

H L HEALTH BOARD CIC

Investigation of the British Nationality Act 1948 to support health, safety, and psychological wellbeing across the Commonwealth realm, with particular attention to children, adults, the elderly, and members of the Windrush generation.

2026 /2027

Prepared for: Parliament and Local Authorities (England, Wales, Scotland and Northern Ireland where applicable)

Prepared by: Lancelot Webb, Programme Leader of H L HEALTH BOARD CIC independent scrutiny plan.

HL Health Board CIC: Registered number 16043352

Contents

- 1. Foreword**
- 2. Executive Summary**
- 3. Terms of Reference**
- 4. Governance and Assurance**
- 5. Methodology and Evidence Standards**
- 6. Workplan (2026-2028)**
- 7. Stakeholder Engagement Plan**
- 8. Deliverables**
- 9. Budget and Value for Money**
- 10. Risk Register (with Mitigations)**
- 11. Monitoring, Evaluation and Learning (MEL)**

Annexes

Annex A: Authority and Status

Annex B: Purpose of the Call

Annex C: Who Is Invited to Submit Evidence

Annex D: Types of Evidence Requested

Annex E: Key Questions (Optional Guidance)

Annex F: Trauma-Informed Safeguards

Annex G: Data Protection and Confidentiality

Annex H: Use of Evidence

Annex I: Submission Process

Annex J: Publication and Feedback

1. Foreword

This scrutiny plan responds to enduring legislative, administrative, and psychological impacts arising from the British Nationality Act 1948 and its subsequent interpretation and enforcement. The Windrush Generation—citizens of the Commonwealth invited to rebuild post-war Britain—experienced systemic failures affecting legal status, mental health, occupational safety, housing security, and intergenerational wellbeing.

This programme places health, safety, dignity, and psychological repair at the centre of legislative scrutiny.

Lancelot Webb



Programme Leader
H L Health Board CIC

2. Executive Summary

- This three-year independent scrutiny programme will:
- Examine how the British Nationality Act 1948 and successor policies affected:
 1. Legal identity
 2. Access to healthcare, housing, employment, and safeguarding systems
 3. Psychological wellbeing across the life course
- Produce evidence-based recommendations for:
 1. Parliament
 2. Local Authorities
 3. NHS and Public Health bodies
- Develop trauma-informed policy frameworks for children, adults, and elderly people affected by Windrush-related harms
- Support restorative justice, prevention of recurrence, and statutory reform

3. Terms of Reference

Scope

- Legislative interpretation and administrative practice (1948–present)
- Health and safety impacts (physical, psychological, occupational)
- Intergenerational trauma and safeguarding failures
- Equality, human rights, and public sector duty compliance

Out of Scope

- Individual compensation decisions (handled by existing schemes)
- Criminal investigations (unless referred)

4. Governance and Assurance

- Independent Scrutiny Panel (Chair, legal expert, clinical psychologist, H&S specialist, lived-experience representatives)
- Parliamentary Liaison Group
- Local Authority Advisory Network
- Ethics & Safeguarding Committee
- Annual independent audit (financial and ethical)

5. Methodology and Evidence Standards

Methods

- Documentary legislative analysis
- Public and targeted Calls for Evidence
- Clinical and psychosocial impact assessments
- Focus groups (age-specific)
- Expert roundtables

Evidence Standards

- Trauma-informed
- Equality-impact assessed
- GDPR-compliant
- Peer-reviewed where applicable
- Plain-English summaries for accessibility

6. Workplan (2026–2028)

Phase 1 – Foundation (2026)

- Governance setup
- Call for Evidence
- Initial legislative mapping
- Safeguarding protocols operational

Phase 2 – Deep Scrutiny (2027)

- Health and psychological impact analysis
- Local authority practice review
- Children and elders safeguarding focus
- Interim report to Parliament

Phase 3 – Reform & Legacy (2028)

- Final report and recommendations
- Model statutory guidance
- Local authority implementation toolkit
- Public feedback and closure process

7. Stakeholder Engagement Plan

- Windrush survivors and families
- Commonwealth community organisations
- NHS Trusts and Public Health bodies
- Local Authorities
- Schools, care providers, and safeguarding boards
- Trade unions and occupational health bodies

Engagement formats:

- Safe listening sessions
- Written submissions
- Youth-adapted consultations
- Elder-accessible forums

8. Deliverables

- Interim Parliamentary Report (2027)
- Final Scrutiny Report (2028)
- Health & Safety Impact Framework
- Trauma-Informed Policy Toolkit
- Local Authority Guidance Pack
- Children & Elder Safeguarding Addendum
- Public evidence archive (redacted)

9. Budget and Value for Money

Category	Max Allocation
Staffing & Expert Panels	£3.1m
Research & Evidence Analysis	£1.9m
Stakeholder Engagement	£1.2m
Clinical & Psychological Advisory	£0.9m
Legal & Legislative Analysis	£0.8m
Safeguarding & Ethics	£0.45m
Administration & Audit	£0.75m
Contingency (5%)	£0.65m

Value for Money:

- Prevents future litigation costs
- Improves population mental health outcomes
- Strengthens statutory compliance
- Reduces intergenerational harm

10. Risk Register (with Mitigations)

Risk	Mitigation
Re-traumatisation of participants	Trauma-informed safeguards, opt-out rights
Low trust/engagement	Community-led facilitators
Political sensitivity	Independent governance, transparency
Data protection breach	Strict GDPR controls
Scope creep	Clear ToR and panel oversight

11. Monitoring, Evaluation and Learning

- Quarterly progress reports
- Safeguarding incident monitoring
- Stakeholder satisfaction metrics
- Policy uptake indicators
- Independent end-of-programme evaluation

Annexes

Annex A: Authority and Status

Independent scrutiny commissioned for Parliamentary and Local Authority use.

Annex B: Purpose of the Call

To gather evidence on legislative, health, and psychological impacts.

Annex C: Who Is Invited to Submit Evidence

- Individuals
- Families
- Professionals
- Public bodies
- Academics

Annex D: Types of Evidence Requested

- Written
- Oral
- Clinical
- Historical
- Statistical

Annex E: Key Questions (Optional Guidance)

- How did legal uncertainty affect mental health?
- What safeguarding failures occurred?
- What reforms prevent recurrence?

Annex F: Trauma-Informed Safeguards

- Choice, control, consent
- Psychological support availability
- Non-adversarial processes

Annex G: Data Protection and Confidentiality

Full GDPR compliance, anonymisation, secure storage.

Annex H: Use of Evidence

For scrutiny, reform, education, and prevention only.

Annex I – Submission Process

Secure digital portal and assisted submission routes.

Annex J: Publication and Feedback

Draft findings shared with contributors before final publication.