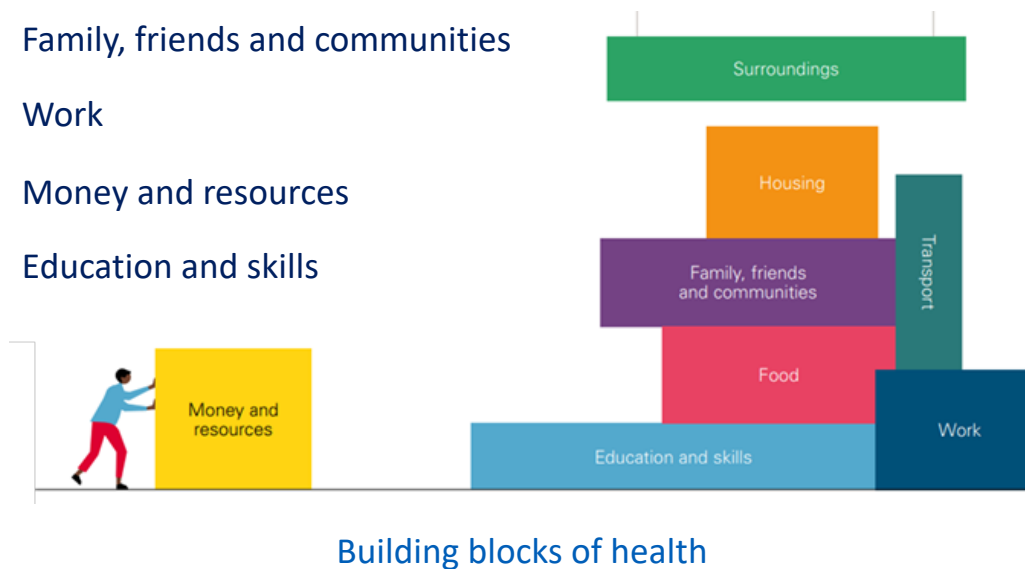
We ask local authority partners to sign the Charter as partner organisations, committed to supporting joint projects and sharing their expertise in social and economic development work and public health.

Royal Brompton and Harefield Hospitals, whilst based geographically in NWL, is part of Guys and St Thomas' NHS FT and as such as part of Anchors work led by South West London's integrated care system. NWL organisations have invited RBHH to participate as a partner in relation to the local communities they serve in Northwest London.

The inequalities that communities in North West London want us to focus on

In preparing this Charter¹ we asked community leaders and representatives in North West London to tell us which health inequalities this work should focus on prioritising for action, and what possible Anchor activities would be most effective to do this. We also worked with Directors of Public Health. Using the building blocks of health framework, they identified issues in four key areas:

- Family, friends and communities
- Work
- Money and resources
- Education and skills



Family, friends and communities

Current environment is placing increased pressure on families, including mental health

- “Cost of living crisis and daily life stresses”

Parents in particular need increased support

- “Caring responsibilities and costs are significant”
- “Need to empower parents with parenting skills”

Services can be difficult to access

- “Waiting lists (e.g., for CAMHS services and other support)”
- “Navigation of the statutory system. Impossible to access good care without help to do so”
- “Digital inequalities”

Early engagement is lacking

- “Early Help interventions are not early enough and not flexible enough”

The inequalities that communities in North West London want us to focus on

Specific groups can be disproportionately affected

- “Disabled people, carers and those with LTCs”
- “Some people / communities are more socially isolated - can be lack of third sector provision to help”

Work, money and resources

Challenging employment terms and conditions

- “Pay levels”
- “Insecure employment terms (e.g., zero hours contracts)”
- “Lack of understanding of employment rights”
- “Increased dichotomy between well-paid, high-skilled roles with lots of WFH and other flexibility and low-paid, low-skilled roles with much less flexibility”

Employment barriers

- “Lack of meaningful support for disadvantage young people to prepare for work (e.g., closing down of Connections)”
- “Digital exclusion, language barriers, and carers responsibilities”

Education and skills

Nature of education

- “Focus on results neglects other important aspects of character development”
- “Young people not building the skills they need to access work during their education”
- “Teachers can communicate low expectations to children
- Encouraging education after school”

