

Workshop notes: Inclusion Health and Wellbeing

November 23rd 2018, Christian St Hub

Speakers: David Freeman, Gemma Cossins - LBTH

Attended by:

Abigail Gilbert	LB Tower Hamlets	JOYCELYN	Black Women's Health & Family Support
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Ali Halil	Citizens Advice East End	Keith Williams	LB Tower Hamlets
Anna Babic	Bromley by Bow Centre	Larissa Howells	Age UK East London
Barbara Deason	Four Corners Ltd	Mark Waterman	LB Tower Hamlets
Caroline Billington	LB Tower Hamlets	Mashuk Ahmed	LB Tower Hamlets
Carrie Kilpatrick	LB Tower Hamlets	Hazel Saunders	DeafPLUS
Cathy Weir	Island House	Olawande Ige	Non Profit Professional
Eleea Islam	LB Tower Hamlets	Paul Burgess	LB Tower Hamlets
Hazel Saunders	DeafPLus	Pip Pinhorn	Toyhouse
Helen Forster	Working Well Trust		Tower Hamlets Friends and Neighbours
Hussein Farah	SSCC	Shirajul Islam	
	The Royal Society for Blind Children	Sabina Khan	Mulberry School for Girls
Jack Hamilton	Half Moon Young People's Theatre	Reha Begum	LB Tower Hamlets
Jackie Eley	LB Tower Hamlets	Vicki Busfield	Green Candle Dance Company
Jamie Bird	Shadwell and St Katharine's Collaborative	Cristina Mititelu	Open University
Janice Kocoglu	Collaborative	Eleanor Image	Play Association Tower Hamlets
Jon Owen	LB Tower Hamlets	Sabina Khan	Mulberry School for Girls
		Alison Robert	THCVS
Angela Brivett	London City Steps		
	Thai Fighters Boxing Academy		
Gohar Ghouse			

The following notes come from flipcharts on the day. Stars are used to highlight outcomes/points that received sticky-dot votes of agreement/approval .

If you missed the workshop and/or have additional comments or suggested outcomes you can still give feedback. Email gemma.cossins@towerhamlets.gov.uk or vcs@towerhamlets.gov.uk with your notes or to book in a conversation.

Priority: Increased access to Youth Services

High-level outcome: Increased usage of youth services by girls and young women

Suggested outcomes:

- ➔ Increased access to and usage of participatory childrens and youth activities that meet local and individual community needs
- ➔ Increased skills and capacity and young people to develop their potential express themselves, develop a sense of agency and be visible members of their community
- ➔ [increase in] participatory projects
- ➔ Increased repeat usage?

Notes:

- Soft focus on girls and young women but not sole focus. Boys and men to be included at some project stages
- Word 'children' needs to be included
- Age ranges needs to be specific**

Activities:

- Play services working with children and young people as there is a gap for children around 5 years old to 13 years old
- Include OUTREACH
- Outdoor services
- Martial arts services
- Consider rights based projects
- Adventure playgrounds

Priority: Provision of Early Help support to families

High-level outcome: Improvement in Early Help Assessment outcomes

Suggested outcomes:

- ➔ [increase in] participatory projects
- ➔ Increased opportunities across life stages and transitions in children and young people's live and in their families

Activities:

- Recreational activities, respite as they do not often get time to themselves

Notes:

- Word 'children' and words 'early help' changed to 'early provision'
- In schools?
- Assessment needs to be impartial
- Age ranges need to be specific
- Information and signposting activities and using words such as 'prevention' for those not necessarily 'tied to train tracks' and are yet still needing support

Priority: Support for young carers

High-level outcome: Improved health and wellbeing for young carers

Suggested outcomes:

- ➔ [increase in] participatory projects

Activities:

- Recreational activities, respite as they do not often get time to themselves

Notes:

- Specialised provision or inclusion? Consider inclusion that has a soft focus on specialised provision
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Priority: Ageing well and reducing social isolation

