Community of Practice
From MDTs to INTs: The opportunities and challenges

COP3: 14th October 2026

London Neighbourhood Delivery Programme

Welcome!

Welcome to the third Community of Practice event for London Neighbourhoods!

Today we are focusing on the opportunities and challenges Londoners have found in moving from organising around services, to organising around populations and needs.

Community of Practice = 'a group of people who share a common interest or passion, and regularly interact to learn how to do it better.'

Surface barriers, opportunities and questions arising in your own areas

Identify where help or problem-solving is most needed

Create a route to feed back to Neighbourhood Delivery Board

Support peer learning and connection

Recap from our last session

143

people joined

Primary care, community health, mental health, VCFSE, local government, ICBs, social care and others

1

Tested emerging design principles

Participants reviewed and voted on principles that should guide neighbourhood health in practice.

2

Worked through resident journeys

Breakouts tested how the emerging thinking applied to their neighbourhoods and real lives.

3

Explored the whole-system scope

The discussion covered access, levels of need, settings, partners and the outcomes that should matter.

Participants supported the direction and asked us to show more clearly how neighbourhood health is working in practice.

Today's agenda

Time	Session	Facilitator
13:30-13:35	**Welcome**	Javina Sehgal, WNL ICB
13:35-14:00	**COP updates** • London Neighbourhood Delivery Programme Update • Facilitating peer connection and resource sharing • Model of Care - next steps	George Verghese, CD/SRO Andrea Carter, HIN Jenny Sanderson, PPL
14:00-14:30	**Fire-side chat:** the opportunities and challenges in moving from shifting from organising around services to organising around need • Nicola Hanson – Southwark • Nadine Jeal – Haringey • Matt Skinner - Barking & Dagenham	Henry Langford, London Councils
14:30-14:50	**Break out discussions:** an opportunity to share and learn from others	Henry Langford, London Councils
14:50-14:55	**Poll on future themes**	Jonathan Sampson, NHSE
14:55-15:00	**Close and next steps**	Javina Sehgal, WNL ICB

COP updates

Dr George Verghese, Clinical SRO, London Neighbourhood Health programme

- GP partner, Waterloo Health Centre
- Clinical Director, North Lambeth PCN
- Clinical SRO, London Neighbourhood Health programme (since September 2026)
- Chair, Lambeth GP Provider Alliance
- Co-Chair, Lambeth Integrator Delivery Board
- Primary Care Partner Member, South East London ICB Board

I come to this from the neighbourhood end.

My view of neighbourhood health

Neighbourhood health is about creating health together.

People should get the care they need, and no more care than they want.

They should experience a system that is wise, compassionate and responsive, where they are partners rather than recipients of care.

That means shifting from a system that mainly treats illness to one that creates the conditions for health:

- preventing illness where we can
- acting early when we should
- responding **brilliantly** when people need us
- providing specialist care when that is the right answer.

The neighbourhood, its residents, communities and health and care professionals become partners in creating health, not simply participants in delivering healthcare.

Views my own, though I hope not mine alone

What is the Delivery Board?

What it does

- Meets monthly
- Brings together ICBs, London Councils, public health, adult and children's services, the GLA, the ambulance service, mental health and community trusts, community pharmacy and the voluntary sector
- Builds the shared pieces once, for London

The test: is what the Board produces useful to you?

What it doesn't do

- Run your neighbourhood
- Delivery happens locally, through boroughs, integrators and teams

Board meeting, 7 October (1 of 2)

Item	Discussion	Outcome
Health and Wellbeing Boards and neighbourhood health plans	Plans needed for 2027/28. Accountability between Health and Wellbeing Boards, place partnerships, integrators and ICBs is unclear in many areas.	Questions and practical prompts for Health and Wellbeing Boards, drawing on practice across London
Babies, children and young people	Around a third of Londoners. Endorsed as a priority. Debate on scope: children with complex needs, or all children?	Think life course, not just all-age. Link the children's community of practice with this one

Board meeting, 7 October (2 of 2)

Item	Discussion	Outcome
GLA and the wider determinants of health	Strong support for work and health as a starting point, alongside financial security.	Worked examples on work and health, violence against women and girls, and homelessness and health
Strategic commissioning	London response on single and multi-neighbourhood provider contracts. Support for the direction; concerns on the ICB role, procurement and fit with general practice.	Keep a London response on where we agree, and define what London needs now

Reflections from my first Board

1. The Board can build the architecture, but outcomes depend on housing, money and work, and on joining services up around the resident.
2. Front-line evidence carries weight in the room. This community of practice is one of the best places to gather it.

