

GREATER LONDON AUTHORITY

REQUEST FOR MAYORAL DECISION – MD2906

Health Inequalities Strategy Work Programme 2021-22, 2022-23 and 2023-24

Executive summary:

The Mayor has a statutory responsibility to produce a health inequalities strategy (HIS) for London. The HIS provides an evidence-based framework for action on health inequalities in London. This MD seeks approval for expenditure for projects relating to the implementation of the HIS until 2024.

Decision:

That the Mayor approves:

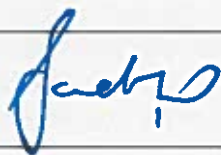
- i. expenditure of up to £739,000 over three years (2021-22: £276,000 and subject to annual approval of the GLA budget, 2022-23: £243,000; and 2023-24: £220,000) for the GLA Health and Wellbeing team to deliver the work set out in section 2 of this MD relating to Londoners' health and wellbeing
- ii. the receipt and expenditure of £26,000 from the Health Foundation on a project to support regional action to tackle health inequalities.

Mayor of London

I confirm that I do not have any disclosable pecuniary interests in the proposed decision and take the decision in compliance with the Code of Conduct for elected Members of the Authority.

The above request has my approval.

Signature:



Date:

16/12/21

PART I - NON-CONFIDENTIAL FACTS AND ADVICE TO THE MAYOR

Decision required – supporting report

1. Introduction and background

- 1.1. The London Health Inequalities Strategy (HIS) sets out the ambitions for London to be a healthier, fairer city, with all Londoners having the best opportunities to live a long life in good health. Working together with the wide range of organisations that have a role to play in tackling the causes of health inequalities, we want to create a city where nobody's health suffers because of who they are or where they live.
- 1.2. The HIS was published in 2018 to support this vision. A progress report on the first three years of implementation was published earlier this year, and a new implementation plan for this Mayoral term will be published shortly. The new plan will reflect commitments published in the 2021 manifesto, the health inequalities priorities which have arisen from the pandemic to date and the London Recovery programme.
- 1.3. The 10-year HIS provides an evidence-based framework for action on health inequalities in London. It is framed around five aims:
 - **Healthy Children:** every London child has a healthy start in life
 - **Healthy Minds:** all Londoners share in a city with the best mental health in the world
 - **Healthy Places:** all Londoners benefit from an environment and economy that promotes good mental and physical health
 - **Healthy Communities:** all of London's diverse communities are healthy and thriving
 - **Healthy Living:** the healthy choice is the easy choice for all Londoners.
- 1.4. COVID-19 has had a significant impact on London's health inequalities, and the GLA Health & Wellbeing team's work programme (see MD2650, MD2688, MD2704, and MD2799) has been reviewed to ensure that work is focused on the ongoing and emerging needs of Londoners. The London Recovery programme has been established in response to the impact of the COVID-19 pandemic, and seeks to address the following grand challenge for London: to restore confidence in the city, minimise the impact of COVID-19 on communities, and build back the city's economy and society. The programme has established nine recovery missions, two of which focus explicitly on health. Health and wellbeing is also a cross-cutting principle for consideration across all the missions.
- 1.5. Activity to tackle health inequalities is progressed through partnership working, with the Mayor of London having a health leadership role. The London Health Board and the Health Equity Group (co-chaired by the statutory health adviser) are key bodies to drive forward and support London activity.
- 1.6. The items in this decision relate to GLA Health & Wellbeing team activity to support implementation of the HIS. But they represent only a small part of the delivery of the HIS, with delivery also sitting in other parts of the GLA and wider GLA Group, and with partners. A fuller summary of the delivery will be published in the forthcoming HIS Implementation Plan.
- 1.7. Expenditure will take the form of grant awards or payment for services procured, depending on the nature of the work concerned and in line with relevant GLA procedures including the GLA's Contracts and Funding Code.

