

A Health and Wellbeing Strategy

for North Kensington to March 2024







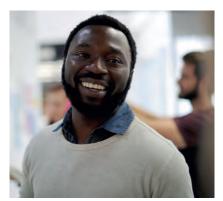












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Foreword

We are delighted to introduce the Health and Wellbeing **Strategy for North Kensington**

2019 to 2020 formed the Foundation Year in developing the strategy, we wanted to ensure that current and emerging health needs are identified in order that there are measured and sustainable improvements to health achieved as a result of proactive engagement.

The resulting strategy aims to guide the development, commissioning and delivery of services for the wider community of North Kensington including survivors and bereaved. It is a strategy that we know must be flexible to adapt to changing health needs.

We would like to thank all the survivors and bereaved. local residents, community, voluntary and faith groups and those working across North Kensington in the NHS and Local Authority who have contributed to the development of this strategy.

Dr Andrew Steeden is the Chair of NHS West London Clinical Commissioning Group and a local GP practicing at the Stanhope Mews Surgery in Kensington and Chelsea.

Mary Mullix is Director of North Kensington Recovery at NHS West London Clinical Commissioning Group.

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Introduction

Seventy-two people died in the Grenfell Tower fire in June 2017. The fire was visible across London. It was devastating to its residents and the community in North Kensington. Many lives were lost and many lives have been changed forever.

The NHS has been delivering services since that time and has a key role to play in helping the adults, children, families and communities affected in responding to their health and wellbeing needs as part of a collective provision of care and support that is shaped to individual and diverse community needs.

This strategy is focussed on how the NHS will contribute to improving the health and wellbeing of the local community and building its resilience so it can be more self-reliant moving forward. It recognises that it is part of a wider effort with community, faith and charity groups at its heart alongside other partners from the NHS, local government and wider public sector. It seeks to provide the background and reasons behind the pledges of support made by the NHS.

We have used the first year to establish a foundation on which to build the strategy; based on what we know today, from the people we care for, the local communities we serve, the expertise of our clinicians and evidence-based best practice. This document does not have all the answers, although our understanding will grow, people's needs will change and some of the longer-lasting impact of the disaster may emerge later. Our strategy recognises the requirement to be flexible so it can address these changes and needs as they take place over time.

Communities have told us they want us to speak and deal with them with respect and focus our efforts on three things:

- _ If they are a family, they want to be treated as a family.
- They want us to help individual residents and families build their own capacity so they can look after themselves and not have to rely on others.
- _ They want us to support the community as a whole.



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We are learning and will continue to learn from the experience of the care we provide and the people to whom we provide care, from the involvement and knowledge of the communities we work with and from new research and emerging needs.

During the foundation year some services have been introduced. Our approach is to expect and accept that services will change to meet changing needs and expectations. However, our commitment to support and meet the health and wellbeing needs of our population is underpinned by our partnership and engagement approach.

Moving forward, our ambition is to make the community healthier and more resilient by recognising that everyone has the potential to make a contribution to their community and to work with individuals and the community to make this happen. We refer to this as an asset based approach to health care.

The Chief Executive of NHS England, Sir Simon Stevens, announced up to £50 million additional health funding over five years to support people affected by the Grenfell Tower fire (2019 to 2024). This funding is in addition to the usual NHS budget to ensure the extended services we have established have the resources they need.

This strategy also reflects The NHS Long Term Plan that was published in January 2019, detailing how the NHS will change over the next ten years.

This strategy is a sign of the NHS commitment to be there for the people of North Kensington as we move forward together. We join with our community and partners to honour the deep loss brought by the tragedy and to care for those involved and affected.





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The North Kensington Community

The North Kensington area has an estimated population over 38,500 and is made up of five wards that are most affected by the disaster.

This area is one of significant social and cultural diversity. It is marked by a rich history as it is home to communities from many parts of the world including North Africa, the Middle East and the Caribbean. Different ethnicities, faiths and cultures have shaped the character of the community of North Kensington.