Specific inequalities should be tackled

- “School exclusions: young people who are NEET are often "warehoused" in PRUs instead of meaningfully engaged and there are a disproportionate number of black boys making up the number of excluded pupils”
- “People with learning disabilities: targeted education awareness programmes for those with LD and families/carers (life expectancy is 20 years less than others)”

The Anchor actions that communities in North West London want us to focus on

Support people into quality work

- “Commit to being an equal opportunities employer and bringing underrepresented groups into roles”
- “Create entry level jobs for most disadvantaged people”
- “Paid ambassador roles”
- “Apprenticeships (e.g., via ABC Picture Palace)”
- “Consider apprenticeships at senior level as well, thinking about transferrable skills”
- “Adjust recruitment processes to remove barriers, including preparation support (e.g., interviews) and flexibility around interview times”
- “Access to volunteering”
- “Target local people”
- “Recruit black leaders in organisations “

Monitor outcomes

- “Deploy a standard approach to data collection so that we can understand if inequalities are being reduced or not”

Revisit employment terms and conditions

- “Pay London living wage”
- “Care workers pay parity with health workers”
- “Remove insecure employment terms (e.g., zero hours contracts)”
- “Support staff wellbeing”

The Anchor actions that communities in North West London want us to focus on

Use purchasing power to deliver social value for local communities

- “Define what providers must bring to the local community as a value”
- “Seek community input on the social value they want”
- “Ensure contracts are not so large so that few contractors can bid”
- “Make tenders less complicated”
- “Provide information about how to tender”
- “Offer coaching to support organisations to bid”
- “Set timeframes that recognise amount of time it takes to respond to tenders”
- “Tender for outcomes, not methods”