2. Objectives and expected outcomes

- 2.1. The table below gives an indicative breakdown of activities for this programme and the decisions being sought for proposed expenditure across the next three financial years. The GLA Mayoral Budget for 2022-23 and 2023-24 has yet to be approved; therefore, the proposed expenditure in future years would not be committed until final budget approval is confirmed.

Deliverable	Funding		
	2021-22	2022-23	2023-24
HIS implementation			
Partnership programme	£25,000	£50,000	£50,000
HIS programme support	£16,000	£25,000	£25,000
HIS data and measurement	£75,000	N/A	N/A
Exploratory work for new HIS-related manifesto commitments	£20,000	N/A	N/A
HIS policy and programmes			
Social prescribing: supporting voluntary, community and social enterprise (VCSE) delivery	£25,000	£33,000	£35,000
Social prescribing: social welfare legal advice (SWLA) and health collaboration	£40,000	£50,000	£50,000
Social prescribing: championing future development and embedding social prescribing in the GLA	£40,000	£40,000	£20,000
Community development in health: community of practice network and masterclasses	£35,000	£45,000	£40,000
Total for approval in this decision	£276,000	£243,000	£220,000
Grand total	£739,000 TBC		
Regional Health Inequalities Project (Health Foundation grant)	£26,000 (income and expenditure)	N/A	N/A

HIS implementation

- 2.2. This work programme supports the Mayor's leadership-for-health role and comprises activity to support pan-London activity to tackle health inequalities, including through supporting, mobilising and empowering a wider range of partners to act. Further detail on each work programme is below.
- 2.3. *HIS partnership programme (£25,000 in 2021-22; and £50,000 in 2022-23 and 2023-24)*: Activity to support the implementation of the London HIS with London partners. This will include a series of at least five workshops during 2022 and 2023, and other collaborative activity informed through partnership working, to progress health inequalities priorities. It will include consultancy/research projects to: support partnership engagement in the health inequalities programme; and build opportunities and evidence to support the delivery of the priority actions in the implementation plan.
- 2.4. *HIS programme support expenditure (£16,000 in 2021-22; and £25,000 in 2022-23 and 2023-24)*: Resource to support memberships and journal subscriptions, as well as small ad hoc expenditure relating to the work programme, such as travel, accommodation, catering, design and graphics, printing, and room bookings.
- 2.5. *HIS data and measurement (£75,000 in 2021-22)*: Resource to support work to develop the evidence base and explore the data around health inequalities in London, including in relation to priorities of the London recovery programme.
- 2.6. *Exploratory work for new HIS-related manifesto commitments (£20,000 in 2021-22)*: Resource to support work to progress manifesto commitments relating to the HIS. In 2021-22 this resource will

support the implementation of the Mayor's manifesto commitment to remove harmful gambling advertising from the TfL network. The funding will be allocated to commission an external academic partner to review and/or add to the evidence base for the public health impacts of gambling advertising.

HIS policy and programmes

- 2.7. Social prescribing: The Mayor has committed to supporting the roll-out of social prescribing, ensuring it is accessible to all Londoners, particularly those who could most benefit from it. Social prescribing is a means of referring (for example, by a GP) or improving access to a range of social support and activities delivered in the community (often by the VCSE sector) to the end of improving people's health and wellbeing. Social prescribing was one of the five key ambitions of the HIS.
- 2.8. Work on social prescribing has been delivered in partnership. In 2019 the GLA, Healthy London Partnership (HLP) and the London Social Prescribing Network published 'Next Steps for Social Prescribing', which set out a partnership approach for growing social prescribing in London. This was developed with extensive consultation, particularly with the VCSE sector. Since then, social prescribing has been mainstreamed within the NHS Long-Term Plan and over the last 18-24 months link workers have been appointed in every GP practice. During the pandemic the GLA, working with partners, delivered additional networking capacity across the system to support different sectors and allow social prescribing activity to be shared.
- 2.9. With social prescribing now widely available in London, the Mayor's support for social prescribing has been focusing on the areas where we can best add value:
- supporting the VCSE sector to deliver social prescribing as an equal partner
 - promoting and supporting collaborative work between boroughs, health and VCSE partnerships working
 - championing the future development of social prescribing in London
 - supporting and embedding social prescribing quality and impact across the GLA.

Activity across each of these areas is outlined below.

- 2.10. *Supporting VCSE delivery (£25,000 in 2021-22; £33,000 in 2022-23; £35,000 in 2023-24)*: This resource is for the continuation of funding for the VCSE social prescribing network. The GLA commissioned London Plus to deliver the network in 2019-20. London Plus is the main organisation within the capital that supports VCSE organisations to connect, share learning and collectively use their voices to influence and change policy. The network has increased VCSE status in social prescribing in London, with the Network Coordinator sitting on all major London social prescribing forums and some national forums. The membership and influence of the network continue to increase. The network is an enabler for several recovery missions, through bringing together the voices of the VCSE sector. It is especially relevant to the Building Stronger Communities, and Mental Health and Wellbeing missions. A multi-year approval is requested as this involves a dedicated role. Further we are keen to provide London Plus as a VCSE partner, and the network as a key part of the London social prescribing infrastructure, some stability.

Previous approvals: DD2419 approved expenditure for the establishment of the network, and MD2688 agreed a variation to that expenditure.

- 2.11. *Collaboration to improve access to social welfare legal advice (SWLA) (£40,000 in 2021-22; £50,000 in 2022-23 and 2023-24)*: There is good evidence on the impact that access to SWLA can have on health and wellbeing. This work programme aims to increase collaboration between the health sector and SWLA provision. It will directly support the Robust Safety Net recovery mission. It is informed by previous work commissioned by the GLA on SWLA in health settings, including the commissioned

report, "Collaboration between social prescribing and SWLA services in healthcare setting", published January 2021; webinars held in January and March 2021; and case studies. This funding will be used across three years to support the Robust Safety Net mission activity with:

- funding a SWLA training offer in health (and potentially other) settings, to upskills those involved in social prescribing, and identify barriers to commissioning SWLA in health settings
- a stretch funding pot for SWLA partnerships funded through the Robust Safety Net programme to expand the scope of their work to include health settings or social prescribing networks
- commissioning a learning partner, funding a dedicated learning implementation role, and/or funding learning/stakeholder activity to use and embed learning from the project and the Robust Safety Net mission as a whole.

A multi-year approval is requested to reflect the multi-year commitments of the Robust Safety Net Mission, and allow us to ensure health is a key sector embedded in the Robust Safety Net programme, to ensure we are maximising the potential health benefits.

Previous approvals: MD2323 – Health Team Work Programme 2019-20; ADD2492 – Social Prescribing and Mental Health.

- 2.12. *Championing future development and embedding social prescribing in the GLA (£40,000 in 2021-22; £40,000 in 2022-23; and £20,000 in 2023-24)*: There are considerable opportunities to better embed social prescribing in work that is happening across the GLA. A commissioned project nearing completion seeks to bring together a range of examples of how GLA-led activities have supported social prescribing, drawing lessons from them to further support this practice. This project will identify case studies and good practice; and make recommendations for further activity to enhance the GLA social prescribing engagement with VCSE, link workers, and commissioning and evaluation activity. This resource will support the implementation of recommendations, and over the next few years will resource related work to support the embedding of social prescribing into GLA work programmes identified as having considerable potential for further development – for example, adult education and the environment programme (i.e. green social prescribing).

Previous approvals: ADD2492 – Social Prescribing and Mental Health.