Priority: Provision of physical (e.g. Tai Chi, dance) and health-promotion activities for older people

High level and suggested outcomes:

- Older people feel they are able to continue making a positive contribution to their communities (Ageing Well)

- ➔ Older people have more opportunities to make a positive contribution to their communities through volunteering and paid opportunities. ****

(E.g paid opportunity for an older person to be an 'expert by experience' as a consultant.**)

- ➔ Older people have access to training and development opportunities to help them contribute
- ➔ Housebound older people have more opportunities to contribute to communities (e.g digital inclusion)**
- ➔ Older people are empowered to develop/create opportunities to contribute (e.g men's cabin wallpaper project)

- Tower Hamlets becomes a recognised dementia-friendly community (Ageing Well)

- More older people with dementia 'live well' (Ageing Well)

- ➔ Physical environments/premises are dementia friendly

- ➔ Staff/volunteers involved in delivery of services are dementia friend trained
- ➔ Increased awareness of dementia across communities
- ➔ More dementia friendly activities are provided*
- ➔ Carers of people living with dementia are supported*

- Fewer older people feel lonely, less often (Ageing Well)

- ➔ Older people have more opportunities to socialise and interact with others***
- ➔ including locally and housebound older people*
- ➔ Older people are empowered to create activities which matter and make them feel valued members of the community
- ➔ Older people feel included and integrated in their community*

- More older people access services that provide support in their local neighbourhoods (Ageing Well)

- ➔ Older people, including housebound, have access to up to date information about services, activities and opportunities available to them*
- ➔ Services and more accessible and local

- Increase engagement in meaningful relationships in care homes (Public Health)

- ➔ Care home residents are provide with more activities [not just group activities] that they are able to shape
- ➔ Care home residents are more aware/understanding of dementia
- ➔ More older care home residents have more friends, meaningful relationships*

- Increased meaningful intergenerational contact (Public Health)

- People over 50 feel a greater connection to their community (Ideas Store)

- ➔ Better mutual understanding between generations
- ➔ Reduced discrimination
- ➔ Increased sharing of skills, experience, knowledge

- Older people are healthier and more active (Ageing Well)

- ➔ More older older people are maintaining their ability to participate in physical activities
- ➔ More older people are more confident and better equipped to self manage their health
- ➔ Older people are able to share and participate in physical exercise activities
- ➔ Older people and their families are aware of the benefits of healthy eating and eat more healthily

Note: hard to measure increased health in older people.

Activities

- Reintroduction of a LBTH publication, more regularly than our East End?)

Priority: Residents better informed to make healthier choices

High-level outcomes:

- **Increased engagement with community farms and community projects**
- **Positive impact on health and wellbeing**
- **Reduce social isolation**

Priority: Residents better informed/equipped to manage health conditions

High-level outcomes:

- **Improved personal management of conditions**
- **Improved knowledge, skills and confidence to manage personal health and care**
- **Improved physical functioning and ability to self-care**
- **Improved quality of life**

Suggested outcomes:

- ➔ For individuals
- ➔ For the community
- ➔ For the system

e.g maybe (red text is me Gemma filling in gaps and making suggestions) -

➔ [increase in people, increase in communities, increase in the borough]'s

- Control
- Confidence****
- Connection
- Skills
- Knowledge*
- Participation in project's delivery
- Access

➔ [increase in people, increase in communities, increase in the borough] Doing things together, outdoors in particular but not exclusively*****?

➔ [increase in people, increase in communities, increase in the borough] Engaging [and investing/participating?] in open space generally, including farms, gardens, community projects?

→ [increase in people, increase in communities, increase in the borough] Engaging with services via a range of supported and independent mechanisms?