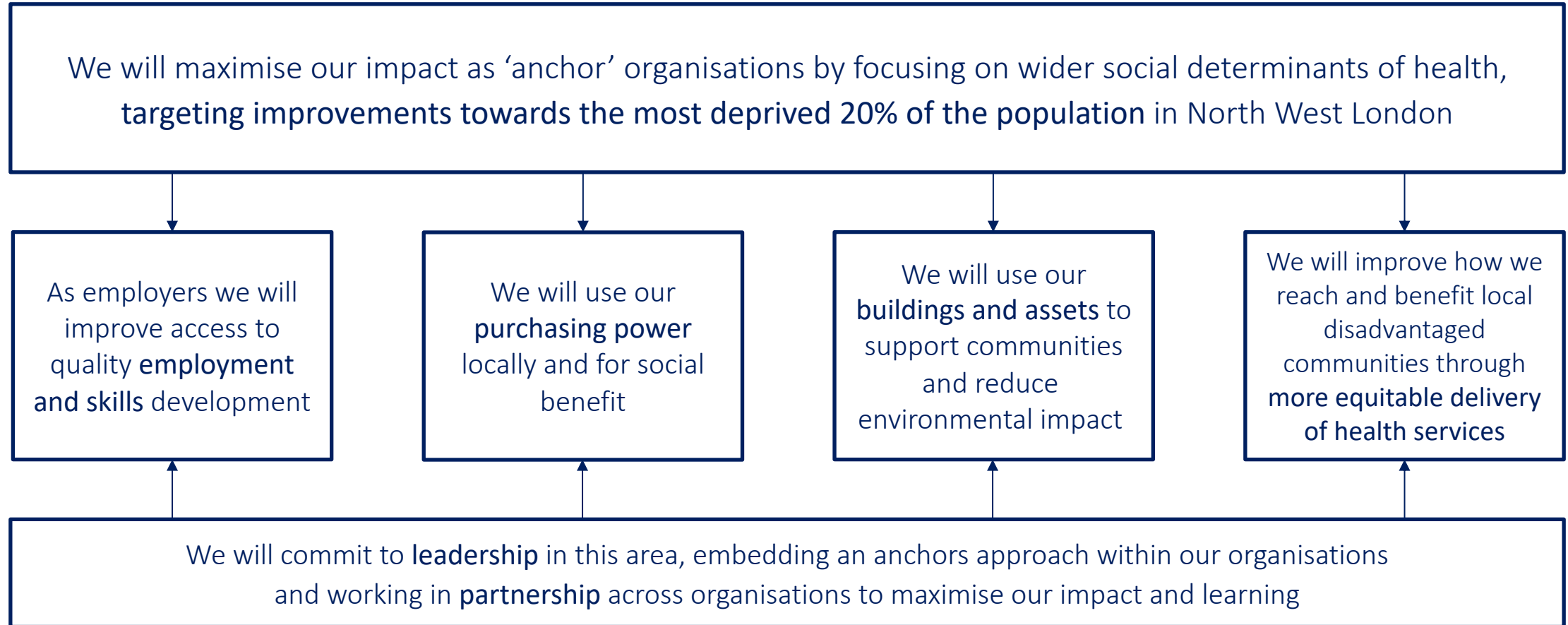
Strengthen partnership working

- “Harness the opportunity for increased collaboration between formal and informal sectors”
- “Schools need to be on board as key partners (e.g., form part of wider ICS governance and decision making) and remember other institutions - religious, youth clubs, scouts etc”

Reconfigure healthcare and other support services to improve accessibility

- “People need to feel more welcomed when received in health care settings”
- “Bring services to where people already are (as much as possible)”
- “Take an asset-based approach to disadvantaged communities”
- “See the whole person not just the disease”
- “Ensure access to generic advocacy services”
- “Target specific groups who are disproportionately affected”
- “Disabled people, carers and those with LTCs”
- “Young people”
- “Older people”
- “Ethnic minorities”
- “People in more deprived communities”

Our Anchors Framework – summarising the impact we want to have



We will use the CORE20PLUS framework to underpin this work

Our key pledges – commitment to action during 2024/2025

Evidence shows that employment and skills is the area which has the greatest potential impact for change out of our Anchors activities, and for this reason our key initial pledges (collective stretch targets) are mostly in this area.

Partners will work with the ICB People Programme and Skills Academy to support and align delivery on reducing health inequalities through their work.

Charter signatories will support each other and hold each other to account for delivery of these ambitions in the next year and beyond. There are further related metrics where we seek to make improvements in on the following pages. We will annually refresh the Charter to demonstrate progress and will adopt new pledges as existing pledges are met.

Key focus: Increase the proportion of our workforce who live in the local area and are from CORE20PLUS populations

Employment and skills

100% of North West London's NHS Trusts will be fully accredited and remain accredited as **London Living Wage** employers by October 2024 for their own staff and new contracts (with existing contracts updated by April 2025)

All trusts support greater access to good quality employment by pledging to consider pre-selected candidates for guaranteed interviews (from both CORE20PLUS backgrounds and from local **pre-work programmes***) in **at least 20% of entry level vacancies in NWL Trusts**

(a) Trusts will monitor and **increase the amount of Apprenticeship Levy spent on people from local CORE20 populations**, and pledge (b) that **unused Apprenticeship Levy will be gifted** to VCSE organisations in NWL who have plans to spend it

Purchasing power

We will develop a NWL policy for identifying new suppliers, particularly **local businesses that are owned by or employ CORE20PLUS local people**, and working with them to support them to supply to the NHS and local public sector

Buildings and assets

We will develop common policies to (a) support community groups through **paid use of community venues** for NHS partnership meetings where possible, and (b) to increase the community benefit derived from NHS buildings (e.g. offering space for community meetings or as warm hubs)

Using our influence as employers and trainers – areas of focus:

We will continue to build collective support for local people and CORE20PLUS populations by jointly contributing to the following projects and activities, most of which are accountable to the People Board and often delivered by or with the NWL Health and Care Skills Academy:

- Pre-employment skills training, such as that targeted to young people with SEND or care leavers in NWL, and access projects such as the NWL Volunteer to Career policy and the Refugee Employment Programme
- Working with partners to develop support for local people who are from CORE20 populations and PLUS groups and who have participated in pre-employment skills training to access entry-level jobs in NHS organisations.