- 2.13. *Community development in health: community of practice network and masterclasses (£35,000 in 2021-22; £45,000 in 2022-23; and £40,000 2023-24)*: This builds on an existing work programme, to share learning and best practice on what works at the local community level to build healthy and resilient communities. Community development as an approach is recognised as an effective way to improve health outcomes, including for Black, Asian and minority ethnic communities who have experienced a disproportionate impact of COVID-19, and experience more barriers to accessing healthcare and support. A successful masterclass programme was delivered in 2019, with participants subsequently brought together to form a network. This resource is allocated to support the continuation of the masterclasses programme and support the network. These activities will provide strategic support to enable more community development in health locally and show the Mayor's leadership. The funding will be used for the following:

- To support the development of a community of practice network to promote health-focused community development, and support practitioners to share good practice across London. Outputs will include work across integrated care systems (ICS), network meetings and peer-to-peer learning events.
- To deliver the Community Development for Health masterclass over two to three years with a cohort of an estimated 100 delegates each year. This will work in partnership with the wider health system to seek participants from PHE, NHS, VCSE sectors and across ICS areas.

A multi-year approval aligns with the HIS implementation plan which runs from 2022-2024. Community empowerment and collaborative practice with communities is a theme throughout the HIS. The community of practice network provides a London wide delivery mechanism to engage across sectors and the masterclass provides alumni for the network.

Previous approvals: MD2323 – Health Team Work Programme 2018-19; MD2439 – Health Team Work Programme 2019-20; and MD2688 – Health Team Work Programme 2020-21. This activity will be further supported by £25,000 approved in MD2704 – Recovery Fund for the Health Community Leaders.

Regional Health Inequalities Project (Health Foundation grant)

- 2.14. We are also seeking a decision on the receipt and expenditure of £26,000 from the Health Foundation on a project to support regional action to tackle health inequalities. This is an extension to the grant agreed in MD2406. This income is to be spent in 2021-22.
- 2.15. In 2018-19, a three-year work programme was agreed with, and grant-funded by, the Health Foundation, to support the acceleration of activity on health inequalities across England's devolved regions, via Mayoral-led authorities. The Health Inequalities project underwent a significant redesign following the disruption created by the COVID-19 pandemic. This redesign has been positive in reframing the project and achieving significant learning over a relatively short period.
- 2.16. In September 2021 it was agreed that the Health Foundation would provide additional monies to support the progression of the project till the end of 2021. All the resource provided in this grant will be spent on the project in the 2021-22 financial year, and any unspent resource will be returned to the Health Foundation.

3. Equality comments

- 3.1. Under section 149 of the Equality Act 2010, as a public authority, the GLA must have 'due regard' of the need to:
 - eliminate unlawful discrimination, harassment and victimisation
 - advance equality of opportunity and foster good relations between people who have a protected characteristic and those who do not.
- 3.2. The Mayor's Equality, Diversity and Inclusion (EDI) strategy sets out how the Mayor will help address the inequalities, barriers and discrimination experienced by groups protected by the Equality Act 2010. There is considerable alignment between the EDI strategy and the HIS, with both seeking to take action on the drivers of inequalities – such as income, air quality and housing – that are framed in the HIS as the economic, social and environment determinants of health. The population groups outlined in the EDI strategy – those with protected characteristics – are often the same as those we focus on in the HIS, who experience poorer health outcomes. As well as this alignment, there are a number of objectives in the EDI strategy on which the Health and Wellbeing team specifically provide updates for the EDI action plan, and feed into the Mayor's Annual Equality Report (MAER). This includes objectives on mental health. Publication of the MAER is a legal requirement and outlines the arrangements put in place by the GLA over the last financial year to demonstrate that due regard has been paid to the principle that there is equality of opportunity for all people in the exercise of the Mayor's general powers.
- 3.3. An Integrated Impact Assessment, which included an Equalities Impact Assessment (EIA) within its scope, was conducted as part of the development of the HIS. This identified major positive and negative impacts of the programme for groups protected under the Equality Act 2010; and proposed ways to strengthen benefits, mitigate negative impacts, and identify issues concerning the four cross-cutting themes under the GLA Act 1999. The HIS was adopted in October 2018 and the

Integrated Impact Assessment was published at the same time. An example of how the HIS was adapted to reflect the EIA relevant to this MD was ensuring social prescribing work considered older and more disadvantaged Londoners. The EIA also recognised that many of the policies and programmes in the HIS specifically targeted low-income Londoners.

