



# **Tower Hamlets CVS Health and Wellbeing Forum**

**Thursday 16 May / 2.00 to 4:30pm**

# Agenda

- Welcome and introductions
- Presentation by Flourishing communities
- Be well presentation and discussions
- Update on Health Inequalities Fund coproduction
- Information
  - Anti racism sessions on line 6<sup>th</sup> and 17<sup>th</sup> June
  - Connection Coalition 13<sup>th</sup> June at Rich Mix 9.45 – 12.30  
Fighting loneliness and social Isolation





# CERVICAL SCREENING CHAMPIONS

Women's Inclusive Team, Limehouse Project and Praxis

March 2024



Limehouse Project

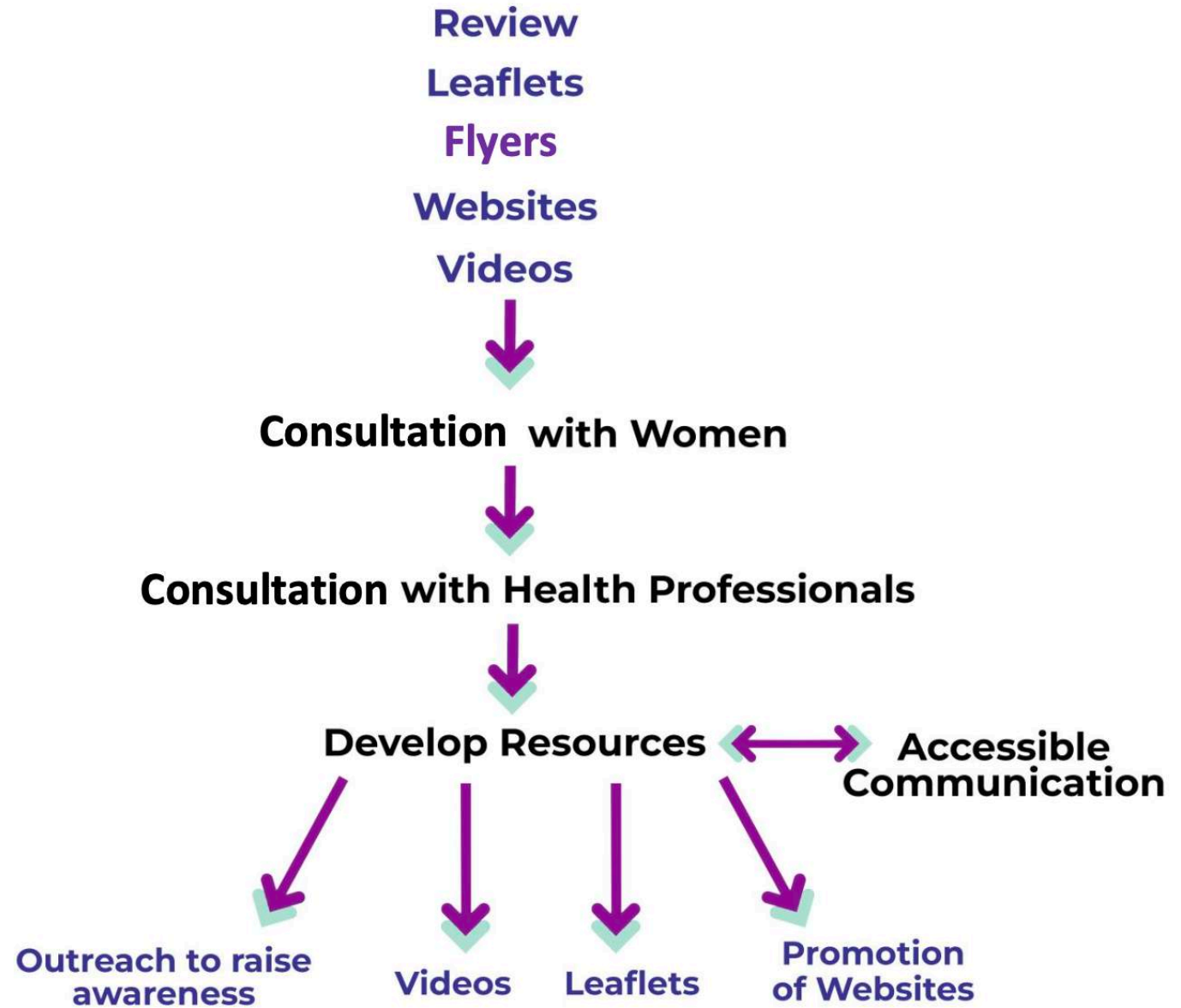


# HEALTH LITERACY APPROACH:



- Cervical screening health literacy approach
- Look at information for Parents on HPV
- Cervical screening letter
- Videos
- Links to Cancer alliance
- Health professionals - flyers, leaflets, campaigns, website information
- Develop outreach session to raise awareness and encourage access
- Further investment in sourcing culturally sensitive videos and involvement of Accessible communications project.

# HEALTH LITERACY APPROACH:



THE CERVICAL  
SCREENING  
CHAMPIONS:



