Health Improvement Team

Lisson Grove Health Centre
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Our Vision:
To lead out-of-hospital community healthcare
Our work

• We plan and deliver evidence based, health improvement programmes & initiatives that aim to:
  – Promote healthy lifestyles
  – Support self care
  – Improve access to services
  – Educate and train
  – Promote national screening programmes

• We do this in partnership with local residents, community organisations and health professionals
Our staff

We are a team of
• health improvement nurses
• a support worker
• physical activity specialists
• office manager
Health Improvement

Source: Dahlgren and Whitehead, 1991
Health Inequalities

IMD by ward; JSNA, Health & Well-Being Assessment, 2013
Healthy lifestyle programmes

In partnership with nutrition & dietetics department, we deliver programmes that support clients to improve diet & increase physical activity

- **Fit For Life**
  (for adults)

- **Kick-Start/Express**
  (6-12 years old)

- **Choosing Chance to Change**
  (for adults with learning difficulties)
Physical activity programme

Physical activity promotion

• Taster sessions & signposting for hard to reach groups (e.g. supple strength at the Migrant Resource Centre)

• Regular, drop in, exercise sessions for vulnerable groups (e.g. Gentle Exercise at Soho Health Centre)

• Workshops & talks (upon request) in community centres, workplaces libraries etc.

• Represent physical activity for health in the Active Westminster networks and promote the consistent use of physical activity message

Exercise Referral Scheme

• Co-ordination of a partnership between Westminster’s local authority, NHS and third sector providers (e.g. YMCA, GLL)
  
  – Provide single point of contact and process/redirect 150 referrals per month (average).

• Ensure the programme is equitable, accessible and adheres to national quality standards
  
  – We completed a qualitative evaluation. We conducted 3 focus groups to collect the experiences of men referred for obesity.
Exercise referral: Paddington Recreation Ground programme for vulnerable groups

- Since 3/10/2010, this programme has provided 326 gym based sessions (2-5 pm) for adults with enduring mental health issues (e.g. schizophrenia) and/or adults with learning difficulties.

- 104 referrals made by community mental health teams, GP’s, nurses, dieticians, IAPT, WLDP, and social workers.

- 21/68 who started completed the 12 week programme.

- Programme trained 2 walk leaders who run 49 Saturday walks for adults with learning disabilities from April to October (2011-2013).

- 5 people completed MHFA training.

- 2 qualified as gym instructors (L2).
Exercise referral: Paddington Recreation Ground programme for vulnerable groups

![Bar chart showing weight loss before and after exercise referral program](chart.png)
Exercise referral: Paddington Recreation Ground programme for vulnerable groups

![Bar chart showing waist circumference before and after exercise referral.]
Exercise referral: Paddington Recreation Ground programme for vulnerable groups
Exercise referral: Paddington Recreation Ground programme for vulnerable groups

Average values taken from the 21 programme ‘completers’

- Increase in 'confidence to do more physical activity' score (1-10): 1.1
- Reduction in PHQ-9 score (0-27): 2.1
- Reduction in SBP (mm/Hg): 7.4
- Peak Flow Reading improvement (l/min): 31.6
- Waist circumference reduction (cm): 5.5
- Weight loss (kg): 3.7
- Rated the programme overall (1-5): 4.5

“I am glad I have been given this opportunity to work out, through my depression and stress”

John, 42 years old, completer
NHS Health Checks

- Promoting & delivering NHS Health Checks for those 40-74 years old
- NHS Health Checks aim to prevent cardiovascular disease, diabetes, kidney disease & dementia
- You may access this service in your local pharmacist, Health Trainer or your GP

The Health Improvement Team may deliver NHS Health Checks, upon request, or as part of the various outreach activities we do, usually in;

- Westminster libraries
- Community and Day Centres
- Sports Centres
- Hostels
- Workplaces
- Health Events
Summary

How can we help you?

• Health promotion talks/workshops
• Stalls at health events
• One to one consultations
• NHS Health Checks
• Men’s Health Clinics
• Taster physical activity sessions
• Referral and signposting to services
• Training in brief, health promotion interventions (Making Every Contact Count)
Public Health Nutrition Team

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Our Vision:
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What we do....

Health Outcomes

Preventing Vitamin D Deficiency
- Healthy Start/Vitamin D Programme

Preventing Childhood Dental Caries
- Childhood obesity
- Healthy Eating Awards
- Weaning
- Food in Schools Programme
- Baby Friendly Initiative
- Training

Preventing Chronic Disease
- Healthier Catering Commitment (HCC)
- Cook and Taste Programme (Diabetes)
- Cook and Taste Programme (Weight Management)

Preventing Malnutrition
- Food Access Nutrition in Community Settings
- Malnutrition Awareness Training
- Improving identification/treatment of malnutrition

Cook and Taste Programme (Early Years, Kids in the Kitchen)

Cook and Taste Programme (General)

Cook and Taste Programme (Older People)

Improving our environment through – Healthier Catering Commitment and Food Access Project

Voluntary Organisations – Training, community engagement and up skilling community members
Working in Partnership with:

- **Voluntary/Community Sector**
- **Local Authority**
- **Local/National Networks and organisations**
- **Private Sector**
- **Health**

**SMART**
- Nubian Life Resource Centre
- Kensington and Chelsea Tenant Management Association (TMCA)
- Purple Line
- Chelsea Theatre
- Age UK
- Open Age
- Chelsea Welfare Centre
- Nubian Life Resource Centre
- Kensington and Chelsea Social Council
- Cafe Nine
- Dalston Community Centre
- Positive Age
- Edward Mond Community Centre
- Venture Centre
- Latimer Christian Centre
- Healthworks Partnership
- St Mungo’s Welbeing Centre
- Equal People
- Al-Hassanyya
- Midaye Somali Development
- Muslim Cultural Heritage Centre
- Hodan Somali Group
- Asian Women’s Group
- Volunteer Care Providers
- WAND
- Kernel Volunteers (Westminster)
- Church Street Management Office
- Local Food Businesses in Kensington and Chelsea
- Private Nurses and community drop-in centres
- London Metropolitan University

**CLCH**
- CLCH Patient and Public Engagement Lead
- London-wide NHS Local Authority departments
- CLCH Paediatric Dietetic Service
- CLCH Communications
- CLCH N&D Nutrition Support Team
- School Nursing Team
- CLCH Oral Health Promotion Team
- Imperial Midwives
- Portobello Market Development
- Children’s Nutrition Network
- CLCH
- Portobello Market Development
- UNICEF UK Baby Friendly Initiative
- London Infant Feeding Network (LIFN)
“Today’s generation of obese children will cost London at least £111 million per year in healthcare costs and productivity losses, if they come to enter the workforce as obese adults.”

Tipping the scales Childhood obesity in London April 2011 : GLA
Annual numbers with excess weight by ward of residence
Overweight or obese. Attending local state schools. Private schools not measured. 2010/11-2012/13

Strong focus in areas of deprivation, due to (a) higher rates of excess weight and (b) higher numbers of children in these areas (i.e. those attending state schools)

Suggests targeted work may be effective at tackling issue
Unhealthy foods are cheap, heavily promoted, and come in large portion sizes.

Leisure time often comes via the internet, TV, and games consoles.

Physical activity has been designed out of our environment and fewer people engage in physical activity in and out of work/school.

People’s genes have not changed over the past decades.

Drivers for obesity

[Diagram showing the relationship between societal influences, individual psychology, food environment, food consumption, obesity, physical activity, activity environment, and biology.]
Healthier Catering Commitment

• London initiative that uses a 'small change big difference' principle to support food businesses to make healthier changes to the food they serve.

• There is a set of 22 criteria which addresses fat, oils, salt, sugar, fruits and vegetables and portion sizes.

• Awarded 18 food businesses in RBKC
About the business: Chicken and chip shop, offering both fried and grilled chicken. In busy high footfall area, customer base includes pensioners, children and young people, local families.

Prior to HCC engagement
Meeting 14 out of 19 applicable criteria. However were only meeting 5 of 7 essential

Changes required:
• Although they fried the chips in rapeseed oil, a vegetable oil low in saturated fat, palm oil was used to fry the chicken. As the fried chicken is a popular item on the menu, changing the oil used for frying would have a significant impact.
• In addition, there was a high proportion of fizzy sweetened drinks on offer.

Changes made:
• Stopped using palm oil for frying – used rapeseed for both the chips and the chicken
• Sourced cartons of 100% fruit juice, and increased the proportion of healthier drinks on display
CUSTOMERS
"It is a good initiative. People usually know what is good and healthy but they don't always go for it.

"The displays are better and there are more healthy options which you can see. It is excellent food“

BUSINESS OWNERS
“We’re really happy with the scheme. It helped us to provide another good option for our customers”

“The people running it have done a fantastic job supporting us to make the changes”
• Food poverty is a state in which a person is not able to access a diet which meets their nutrition requirements.

• It can result from physical access issues, financial reasons (of the individual or rising cost of nutritious food), or the environment (transport to shops, oversupply of nutritionally inferior foods and undersupply of safe nutritious food)

• Worked in partnership with voluntary organisations, local community and health to understand ‘Food Poverty in RBKC’
What we did...

Asked our partners:
• one to one interviews with our voluntary sector and health service partners

Asked the Community:
• 102 paper based surveys on their food and shopping experiences and preferences.
• 41 community members in focus groups

Mapped food availability:
• map the availability of food across the borough

Investigated food prices:
• a healthy food basket with enough food to meet nutrient requirements for 7 days for 6 case study RBKC households
Focus Group Results

• Those with long term low income managed on a low food budget – but did not achieve a nutritionally adequate diet

“So you’ve got to look at what you can get for value is what you’ve got in your pocket. This is the biggest problem.”

“I must say I’ve missed out on veg the last few years. Veg don’t get past my front door.”
Focus Group Results

• Those with a sudden change in circumstances were less able to adapt

“I’ll go to Tesco’s in Church street. Yet if I shop in Church street then I know I could save myself on a £35 shop. That £35 I’m spending in church street I spend just over 30 in Shepherds bush. You know in the superstore there, same shop.”
Focus Group Results:
A group who cannot access food independent to affordability

- Illness, injury or disability and social isolation.
- Difficultly with public transport.
- High density of take away food
- Difficulty leaving the house eg inadequate equipment / support to take children out, physical ability and fatigue, mental health disability.

"because I have got a stroke you see, its difficult and I know what I can do"
<table>
<thead>
<tr>
<th>Household type</th>
<th>Cost of cheapest basket in walkable neighbourhood</th>
<th>Cost of cheapest basket in closest large supermarket</th>
<th>Online</th>
<th>Cost of cheapest basket if household has ability to travel</th>
</tr>
</thead>
</table>
| British family (Golborne)      | £95.12                                           | £102.98                                          | £95.59            | £69.30
Groceries online £39.57 Fruit & Vegetables Market £13.30 Meat & Fish supermarket £16.43 |
| Moroccan family (Golborne)     | £96.27 (Note: Halal meat unavailable. Included non Halal item) | £101.27                                          | £94.44            | £77.15
Groceries online £37.02 Fruit & Vegetables Market £15.18 Meat & Fish supermarket £24.95 |
| British family (Coleville)     | £96.02                                           | £118.09                                          | £111.13           | £82.90
Groceries online £48.04 Fruit & Vegetables Market £13.54 Meat & Fish supermarket £21.32 |
| Pensioners, British (St Charles)| £58.36 (Note: Not all fruit & veg available, included alternative) | £68.79                                           | £61.11            | £44.80
Groceries online £21.64 Fruit & Vegetables Market £10.69 Meat & Fish supermarket £12.47 |
| Pensioner, Caribbean (St Charles)| £38.40 (Note: Not all fruit & veg available, included alternative) | £40.48                                           | £38.41            | £28.51
Groceries online £10.95 Fruit & Vegetables Markets £9.32 Meat & Fish supermarket £8.24 |
| Pensioner, British (Norland)   | £34.55 (Note: Most meat unavailable, price from Shepherds Bush included) | £36.02                                           | £31.28            | £24.44
Groceries Online £12.28 Fruit & Vegetables Markets £6.13 Meat & Fish supermarket £6.03 |
Food Banks

• Locally there has been an increase in the number of people accessing food banks

• 290 local residents attended Redcliffe Gardens Food Bank, around 144 attended the Dalgarno food bank, and 171 received emergency payments in the most recent 6 month period

Case study Redcliffe Gardens Food Bank
A family of 4 people attended the food bank in July because of a reduction in one parent’s sick leave payment. The family now has £40-60 less per week than they previously did, leaving them £15 expendable income per week

Case study Dalgarno Food Bank:
One person, recently sanctioned for 4 months, attends the food bank regularly. He walks everywhere, including hospital appointments as he cannot afford the bus fare. He attends the food bank at the end of the day and takes any leftovers to freeze for the week. Dalgarno Food Bank referred him to Trussell Trust to get assistance with bills as he was accumulating debt
Reasons for accessing food banks

Central London Community Healthcare
NHS Trust

Barnet  Hammersmith and Fulham  Kensington and Chelsea  Westminster

- Benefit delays: 30.9%
- Low income: 29.7%
- Benefit changes: 14.7%
- Debt: 15.3%
- Other: 14.7%
- Refused crisis loan: 10.8%
- Unemployed: 9.5%
- Homeless: 7.5%
- Domestic Violence: 8.5%
- Sickness: 6.0%
- Child holiday meals: 4.8%
- Delayed wages: 4.2%
- Refused STBA: 3.5%

Trussell - Redcliffe
Trussell - National
Next steps..

- Training and increasing awareness for all staff
- Ensure clear and up to date information on services accessible to all
- Community transport to support using markets and collaboration to shop online
- Food budgeting messages within community based assistance programmes
- Work with local markets and shop owners to improve transparency of pricing
- Promote healthy start vouchers to eligible families and work with market trading to accept vouchers
- Communicate to relevant departments the impact sanctions and benefits delays are having on people at risk of food poverty
Questions