We will challenge each other collectively to:

- Establish a co-ordinated strategy for community outreach and working with educational organisations to support routes into training and work and summer placements – including highlighting NHS careers which may not be visible locally
- support career progression and representation of staff from CORE20PLUS backgrounds at all levels of our organisations
- recruit in ways that maximise local people being able to secure good jobs
- Support progress in primary care towards London Living Wage accreditation

Leaders will: enable their organisations to deliver in this area; bring a health inequalities focus to the ICS Workforce Strategy; and build effective relations with local authority and VCSE partners as well as the NWL Health and Social Care Academy

Community leaders in North West London told us they want us to:

1. Create jobs locally that provide a decent wage, greater security and flexibility to support families struggling with caring responsibilities and cost-of-living pressures
2. Help remove employment barriers for disadvantaged local people and communities such as digital exclusion, language barriers and social isolation
3. Work with education partners to support young local people with increased aspiration and to acquire job skills, particular young black boys who are not in education, employment or training.

We will measure our collective impact in this area by committing to jointly conduct baseline measures and review our progress against the following metrics:

- Proportion of staff paid the London Living Wage
- Participation in pre-work programmes (e.g. volunteering, internships, work placements or job skills training)
- Proportion of people recruited into employment in the trust out of those participating in pre-work programmes
- Proportion of local people and/or those from CORE20 populations who are recruited into employment in the trust out of those participating in pre-work programmes
- Proportion of the Apprenticeship Levy spent on local and CORE20 populations

Using our purchasing power – areas of focus:

We will continue to build collective support for local people and CORE20PLUS populations by jointly contributing to the following projects and activities, working in partnership with North West London's Procurement Service:

- Work collectively on the options for social value elements of NWL contracts in a way that delivers on the aims of this Anchors Charter and benefits local people who face deprivation and also disadvantaged communities
- Work to develop a co-ordinated approach to purchase more from local small to medium enterprises and diversely-owned businesses, and to encourage bids from these businesses and develop their capacity to bid
- Co-produce a definition of "local suppliers which are owned by or employ local people from within CORE20PLUS populations" with local communities
- Develop a strategy or approach around requiring sub-contractors to pay the London Living Wage to their staff which engages with differing financial contexts
- Learn from the London Anchor Institutions Network, the London Procurement Partnership and other organisations who have developed Anchor Procurement frameworks and approaches

Community leaders in North West London told us they want us to:

- Define what providers must bring to the local community as a value (as part of procurement)
- Seek community input on the social value that will be sought from procurement processes
- Ensure contracts are not so large so that few contractors can bid
- Make tenders less complicated
- Provide information about how to tender for local and diversely owned business

We will measure our collective impact in this area by committing to jointly conduct baseline measures and review our progress against the following metrics:

- 10% social weighting value in all applicable contracts
- Proportion of annual addressable spend that is with local suppliers and of these, which are owned by or employ people from CORE20 populations in NWL

Leaders will: enable their organisations to deliver in this area; link their Anchors work in the community with the social value work of the NWL London Procurement Service, look for opportunities with partners at Place to consider common aims in local purchasing

Using our buildings and assets – areas of focus:

We will continue to build collective support for local people and CORE20PLUS populations by jointly contributing to the following projects and activities, working in partnership with partners at Place and with projects such as One Public Estate:

- Work collectively on developing a common approach to new developments that engages with local communities and develops opportunities to maximise economic, health, environmental and community benefits for local people and CORE20PLUS populations
- Work collectively to develop common approaches for maximising the use of existing public buildings for community benefit, particularly at Place with partners when considering integrated neighbourhood teams
- Consider health and sustainability benefits of collectively reviewing food and drink provision and other non-clinical services run from Anchor buildings

We will work with the Sustainability Board to ensure a health inequalities and social and economic development lens continues to be brought to bear on sustainability work in North West London.

Leaders will: connect with other partners at Place and beyond to encourage sharing of buildings and community assets for the benefit of joined up services and community benefit

Community leaders in North West London told us they want us to:

- Partner more effectively between services from different organisations – including partnering between the formal and informal sectors

Development leads for Anchors work from local authorities and NHS organisations in North West London told us they want us to:

- Share progress on use of strategic estates reviews, in particular looking at neighbourhoods and shared delivery sites

Action in areas of sustainability in relation to buildings and assets, for example around greener transport, will be measured through the ICP's Sustainability Board.