Notes:

- Working in partnership with universal community assets e.g museums, cinemas, leisure centres, art galleries, Tower of London etc. Route to wider community services, not segregation.
- Specific user groups with accessibility needs e.g deafness
- General groups
- Need framework for organising outcomes
- Young children's caveat for outdoor activities
- User/peer led**
- Support to engage with services
- Making a connection to relevant health services***
- Outreach*
- Bringing people together that don't usually mix*
- Make sure to include mental health, learning difficulties, dementia

Priority: People suffering with mental health issues are better supported

High-level outcomes:

- **Increase in number of residents suffering with mental health being supported by a peer**
- **Increase in self-referrals to relevant support services**
- **Residents are informed of where to access help in a crisis**

Suggested outcomes:

- ➔ Prevention [reduction of?] from deterioration/reduction in amount of people being sectioned ***
- ➔ Preventing [reduction of?] isolation**
- ➔ Increase in amount of advocacy, information and advice delivered by trained peer supporters
- ➔ Increase in awareness of and information about crisis support
- ➔ **More people experiencing mental health issues are able to stay in their jobs or access other employment?** (note said 'supporting people to sustain employment')**

Notes:

- Working in partnership with employers, training providers, local community & faith groups
- Supporting and training employers
- Make sure learning disabilities are covered/considered
- Culturally specific programmes raising awareness and challenging stigma

Priority: Improved health outcomes for disabled people

High-level outcomes:

- **Adults with complex needs have better health outcomes**
- **The life expectancy for people with learning disability will steadily improve**

Suggested outcomes:

- ➔ Increased independence*
- ➔ Increased awareness of and access to other services
- ➔ Increased participation in social activities*

Notes: (lots of these could be re-written as outcomes)

- Culturally specific programmes raising awareness and challenging stigma***
- Training/employment
- Increasing social activities*
- Integrated community based activities*
- Joint activities with universal community and people with disabilities/mental health issues/learning disabilities***
- Learning disability specific mental health
- IAPT accessible wellbeing groups
- Specialist sport services (using community non-segregated spaces/resources)
- Leisure
- Increased navigation and connection e.g 1:1 accompaniment to gym appointments
- Targeted groups: young people's mental health, BME mental health, perinatal mental health

Priority: Increased engagement in sports and other physical activity

High-level outcomes:

- **Increasing physical activity in the highlighted under-represented groups and improving health outcomes**
- **Increase the proportion of children and young people that achieve the weekly minimum level of physical activity and develop an active lifestyle as a habit**
- **The sport and physical activity sector deliver interventions that meets the needs of local residents**
- **Improved cohesion through participation in sport and physical activity**

- **Improved mental health and reduced social isolation through participation in sport and physical activity**
- **Improve the quality of the local physical activity and sport offer, offering opportunities for participation for the inactive and less active across a wide variety of disciplines**

Suggested outcomes:

- ➔ Increased participation in a wide range of culture, play, physical activity, leisure and sport that are inclusive of age, gender, disability, race and mobility****
- ➔ Improving social opportunities and reducing isolation through participation in culture, play physical activity and sport.*****
- ➔ Increased participation from marginalised groups (women and girls, local community)
- ➔ Creating opportunities for intergenerational relationships, shared experience through culture, play, physical activity, leisure and sport for all above*
- ➔ Improved referrals and connection with LBTH e.g social work referrals, youth offending

Notes:

- Where is the culture focus? E.g dance, theatre, music, visual arts and crafts all contribute to wellbeing. These activities improve cohesion, confidence and communication that crosses all age ranges and can improve mental health, yet they are not focussed on enough.
- Play is physical activity, daily activity. KPIs are met by walking, outdoor play. LBTH has no play strategy – where will this fit in sport and physical activity?
- Self organising is good concept, essential to ensure safeguarding and safer recruitment ethos is in place from someone involved so vulnerable people are not at risk

Who will benefit?

- All ages and abilities, e.g older age dance for people with Alzheimer's

How?

- Tester session, participation as a way to try a range of sport/culture/activity sessions
- Also being able to build trust and build relationships to gain confidence and support ongoing activity
- Schools are key to linking with community projects