**Sultana Parveen Jelly**  
**Farhana Anjuman**  
**Shahida Islam Pinky**  
**Burhan Saleh**  
**Shadia Yusuf**  
**Kaltun Hussein**  
**Kemi Ogunlana**  
**Kemi Oyegunle**

# TRAINING AND COORDINATION:

**The women were trained over 3 days:**

- Cervical screening
- Cervical Cancer – symptoms , treatment and care
- FGM
- Developing their community conversations session plan and resources - handouts and workbook
- Presentation skills

**They would like more information on FGM HPV and more handouts**

# COORDINATION:

## Sessions with voluntary sector organisations

- Stitches in time
- Ocean women's association
- Praxis



## What the group would like to do:

- Contact schools to offer support to women
- Madrassa's and tuition sessions
- Stay and play sessions
- Limehouse town hall – ESOL lessons
- Children's centres
- Run sessions in GP practices



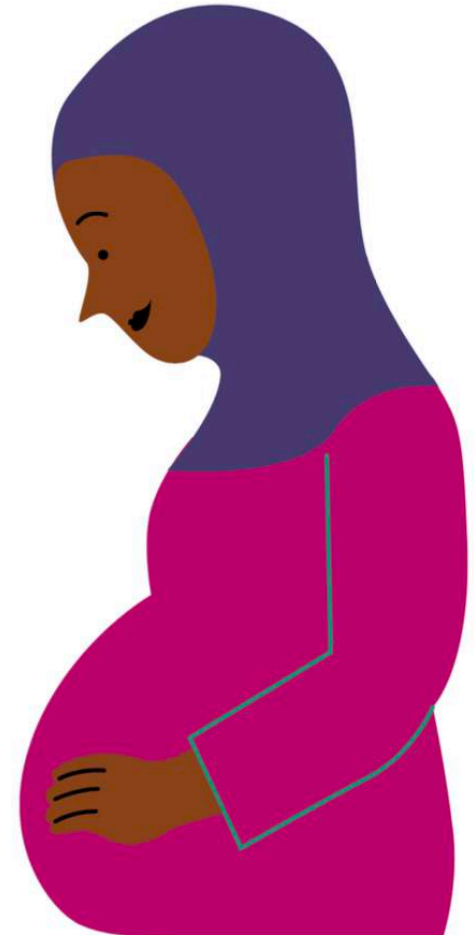
# WHAT THEY FOUND:

- Women responded well to sessions in community languages
- Women who are usually shy and not keen to publicly discuss their sexual health felt relaxed and able to ask questions.
- They want more information on:
  - Incontinence
  - Pain and bleeding
  - FGM
  - More health awareness sessions



# WHICH PRACTICES WOMEN ATTEND:

Name of GP	Number of attendees registered
St Andrews Health Centre	3
Sutton Wharf Health Centre	2
The Aberfeldy Practice	3
The Barkantine Practice	1
Mission Practice	1
Dr CM Patel'S Sugery	1
St. Stephen's Health Centre	1
The Jubilee Street Practice	3



# WHAT THEY WOULD LIKE TO DO NEXT:



- Work with GP practices to offer sessions to women who are not booking a smear
- Work with other services to connect women to health information



For more info about the Flourishing Communities project and to host a workshop, please contact our partnership team:

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**Limehouse Project:** Kay Browne-Miah

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[m.begum@limehouseproject.org.uk](mailto:m.begum@limehouseproject.org.uk)

**Praxis:** Zinèbe Maach [zinebe.maach@praxis.org.uk](mailto:zinebe.maach@praxis.org.uk)



**Be well presentation and discussions**

# Tower Hamlets Strategic Programme for Long Term Condition Prevention: Vital 5

VCS Consultation Session

VCS HWB Forum – 16<sup>th</sup> May 2024



# Session outline



10 mins – Welcome / introductions

10 mins – Overview of background and current thinking (Liam – see slides 7-13 below)

30 mins – Discussion of questions using Jamboard (see slide 6)

05 mins – Wrap up, summary and next steps



# Background



- Health inequalities in Tower Hamlets are big and getting wider. Poorer residents live shorter lives, and spend longer time in poor health.
- 5 modifiable risk factors cause a large amount of inequalities in poor health. These are called the 'vital 5' (smoking, overweight, blood pressure, mental health and alcohol).
- Lots of work already happens across the Voluntary and Community Sector (VCS) and the wider Health and Care System, to prevent health inequalities in Long-Term Conditions.
- In order to tackle inequalities in health, we need to **align and strengthen** this preventative work.
- We have developed an initial concept for a system-wide Strategic LTC Prevention Programme, which would focus on reducing and managing the 'vital 5' risk factors.
- This Programme will be developed further over the coming months; and VCS input will help to shape it.



# Aims of VCS HWB Forum Consultation session



1. To share with VCS partners early thinking about the scope and structure of a Tower Hamlets Strategic LTC Prevention Programme.
  - The Programme would align and strengthen initiatives to reduce inequalities in risks for poor health (the 'vital 5').
2. To co-develop the success measures and outcome metrics of the programme: what we should be aiming to achieve
3. To gather VCS input about what actions could be taken by (a) the health and care system and (b) the VCS in order to improve our local approach to LTC Prevention.





# Questions for HWB Forum



1. How will we know if we are making success in preventing LTCs and reducing unhealthy risks of the Vital 5 in Tower Hamlets?
  - What would be the measurable things that we would see happening?
2. What actions could the **Voluntary, Community or Faith Sector (VCFS)** take as part of each of the 4 pillars of the programme?
3. What things do you want the **health and care system** to do in relation to each of the 4 pillars of the programme?

## Linking to better support around 'building blocks' for health

- **Outcome:** Residents can access support to improve factors like housing, employment, income
- Health and care services play their part in improving economic, social, food environments

## Community-centered prevention and health promotion

- **Outcome:** Communities in Tower Hamlets are empowered and enabled to take action to improve our health, and health systems link to community assets

## Detection and enabling self-care

- **Outcome:** Individuals at increased risk are identified, and enabled to reduce their risk

## Active Management

- **Outcome:** Systems and pathways of care are effective for proactively meeting residents' needs and reducing risk



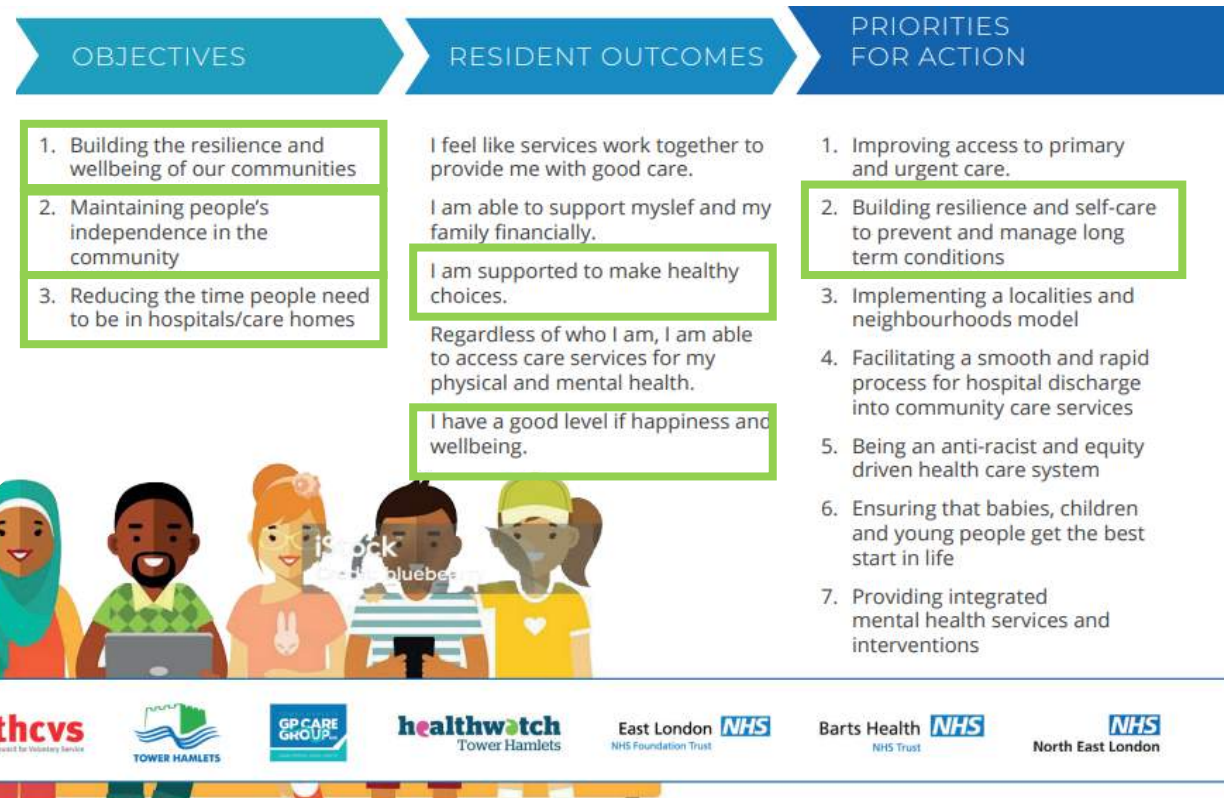
**Initial Concept / Framework for  
Information and Discussion:  
Tower Hamlets Strategic Programme for  
Long Term Condition Prevention: Vital 5**



# This presentation outlines a proposal for a Tower Hamlets-wide Strategic Programme on LTC prevention



- Preventing poor health among our residents is essential to achieving the aims of the Health and Wellbeing Strategy. Preventing LTCs is essential to achieving goals of the HWBB, particularly around reducing health inequalities and alleviating pressure on health services. These will only be possible if we ‘go upstream’ and prevent poor health early.
- Several of THT’s agreed Objectives, Outcomes, and one of the Priorities for Action, relate to Prevention of poor health, and promotion of good health.
- Enabling our residents to live in better health requires system-wide action on the causes of poor health.
- **The proposal is to establish a Tower Hamlets-wide LTC Prevention programme, ‘Be Well and Vital 5’, to tackle poor health and enable our residents to live healthy, happy lives.**



# Poor health affects our residents unfairly, and causes unsustainable pressure on the health and care system.



- Tower Hamlets has high numbers of residents living in poor health.
  - The gap in life expectancy between most and least deprived parts of our community grew in the latest year for which data are available (2020-21). Life expectancy has stopped increasing, and may have fallen slightly, for our most deprived residents.
  - Our deprived residents, and women, live unusually long amounts of their life in poor health.
- Poor health in large parts of the population is a major cause of strain on the health and care system
  - Large amount of pressure from people living with long-term conditions.
  - High rates of multi-morbidity.
- Our population is ageing and becoming more unwell – this will cause unsustainable system pressures unless we act to prevent this.

Inequalities in life expectancy, Tower Hamlets



# Five modifiable risk factors underpin a large amount of health inequalities



- Five modifiable risk factors – the ‘**Vital 5**’ explain a large proportion of poor health in our population. Improving the population prevalence of these risk factors would improve health of our residents and reduce inequalities.
- Tower Hamlets sees high prevalence of all of these modifiable risk factors, and unequal distribution leading to health inequalities.
- These ‘risk factors’ are shaped and patterned by the socioeconomic determinants of health.
- **Addressing these risk factors, and the socioeconomic factors that underpin them, is therefore a priority for preventing ill health, and thus preventing health system pressures. THT’s Prevention Strategic Programme ‘Be Well’ will focus on preventing and reducing prevalence of these risk factors.**
- [The Vital 5 is an evidence-based model developed by Kings Health Partners \(kingshealthpartners.org\)](http://kingshealthpartners.org)



**Smoking** rates at 11.7% are **similar to London**, but rates in BAME and routine/manual workers (34.2%) **worse than London**.

**30,000** residents smoke



48% of adults are **overweight or obese**, **similar to London** despite young population. Rates of healthy diet (5-a-day) and of physical inactivity are **worse than London**.

**118,000** residents are overweight or obese



**High Blood Pressure:** hypertension diagnosis gap 8.1% is **similar to London/England**. % of GP patients with a BP recording has fallen since 2014, now **lower than national average**

**20,000** residents have undiagnosed Hypertension



**Mental health** - estimated prevalence of Common Mental Illness– 22.8%– **worse than England**.

**50,000** residents have diagnosed CMI



Overall admission rates for **alcohol** are **better** than England but rates among White British are **higher**.

**55,000** residents drink at harmful levels



# Our LTC Prevention Strategic Programme will take a system-wide approach to reducing the Vital 5, with action grouped around four pillars



## Linking to better support around 'building blocks' for health

**Outcome:** Residents can access support to improve factors like housing, employment, income. Health and care services play their part in improving economic, social, food environments

- Pillar may include:
  - action to link patients to appropriate support around 'wider determinants' like housing, benefits, employment support etc.
  - strengthening links from health/care services to support with wider determinants – e.g. via social prescribing etc.
  - action that the health and care system can take to improve physical, food and social environments to promote healthy lives.

## Community-centered prevention and health promotion

**Outcome:** Communities in Tower Hamlets are empowered and enabled to take action to improve our health, and health systems link to community assets

- Pillar may include:
  - initiatives to strengthen communities' ability to promote health, such as Communities Keeping Well
  - strengthening community assets for health.
  - developing volunteers and community champions to promote health

## Detection and enabling self-care

**Outcome:** Individuals at increased risk are identified, and enabled to reduce their risk

- Pillar may include:
  - initiatives, outreach etc to detect/identify individuals with heightened risks from Vital 5, and make residents aware of risk factors
  - embedding vital 5 detection into new clinical settings
  - strengthening our support offer to enable self-care: for example aligning behavioural support for each of the V5
  - improving and aligning pathways to access this support

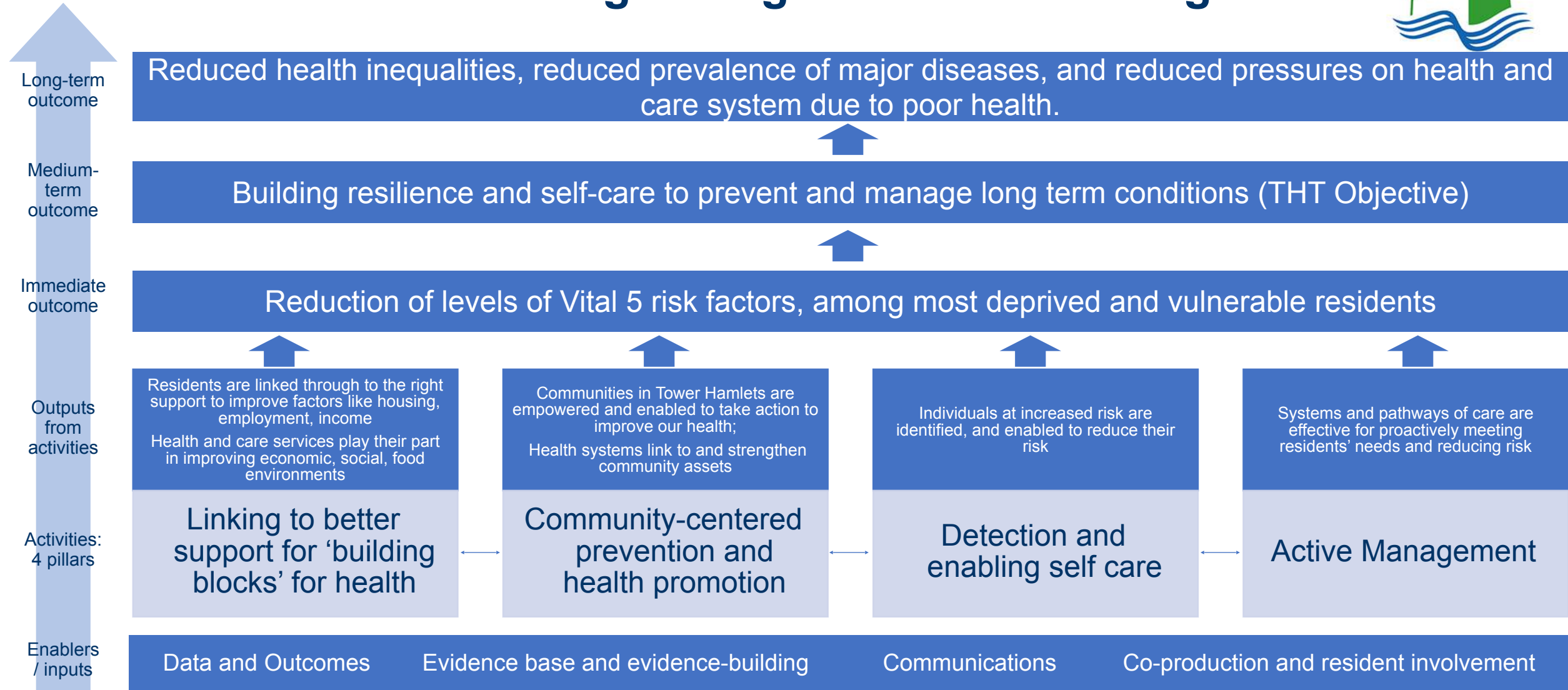
## Active Management

**Outcome:** Systems and pathways of care are effective for proactively meeting residents' needs and reducing risk

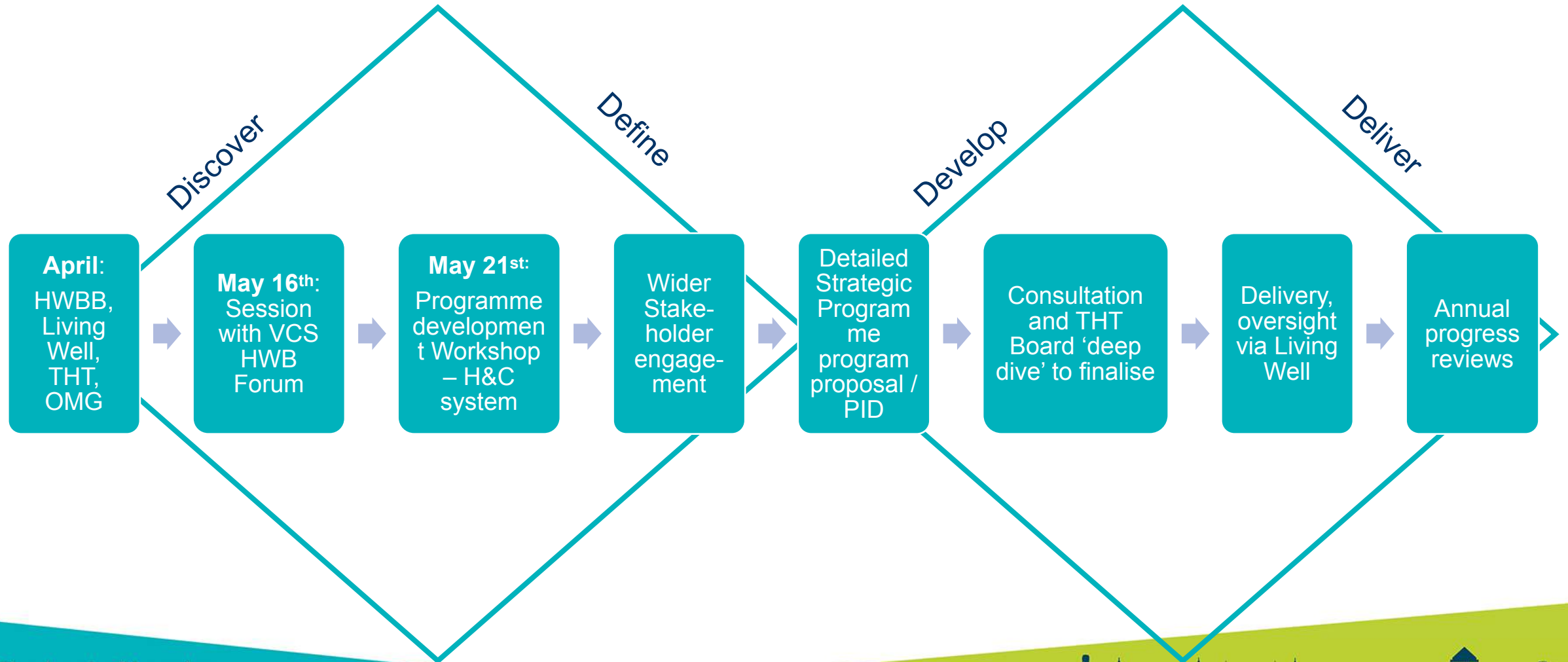
- Pillar may include:
  - secondary prevention and management for people who are detected with elevated Vital 5 risks, or with diagnosed conditions
  - detection and reduction of Vital 5 within clinical care pathways.



# LTC Prevention Strategic Programme: Overall logic model



# We are at early stages of programme development, and beginning stakeholder engagement to co-produce





# Discussion for the HWB Forum



# Questions for HWB Forum



1. How will we know if we are making success in preventing LTCs and reducing unhealthy risks of the Vital 5 in Tower Hamlets?
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Linking to better support  
around 'building blocks' for  
health

Community-centered  
prevention and health  
promotion

Detection and enabling self-  
care

Active Management

[https://jamboard.google.com/d/  
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Success measures



Actions the VCS could  
consider



Actions the health and care  
system could consider



TRANSFORM THE WAY

YOU THINK AND DO

EQUALITY

Introduction to anti-racism

June 6: Click [here](#) to book

June 17: Click [here](#) to book

**Connection Coalition Tower Hamlets -  
fighting loneliness and social isolation**

**Thursday 13 June  
9.45am-12.45pm**

**Rich Mix, 35-47 Bethnal Green Rd,  
London, E1 6LA**

**Reaching  
residents most at  
risk of loneliness**

Click [here](#) to book



# Expression of Interest Form: Women's Resource Centre Engagement Group

An opportunity has arisen for local women in Tower Hamlets to express interest in joining the new women's resource centre engagement group, to help support the vision for the council's aspirations to ensure the equity challenges marginalised women face are addressed. We are looking for local women who work with or have a strong connection to Bangladeshi and other multi-ethnic marginalised women in the borough.

No formal entry requirements are needed, we just need you to be committed to attending meetings and participating in workshops to help ensure the needs of local women are identified and addressed in the service delivery plan.


There are a limited number of positions available to offer, so merit will be given to women who can demonstrate their local connection and passion for advocating women-related issues in the borough, especially in the context of marginalised women.

Please complete the questionnaire linked [here](#) and provide your details. Shortlisted candidates will be notified by the end of July 2024.

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# Next steps

- Offer of sessions with voluntary and community organisations
- Strengthening health literacy on sexual and reproductive
- Working with maternity services

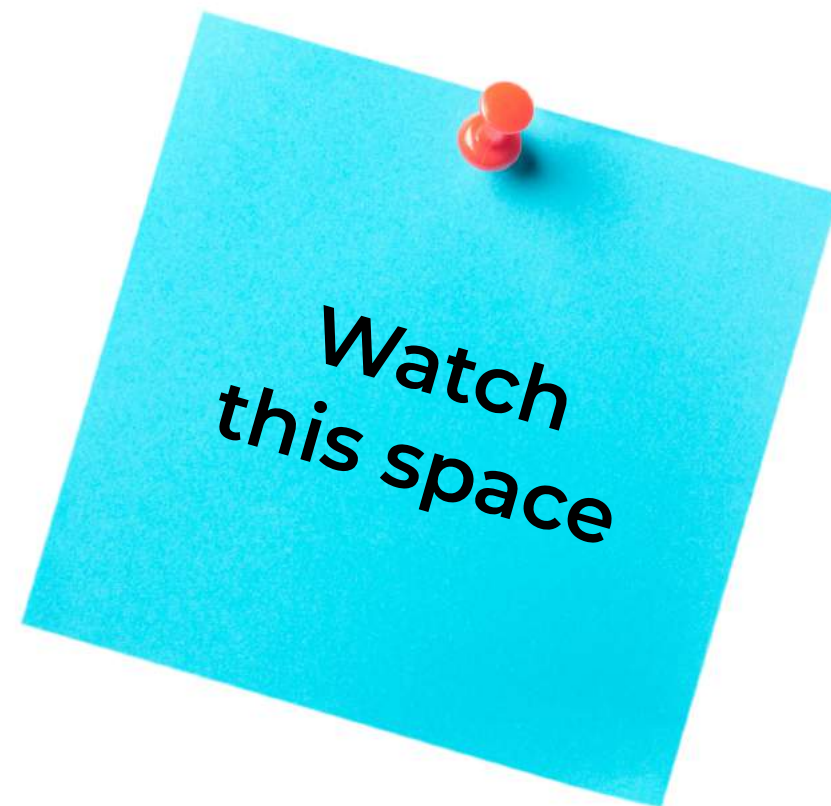


**For further  
information  
contact**

**Zinebe Maach or  
Alison Robert**

# Update on Health Equity funding

- Last meeting we discussed the principle
- Met with public health to discuss the process for coproducing the programme with the sector
  - Suggesting a panel of VCS representatives coproduce the application process
  - Plan networking events with the sector to promote the programme develop potential partnerships and support links to integrated working with health





# Next health and wellbeing forum



What is  
important  
to you ?



**Thank you for coming.  
We look forward to  
working with you.**