We will measure our collective impact in this area by committing to jointly conduct baseline measures and review our progress against the following metrics:

- Utilisation rates for buildings and assets
- Community use of existing buildings / booking or rooms or assets by CORE20PLUS population or groups

Ensuring more equitable delivery of health services – areas of focus:

We will continue to build collective support for local people and CORE20PLUS populations by jointly contributing to the following projects and activities, working jointly with both commissioners and providers of services:

- Share best practice between NHS organisations on service reviews and audits to address inequalities and health equity
- Support Place-Based Partnerships and provider collaboratives to address the CORE20PLUS framework in their collective and joint provision of health and care services
- Share successful approaches to working with VCSE and ‘community anchor’ organisations to better deliver and gain uptake of services, especially by CORE20PLUS populations

Leaders will: share learning with partners around their experiences of and existing approaches to reviewing service delivery from the perspective of health equity and ensuring access to CORE20PLUS and marginalised communities

Community leaders in North West London told us they want us to:

1. Bring services to where people already are (as much as possible)
2. Make the system more welcoming, holistic, strengths-based and with better access to advocacy support for service users
3. Make the ‘system’ easier for people to navigate, particularly for those from disadvantaged communities
4. Consider how to better support people who are socially isolated or who struggle to access services because of disabilities, caring responsibilities or digital exclusion.

Further work is required to develop a common approach to addressing health inequity in service provision and the NWL Anchors Community of Practice will be tasked with developing proposals for how to measure this work consistently, based on learning from existing work in NWL and best practice.

The significance of leadership and partnership in this work

The ambition of our collective Anchors work is to change the culture of NHS organisations, so that pro-actively addressing health inequalities and the wider determinants of health through social and economic development work is seen as core business rather than a special project or the sole responsibility of local authority and VCSE partners.

For this work to succeed, leaders at all levels will need to bring a health inequalities lens to all aspects of our organisations' work, and we must challenge each other when programmes of work are not sufficiently ambitious in addressing inequity or not addressing opportunities for local economic development.

Many NHS and partner organisations in North West London have effective plans and arrangements in place to advance this agenda, and through this Anchors Charter we intend to harness their experience and capability and invite them to challenge our work across the ICS to learn from their progress.

The role of leaders in Anchor Institutions:

We ask leaders to champion and resource an Anchors strategy in their organisation if one does not exist already, and to appoint an Anchor Lead who is mandated to act for the organisation in the collective work at NWL level, including contribution to relevant NWL Anchors groups.

The role of the NWL Anchors Community of Practice:

The Community of Practice will bring together Anchor Leads from all Charter organisations to share learning, develop approaches, reflect on progress, and take collective action in progressing the Charter work. This may include developing proposals for action to be delivered by the Development Steering Group where necessary.

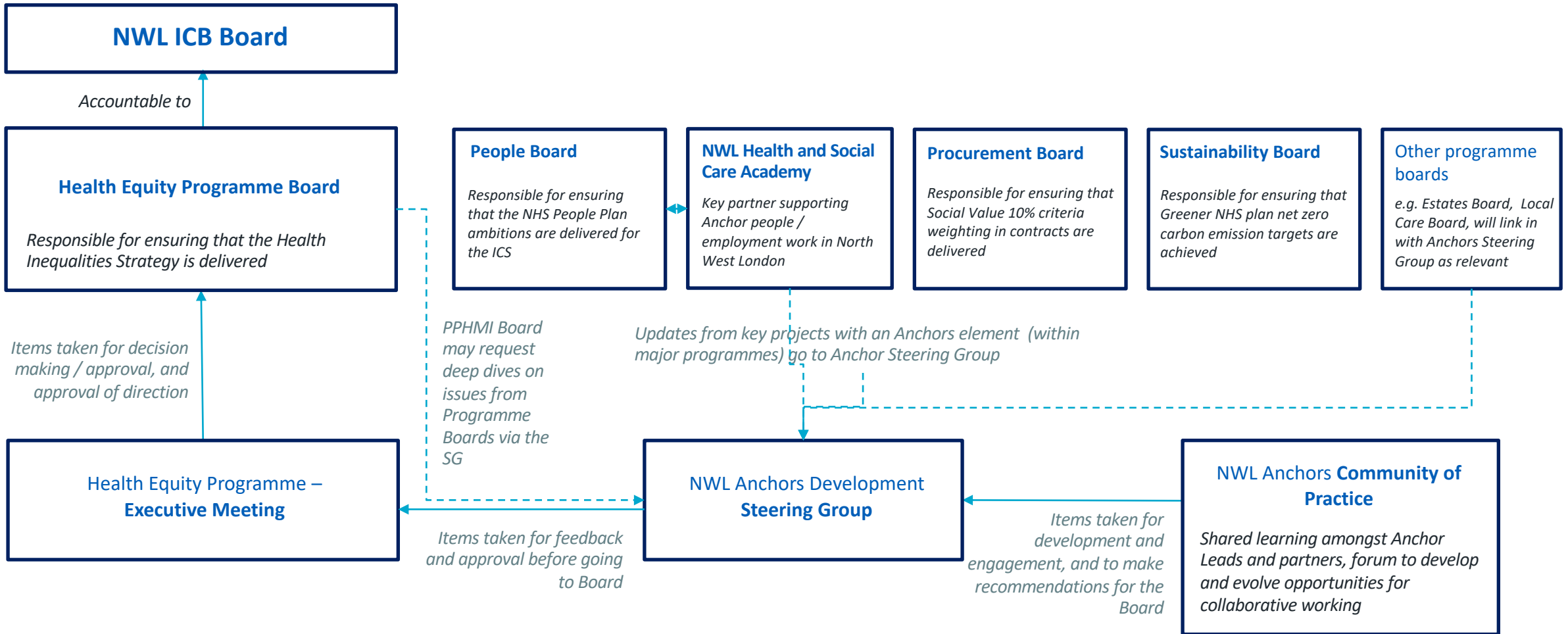
The role of the NWL Anchors Development Steering Group:

The Steering Group will be responsible for ensuring that organisations collectively are delivering on their Charter commitments and will engage stakeholders and decision makers on proposals developed by the Community of Practice.

The role of the ICB Health Equity Programme team:

The team will facilitate the Community of Practice and support the Development Steering Group with less emphasis on a PMO role, and more emphasis on information sharing and facilitation as well as an 'incubator' or catalyst role to help kick-off, unblock and enable the work of the Leads

How organisations will collectively govern this work and track Charter progress



How we will support Anchor Institutions in NWL to develop their approaches

The Health Equities Programme team within NWL Integrated Care Board will support Anchors Leads in organisations across North West London by facilitating the following support resources:

- The Health Inequalities team will establish **regular communications** to share information and keep partners updated on work progress (a bi-monthly newsletter covering Charter updates, case studies, upcoming Anchor events, relevant publications, etc)
- Facilitating anchor partners to come together regularly to share progress and discuss challenges via a **Community of Practice**, which will exist to address problems and to ensure that the Anchor inequalities focus of the Charter is continuously brought to bear on programmes that are otherwise part of the mainstream of the ICB and the ICS (e.g. programmes in relation to workforce, procurement and green or sustainability strategies)
- Make details of local Anchor actions and practices accessible (a repository of **case studies**)
- Keep abreast of and **share evidence of what works** (material stemming from the Health Anchor Learning Network (HALN), London Anchor Institutions' Network (LAIN), other ICS/ICB leads, and general literature published by organisations such as the World Health Organisation, Health Foundation, etc)
- Provide **intelligence and insights** on local health needs and inequalities to enable Anchor Institutions in NWL to target their actions on specific locations and cohorts with greatest need (e.g., areas with greatest unemployment)
- Keep an eye out for, and **make known funding opportunities** that relate to anchor priorities (e.g., grants)

Signatures on behalf of NHS organisations in North West London

We the undersigned, as NHS leaders and signatories to this Charter, commit on behalf of our organisations to delivery of the collective pledges and to measure progress against common priorities. We will develop an Anchors approach within our own organisations and contribute to collective action by Anchor Institutions in North West London, in order to increase employment opportunities for the most deprived 20% of local people as well as specific groups that experience poorer health outcomes:

Signatures on behalf of local authorities in North West London

We the undersigned, as local authority leaders and partner signatories to this Charter, commit on behalf of our organisations to support our NHS partners in North West London through the Integrated Care Partnership and through place-based partnerships, working jointly to deliver on the ambitions of this Charter in order to increase employment opportunities for the most deprived 20% of local people as well as specific groups that experience poorer health outcomes: