



Neighbourhood Forums

This document explains how residents and community groups in Tower Hamlets worked with local NHS partners to improve access to interpreting and advocacy services. It shows how the new 'Neighbourhood Forum' model gives local people a real voice in shaping health services.

1. What is a Neighbourhood Forum?

A Neighbourhood Forum could be many things, but it brings together residents, community groups and local health services to talk about what matters most for people's health and wellbeing.

Each Forum focuses on a local GP area (known as a Primary Care Network or PCN). The aim is to make sure local people have a say in how services are designed and delivered, and to improve things like access, prevention and support for healthy communities.

The pilot project ran for 12 months in two local areas, each taking a slightly different approach to ensure a wide mix of people took part, including men and women of different ages, ethnicities, faiths, disabilities and languages.



A Neighbourhood Forum meeting in May 2024 at Women's Inclusive Team

2. Why we focused on interpreting and advocacy

At the first Neighbourhood Forum meetings, residents and professionals agreed that language barriers were one of the biggest issues affecting people's experiences of health services. Many residents said they struggled to get an interpreter, and health staff said it made communication difficult. This was the case in both of the PCN areas we were working in.



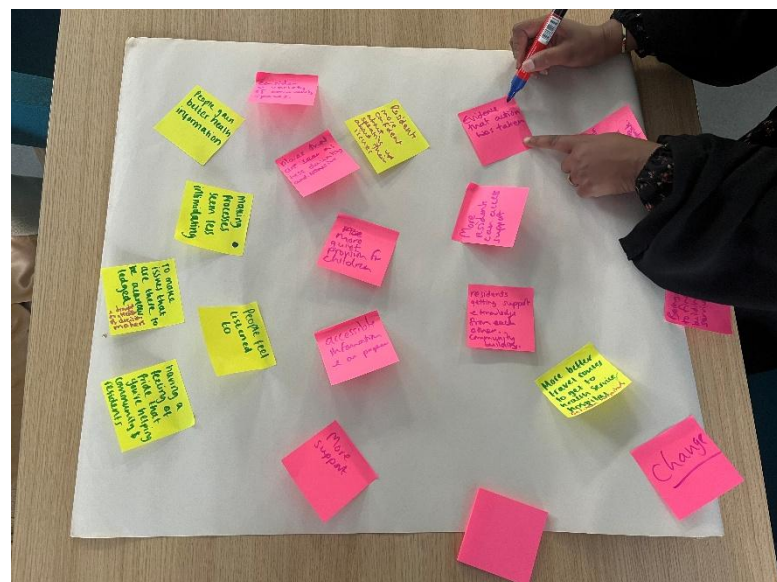
People were also clear that they were tired of being “consulted” without seeing real change. So the group agreed to focus on one issue, interpreting and advocacy, and to work together to make practical improvements.

3. What we did

We started by finding out who provides interpreting and advocacy services locally. The GP Care Group manages the contract, so we met with them to understand:

- What the service includes
- How it's promoted and advertised
- How many people are using it

We then set up a working group of residents and community organisations who had used the service (some with good experiences, some with bad). Together, they reviewed information about the service and shared their own experiences. The working group then shared their recommendations with the GP Care Group.



4. What we found and recommended

Residents and partners identified several ways to improve the service:

1. **Better patient records** – GP records should include people's language and interpreter needs, so an interpreter is booked automatically when an appointment is made.
2. **Clearer information** – Simple communications that explain the difference between interpreting and advocacy, and how to request each service.
3. **Trusted people in trusted places** – Recruit interpreters and advocates from local communities so people feel comfortable and supported.

5. Were there any other priorities identified?

Alongside interpreting & advocacy another priority was identified in both PCN areas. Following the initial Neighbourhood Forums we held a meeting with a group of local young people who identified vaping prevention as an area relevant to their lives where they had access to little or no information.

Through the relationship we had developed with the PCN managers we discovered that they were in conversation with local schools around the issue of vaping prevention. We have collaborated with Enabling Community Health Outcomes (ECHO) to run workshops in local schools around co-designing anti-vaping materials and services so that they are meaningful, accessible and engaging to school age children and young people. These materials and services will be published and trialled later in the year.

6. Working with the Integrated Neighbourhood Teams (INTs)

A Neighbourhood Forum was held on 9 December 2025 as part of the North West INT. With over 50 people in attendance, the majority of whom were residents, the Forum achieved a level of depth, honesty and engagement that would not have been possible without long-term relationships and trust already embedded in the neighbourhood. It demonstrated the value of bringing residents, VCS organisations and statutory partners together in an open, locally grounded setting to shape INT priorities.

Every older male resident at the diabetes table was living with diabetes or pre-diabetes, and Bengali staff from VCS groups consistently described close family members affected by the condition. This lived experience brought insight, urgency and clarity to the conversation, highlighting both the scale of the issue locally and the gaps in prevention, early information and culturally appropriate support. These were not new findings, but powerful reminders and calls to action, articulated directly by those most affected.

Many of the solutions discussed, such as delivering information in community languages, offering healthy cooking and activity programmes, and 'going to where people already are', have been raised repeatedly over the years. What made this Forum effective was the way these long-standing messages were voiced collectively by residents and trusted local organisations, in a space where they were heard by decision-makers.



A Neighbourhood Forum meeting in December 2025 at the Brady Centre

Crucially, the success of the Forum rested on existing community infrastructure. The presence of highly engaged residents reflected sustained relationship-building by groups such as Somali Senior Citizens Club, Toynbee Hall and THCVS, working over time with established groups rather than starting from scratch.

This offers a clear lesson for Integrated Neighbourhood Teams: meaningful engagement is most effective when it builds on what already exists, values lived experience as expertise and invests in long-term relationships as the foundation for system change.

7. What happens next

The resident working group will present its recommendations directly to the GP Care Group, local PCNs and the wider health system. We are also asking for better data on who uses the interpreting and advocacy service, and whether information such as language and ethnicity is being properly recorded and used. We plan to work with the North-West locality and borough health partners to develop new communications materials and test improvements.

8. Impact so far

- The Forums helped identify a problem that the health system had not fully recognised.
- The proposed changes will cost little but could make a big difference to people who face language barriers.
- Local community groups were funded to support the work, building stronger relationships between the NHS and the voluntary sector.
- Residents reported very positive experiences of being involved.
- Joint work between the NHS and community partners is continuing to improve access and design new materials together.

9. Challenges and next steps

- Better data-sharing between services is needed to understand who uses interpreting and advocacy.
- We will work with partners to track changes in how translation services are used.
- Future projects will explore how neighbourhood data tools (like Optum) can help measure impact.