- 3.4. A series of 14 population health inequalities indicators are monitored as part of the implementation of the HIS. These demonstrate the gap in outcomes between different populations on key metrics. There is some overlap between these measures and those reported on for the EDI strategy, e.g. child obesity.
- 3.5. Further work has been undertaken in the last year to understand the impact of COVID-19 on health inequalities, exploring the health impact on different populations. A number of research reports were also published which identified the impact on specific vulnerable cohorts. These included the PHE reports [COVID-19: review of disparities in risks and outcomes](#) and [COVID-19: understanding the impact on BAME communities](#). The Mayor commissioned a Rapid Evidence Review to gain a better understanding of the impact for London: [Inequalities in relation to COVID-19 and their effects on London](#). The Deputy Mayor for Communities and Social Justice convened a series of virtual roundtable conversations and community meetings with groups and community leaders between April and September 2020. The 21 roundtables and community meetings reached and engaged with 250 civil society and community groups. The report, [Map of Community Views: COVID-19](#), summarises the findings. A monthly [Community Response Survey](#) provides real-time feedback on changes in voluntary and community-sector priorities and issues based on their community contacts. This learning continues to inform the work programme of the Health and Wellbeing team. For example, these pieces of work have highlighted financial insecurity and the importance of improving access to SWLA, which has informed the social prescribing work programme.

4. Other considerations

Key risks and issues

- 4.1. Risks are assessed and managed on a programme basis. Cross-cutting and major risks are reported quarterly through the GLA's corporate performance management process. At the time of writing, the major risks are as follows:

Risk	Mitigation
If the COVID-19 pandemic escalates, it may make it difficult to engage with partners and stakeholders across the health and care system, as is necessary to progress key work programmes relating to the HIS.	We are working through the existing partnership infrastructure, where possible, to progress this work programme. There has been considerable work done during the development of the HIS implementation to bring partners and stakeholders into this process.
Challenges in finding appropriate organisations to submit tenders for projects.	We have developed a long list of possible organisations, working with other GLA teams and partners, so we have a broad range of potential contractors to approach.
Ongoing pressure relating to COVID-19 – especially for the health sector, including social prescribing link workers – may reduce engagement in the SWLA activity.	The GLA Health and Wellbeing team are working in partnership with HLP and the wider London Social Prescribing Partnership Group to embed the work on SWLA in the health sector. Activity during 2020-21 indicated high support, and a willingness to develop SWLA in collaboration with the healthcare system and settings. The work programme will be agreed with the Equality and Fairness team, and HLP.

The community of practice network, for community development in health, is being established; it is reliant on the volunteers on the planning group.

The procurement of an external support agency will support the network to establish itself. It is proposed to include VCSE organisations from the network in the tender list. A further round of community development masterclasses will seek to refresh and build the network over the next two years. The timeline for the delivery of training has flexibility built in; and there is scope to deliver training at scale and at pace if needed. Further system support and co-funding will be sought. The planned masterclasses will provide a further cohort of alumni to the network.

- 4.3 The GLA health programme is directly related to delivery of the Mayor's HIS, a statutory duty under the GLA Act 1999.

Impact assessment and consultations

- 4.4 Impact assessments have been conducted on the key elements of the programme, as detailed above.
- 4.5 The HIS was subject to extensive consultation to inform its development in 2017 and 2018. The work programme has further been informed by community engagement over the last 18 months.
- 4.5 There are no known conflicts of interest to note for any of those involved in the drafting or clearance of this decision.