An ask:

Send examples of where the London Board could help, or of where the architecture gets in the way

Send to Ldn.Neighbourhood.pmo@ppl.org.uk

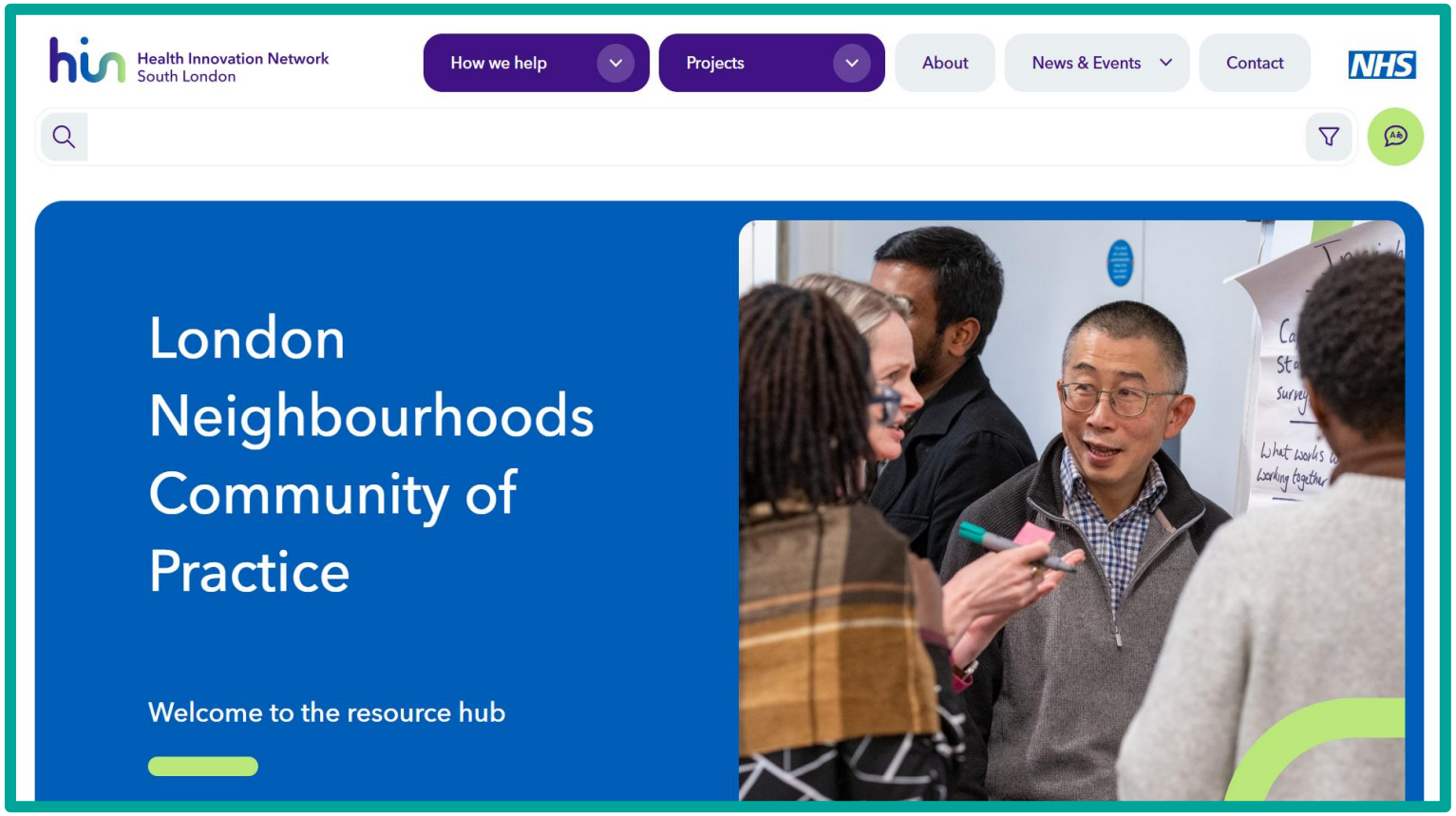
Helping you to connect with colleagues across London

See the **Resource Hub** for information from the Community of Practice including slides and meeting recordings**:**

London Neighbourhoods Community of Practice resource hub - Health Innovation Network

We would also like to publish case studies showing what's happening across London – for example the SEL Healthy Hearts project

Please fill out the form on the website to submit your case study



Join the **LinkedIn group** to connect with colleagues across London

Please sign up here (1) London Neighbourhoods Community of Practice (CoP) | Groups | LinkedIn

Any questions, please email: Ldn.Neighbourhood.pmo@ppl.org.uk

Emerging London model: building blocks of neighbourhood health

In July, you supported the ambition and asked us to make the model more practical. Since then, London partners have developed the connected capabilities needed to organise support around population need.

