North Kensington Recovery Programme
Analysis of Engagement Log (February 2026 – April 2026)

Introduction

This report brings together findings and issues arising from two strands of community engagement undertaken by the North Kensington Recovery (NKR) programme, NHS North West London Integrated Care Board (ICB), between February and April 2026.

- The first section presents findings from targeted engagement with Immediate Bereaved, Bereaved and Survivor residents, exploring their priorities, preferences and opportunities for future non-clinical wellbeing support.

- The second section brings together issues and concerns raised through the NKR's wider, ongoing engagement with the North Kensington community. These issues may have been raised through meetings, conversations, community forums and other engagement activity, rather than through a single, specific engagement exercise. To provide a clear overview of what is being heard across the community, the issues in Part Two have been organised into key themes aligned with the main North Kensington workstream areas.

Part One: What We Heard from Bereaved Families and Survivor Residents About Future Non-Clinical Wellbeing Support

Emotional Wellbeing, Grief and Recovery

When asked about future non-clinical wellbeing services, participants spoke about the continuing impact of grief and trauma, including the emotional burden associated with ongoing advocacy, legal and justice processes. Some described difficulties finding opportunities to grieve and process their experiences, as well as the wider impact on their physical health, family relationships and day-to-day wellbeing.

In this context, participants wanted community-based, non-clinical support that could help them navigate these experiences in ways that are different from, and complementary to, formal therapy.

They wanted non-clinical support that:

- Creates safe and trusted spaces where people can connect, talk and express difficult emotions without the expectation of taking part in formal therapy.
- Provides opportunities for connection and peer support, reducing isolation and enabling people with shared experiences to support one another.
- Supports wellbeing through meaningful activities and community-based approaches, offering different ways to manage stress, grief and emotional exhaustion.
- Takes a whole-person and family approach, recognising the links between emotional wellbeing, physical health, relationships and wider life circumstances.
- Complements clinical and therapeutic support, with clear routes to specialist services where these are needed.

Community-Based and Culturally Sensitive Support

Participants placed particular importance on future non-clinical wellbeing support being community-based and culturally sensitive.

They wanted support that:

- Is rooted in and accessible within the community, providing trusted, informal spaces outside traditional clinical settings.
- Recognises the importance of community connections, relationships and shared experiences in supporting wellbeing and recovery.
- Is culturally sensitive and responsive, recognising that culture can influence how grief and emotions are experienced, expressed and processed.
- Recognises that approaches to grief, healing and emotional expression may differ across cultures and avoids assuming that one approach will work for everyone.
- Provides support in ways that are respectful of people's cultural backgrounds, values and experiences.

A full report setting out the findings and analysis from the engagement with Bereaved families and Survivor residents, is available on our website (Here.)

Part Two: Issues Raised Through Ongoing Community Engagement

The following section summarises key issues raised by, Bereaved families, Survivor residents and other local residents through our ongoing community engagements.

Mental Health and Emotional Wellbeing

People described experiences of low mood, anxiety, loneliness and difficulties managing emotions, with some challenges linked to domestic abuse and other significant life circumstances. They highlighted the importance of having safe, trusted spaces where they can talk openly about their emotions and access timely mental health and wellbeing support.

Cultural stigma was identified as a particular barrier to discussing mental health and seeking support, especially among some older women. Participants also emphasised the need for culturally and linguistically appropriate services, including access to therapists who understand their language, culture and faith, rather than relying solely on interpreters.

Concerns were also raised about delays in communicating the future mental health and wellbeing offer, which have contributed to uncertainty and a perception within the community that services may be shutting down.

Accountability and Transparency — ICB

Participants highlighted the need for greater transparency and accountability in relation to Grenfell-related funding, including clear information about the total funding available, how it is allocated and spent, and the outcomes being achieved (Ref Here.)

Participants also stressed that lived experience and long-standing community knowledge should have greater influence on ICB decision-making, particularly in relation to governance, procurement and commissioning.

Service Transition and Continuity of Care

Concerns and uncertainty were raised about future service arrangements, including perceptions that the NHS Dedicated Service for Bereaved families and Survivor residents is concluding, as well as questions about future providers, funding and governance.

Participants highlighted the need for clear transition and continuity arrangements, including clarity about responsibility for ongoing care coordination for Bereaved families and Survivor residents.

There were also requests for greater clarity about ICB restructuring and the development of Integrated Neighbourhood Teams (INTs), including the potential implications for the NKR and future service delivery. Concerns were raised about whether INTs will have a sufficient understanding of the impact of Grenfell on local communities.

Communication

There was a strong demand for clearer and more direct communication with Grenfell-affected communities about future mental health services, including models of care, service changes, funding and future decision-making.

Community-Led Recovery

Questions were raised about how the ICB and NKR will implement their commitment to Community-Led Recovery, particularly in relation to future commissioning, funding, service delivery and governance, where there may no longer be a specific focus on Grenfell.

There was a strong emphasis on ensuring that community voice, lived experience and equity remain central to decision-making, particularly in the context of significant health inequalities. Concerns were raised that, to date, there does not appear to be a sufficiently focused plan from key statutory agencies to address these inequalities.

Emotional Impact of Grenfell Tower Careful Take Down

Feelings and concerns about the careful take down of Grenfell Tower were prominent across many conversations with residents, Bereaved families and Survivor residents. People described feelings of grief, guilt and emotional overwhelm in relation to the Tower. For some, its continued presence has also provided solace and a sense of connection to loved ones who died.

Participants felt that these issues require a concerted effort to support resilience and wellbeing as the deconstruction progresses.

Feedback on What We Heard — Shared with the Community

The issues raised through community engagement are informing ongoing work and service development.

Transparency and accountability are being addressed through our community-led approach. This has included the development of a Grenfell Health Recovery Network (Here) to strengthen community involvement, provide a direct route for community voice into decision-making, and support greater accountability and transparency. In addition, key documents and information will be published on the website and made accessible to the community.

Community-Led Recovery principles will inform future service commissioning, with cultural competence reflected in service specifications.

Findings from the non-clinical wellbeing engagement have shaped and influenced the procurement and development of future non-clinical services. The provider selected will be required to demonstrate how it will respond to the issues identified through the engagement.

Grenfell Health Information Updates (GHIU Here) sessions are also being held for residents, involving clinicians, to share health information and data and discuss how the health of the community is being monitored.