5. Financial comments

- 5.1 Approval is being sought for receipt of £26,000 of external income from the Health Foundation as a funding contribution to support the Regional Health Inequalities Project.
- 5.2 Approval is also being sought for expenditure totalling £765,000 for the Health Inequalities Strategy (HIS) programme over 3 financial years (2021-22, 2022-23 and 2023-24) as detailed in the table under paragraph 2.1 and summarised below.

	2021-22 £	2022-23 £	2023-24 £	TOTAL
HIS Implementation	136,000	75,000	75,000	286,000
HIS Policy and Programmes	140,000	168,000	145,000	453,000
Regional Health Inequalities Project (Health Foundation grant)	26,000			26,000
TOTAL	302,000	243,000	220,000	765,000

- 5.3 Of the £765,000 total expenditure: £105,000 will be funded by the 2021-22 Social Prescribing Budget, £171,000 will be funded by the 2021-22 HIS Mobilisation Budget and £26,000 by 2021-22 external income funding from the Health Foundation; £463,000 (£243,000 in 2022-23 and £220,000 in 2023-24) will be funded by the HIS Mobilisation budget. All budgets are held within the Health Units budget allocation for each respective financial year.
- 5.4 This decision is requesting funding that is not yet assured for 2022-23 or 2023-24. The GLA may be subject to future funding cuts and the expenditure planned here may not be affordable. To this end, break clauses have been incorporated into contracts. Officers need to be aware that this programme will not be subject to any more favourable treatment in future funding rounds than programmes that

have not requested funding for future years, meaning the break clauses may well have to be exercised. The funding allocation in future financial years will be subject to the normal annual budget setting process and is subject to change.

6. Legal comments

6.1 The foregoing sections of this report indicate that the decisions requested of the Mayor fall within the statutory powers of the Authority to promote and/or to do anything which is facilitative of or conducive or incidental to social development within Greater London and in formulating the proposals in respect of which a decision is sought officers have complied with the Authority's related statutory duties to:

- (a) pay due regard to the principle that there should be equality of opportunity for all people
- (b) consider how the proposals will promote the improvement of health of persons, health inequalities between persons and to contribute towards the achievement of sustainable development in the United Kingdom
- (c) consult with appropriate bodies.

6.2 In taking the decisions requested of him, the Mayor must have due regard to the Public Sector Equality Duty; namely the need to eliminate discrimination, harassment, victimisation and any other conduct prohibited by the Equality Act 2010, and to advance equality of opportunity between persons who share a relevant protected characteristic (race, disability, gender, age, sexual orientation, religion or belief, pregnancy and maternity and gender reassignment) and persons who do not share it and foster good relations between persons who share a relevant protected characteristic and persons who do not share it (section 149 of the Equality Act 2010). To this end, the Mayor should have particular regard to section 3 (above) of this report.

Funding

6.3 The officers are seeking approval of a budget of £739,000, part of which will be used to fund the projects of third-party organisations. To that end, the officers are reminded to comply with the requirements of section 12 of the Authority's Contracts and Funding Code (the "Code") when allocating funding to third parties. Furthermore, the officers must ensure that an appropriate funding agreement be put in place between the Authority and the recipients of the funding before any part of the funding be paid.

Procurement

6.4 The officers are reminded to comply with the requirements of the Code, when the Authority procures services or supplies in furtherance of the projects related to the budget the subject of this decision form.

Receipt of funding

6.5 The second decision in this decision form seeks approval for the Authority's receipt of £26,000 of funding from the Health Foundation. The officers must ensure that they comply with any conditions attached to the grant of funding by the Health Foundation.

7. Planned delivery approach and next steps

7.1 A detailed business plan for the work of the Health and Wellbeing team will be developed, setting out the full range of programmes, policy and advocacy work the team plans to undertake in 2021-22 alongside a timeline for each specific deliverable and a longer term plan to 2024. The below table summarises milestones/timeframes for delivery in 2021-22.