One shared view of population and place need

Understand need, strengths, inequalities and local assets across the whole population.

Early and proactive identification

Use data and relationships to recognise changing need and act earlier.

Whole person and holistic

Consider physical, mental and social needs alongside strengths and wider determinants.

Differentiated and personalised responses

Match support to people's needs, goals and preferences.

One neighbourhood team around need

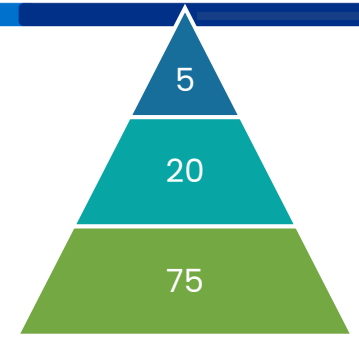
Bring the right capabilities together and maintain continuity across boundaries.

Prevention, learning and upstream investment

Prevent escalation, track shared outcomes and invest in what improves health.

Emerging London model: what this means in practice – one population, different responses

A fully functioning neighbourhood health model aligns different responses to patterns and levels of need, providing support from the right person at the right time in the right setting.



Continuum of need and response, with increasing intensity of coordination

75% Mostly healthy

COMMISSIONING INTENT

Enable residents and communities to take an active role in creating health and wellbeing. Strengthen community assets and act on wider determinants, with accessible preventative, routine and episodic support.

MAIN ORGANISING RESPONSE

Healthy neighbourhood partnership and community activation

20% Ongoing or managed need

COMMISSIONING INTENT

Provide coherent pathways, specialist reach and more care closer to home, enabling people to manage their health and maintain their independence.

MAIN ORGANISING RESPONSE

Enhanced community pathways and multidisciplinary teams

5% Rising risk (4%) and highest complexity (1%)

COMMISSIONING INTENT

Earlier identification, proactive management, action on wider risk, continuity and active coordination.

MAIN ORGANISING RESPONSE

Integrated neighbourhood team (multi-agency)

Across the full continuum of need, residents should be supported to shape and act on what matters to them through universal services, targeted support that addresses inequalities and creates equity, and support personalised to the individual, with prevention and a Think Family approach throughout.

Fireside chat

What enables neighbourhoods to move from coordinating services to sharing responsibility for people and populations?

Listen for the practical shift

1 Shared purpose

What helped partners agree the population and outcomes they hold together?

2 Relationships & trust

How did people stay connected and solve problems across organisational boundaries?

3 Authority to act

What gave teams closest to residents the confidence and permission to respond?

Fireside chat

What opportunities and challenges are emerging as neighbourhoods shift from organising around services to organising around need?

- **Nicola Hanson** – Southwark
- **Nadine Jeal** – Haringey
- **Matt Skinner** - Barking & Dagenham

Breakout discussion

Breakout discussion

Discuss:

1. **What's happening in your area to move beyond MDTs and organise around populations rather than individual services or organisations?**
2. **What's working well?**
3. **What are you finding difficult?**

Instructions

- **Nominate someone to post three key points** from your discussion in the main-room chat when you return.
- **Once everyone is happy, press record** so we can capture the discussion. Anyone with an nhs.net email can record. (please put a message in the main room chat if you are having any issues here)
- **Go around the room** and give everyone an opportunity to contribute, answering the questions above.

Think about…

- *Which population or cohort are you organising around - and why?*
- *What is genuinely different from an existing MDT?*
- *What has helped you make progress?*

Future themes

Poll: future COP suggested ideas

1. Workforce

What does effective partnership working look like for frontline workers working across organisations? What helps/ doesn't help?

2. Digital

How can we get digital and record systems working for neighbourhood partners and residents to enable clear and joined-up care?

3. Shared responsibility vs clear accountability

Who is accountable for decisions, delivery and shared outcomes when responsibility is shared across partners in Neighbourhoods?

4. Prevention vs immediate service demands

How do we shift resources upstream (the left shift) while services are managing significant current demand, workforce and financial pressures?

What we need from you

Before you leave

Fill out the feedback form (closes EOP 15th Oct and add any final reflections in the chat, especially points that did not surface in your breakout.

After today

Look out for the session summary and key themes. Please share the next Community of Practice (late 2026, date tbc) invite through your networks.

Stay involved

Connect with others from today's session, share examples of what is already working, and help us keep testing what supports delivery and what needs to change.

Thank you!