Milestone	Date	Evidence
HIS Partnership programme and programme support, data and manifesto commitments Commissioning of outlined projects	Initial scoping work has been conducted and we are seeking to commission work in Q4, following the publication of the HIS implementation plan, for continuation into the next financial year	HIS Implementation Plan to be published in December.
Social prescribing – VCSE: delivery of network	Continuation of funding quarterly in 2021. Develop commissioning brief in December 2021 and advertise in January 2022.	London Plus commissioned to deliver the social prescribing network to March 2022.
SWLA: resource provided to Robust Safety Net mission delivery team	Resource transferred to Communities and Social Policy upon completion of this MD.	MD for approval Autumn 2021 and the Robust Safety Net funded partnerships published.
Future SP work programme and GLA mainstreaming	October 2021: GLA mainstreaming project report; further activity commissioned in Winter 2021-22.	GLA mainstreaming research under way, began July 2021, delivered by Cordis Bright.
Community development in health community of practice network and masterclasses	September/October 2021: engagement with the network planning group to develop the brief and commission, in Spring 2022, of a three-year programme.	Launch of the network May 2021 and planning group established. Temporary support for the planning group in place to sustain progress.

Appendices and supporting papers:

- The London HIS 2018-28: <https://www.london.gov.uk/what-we-do/health/health-inequalities-strategy>
- The London HIS Implementation Plan 2018-2020: https://www.london.gov.uk/sites/default/files/his_implementation_plan.pdf
- HIS Annual report 2018-19: https://www.london.gov.uk/sites/default/files/his_annual_report_1819_final.pdf
- HIS progress report 2021: https://www.london.gov.uk/sites/default/files/his_update_august_2021.pdf
- The HIS Consultation Integrated Impact Assessment: https://www.london.gov.uk/sites/default/files/the_mayor_of_londons_health_inequalities_strategy_ii_a_report_-_final_23.08.17_0.pdf
- Our Vision for London: The next steps on our journey to becoming the healthiest global city (2019) https://www.london.gov.uk/sites/default/files/11448_hlp_london_vision_-_annual_report_2019_full_version.pdf
- Next Steps for Social Prescribing in London: https://www.london.gov.uk/sites/default/files/social_prescribing_next_steps_document.pdf

COVID-19: review of disparities in risks and outcomes

- The impact of COVID:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908434/Disparities_in_the_risk_and_outcomes_of_COVID_August_2020_update.pdf

- COVID-19: understanding the impact on BAME communities.

<https://www.gov.uk/government/publications/covid-19-understanding-the-impact-on-bame-communities>

Public access to information

Information in this form (Part 1) is subject to the Freedom of Information Act 2000 (FoIA) and will be made available on the GLA website within one working day of approval.

If immediate publication risks compromising the implementation of the decision (for example, to complete a procurement process), it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary. **Note:** This form (Part 1) will either be published within one working day after it has been approved or on the defer date.

Part 1 - Deferral

Is the publication of Part 1 of this approval to be deferred? NO

Part 2 – Sensitive information

Only the facts or advice that would be exempt from disclosure under the FoIA should be included in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a part 2 form – NO

ORIGINATING OFFICER DECLARATION:

Drafting officer to
confirm the
following (✓)

Drafting officer:

Karen Steadman has drafted this report in accordance with GLA procedures and confirms the following:

✓

Sponsoring Director:

Sarah Mulley has reviewed the request and is satisfied it is correct and consistent with the Mayor's plans and priorities.

✓

Mayoral Adviser:

Tom Coffey has been consulted about the proposal and agrees the recommendations.

✓

Advice:

The Finance and Legal teams have commented on this proposal.

✓

Corporate Investment Board

This decision was agreed by the Corporate Investment Board on 13 December

EXECUTIVE DIRECTOR, RESOURCES:

I confirm that financial and legal implications have been appropriately considered in the preparation of this report.

Signature

Date

D. Gane

13/12/21

CHIEF OF STAFF:

I am satisfied that this is an appropriate request to be submitted to the Mayor

Signature

Date

D. Bellamy

13/12/21