The age profile of the North Kensington area is characteristic of other inner city areas and there is a large working age population. While the achievement in educational outcomes amongst young people, including those from disadvantaged backgrounds, is particularly good compared to elsewhere, North Kensington is amongst the most deprived areas in London.

There are long standing inequalities that exist in North Kensington with high levels of deprivation. North Kensington has:

- _ A high proportion of low income households.
- A high proportion of people with no qualifications.
- Overcrowding concerns with the majority of residents living in socially rented accommodation.

There is substantial evidence that links the issues of deprivation and inequality to poorer physical health and mental wellbeing. Ward-level analysis demonstrates:

- Golborne, Colville and Dalgarno have higher levels of diabetes.
- Dalgarno, Notting Dale and Golborne have higher levels of mental health and wellbeing needs.
- _ Golborne, Dalgarno and Colville have higher levels of obesity among those over 18 years of age.
- Golborne, Colville and Dalgarno have higher levels of hypertension.
- _ All five wards have very high levels of depression.

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Health and Wellbeing involves helping people to take greater responsibility for their own health and wellbeing, using information more effectively to identify vulnerable people who may be at risk and people not well-reached by current services.

Health and wellbeing is not just an NHS issue but a partnership as we address the wider determinants of health such as housing, poverty, employment and education are as important. This can only be done in partnership with community, faith and voluntary organisations, local authorities, planners, the business community and policy makers.

The evidence provides understanding in relation to high levels of different diseases and conditions and will help us to focus our services and activities, and align our efforts and investment to help local residents secure better health outcomes.





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Our vision and aims

"The provision of high quality and appropriate health and wellbeing services, that meet the needs of the residents of North Kensington as well as survivors and bereaved, and contributes to building resilience."

Our vision is underpinned by the principle of active involvement of communities in shaping, and influencing services.

Our aims are to:

- Commission and ensure the provision of health and wellbeing services required by the community, survivors and bereaved is in place.
- Commission and ensure that we have services in place that help build community resilience and enable greater self-care.
- _ Work in partnership with the North Kensington community to ensure that services are culturally appropriate and have been developed together.
- _ Ensure that we measure the impact and the outcomes of the work undertaken at individual and community level.

First and foremost, this strategy is for the survivors, bereaved and communities living in North Kensington affected by the Grenfell Tower Fire. Using the first year as a foundation, we recognise the individuality and diversity of people's experience and the support and services necessary to meet their needs and expectations.

We hope that people will find this strategy relevant and easily understood. Our hope is that people will use it to engage with us on how services develop and hold us to account for the delivery of its contents. It aims to stimulate discussion and ideas of how services need to develop over time. We will need to update it regularly to reflect progress and changes.

It is also for the wider NHS and partner organisations and their staff so they understand the strategic approach the NHS is taking and the services that we are delivering. The intention is that this strategy is used and forms the basis of any engagement with North Kensington communities. We also encourage their feedback on this strategy.

Our patients, local residents and staff are closest to the everyday health and wellbeing needs of our community and will be at the centre of our work to ensure that our strategy evolves to reflect what works, what is needed and what is emerging.

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Listening to and learning from the community

The work with survivors, bereaved and the communities is at the heart of this strategy. It recognises the huge contributions communities make and seeks to work in partnership to further build on this to achieve an active and healthy population.

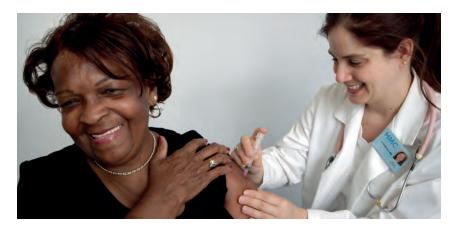
Since the fire, we have undertaken significant engagement with the survivors, bereaved and wider community, voluntary and faith-based organisations, including people who may not traditionally have had their voices heard. We have been doing this through a mixture of in-depth conversations, surveys and meetings. More than 1,200 messages and narratives have been used as the foundation to shape this strategy and will help ensure services meet the needs of the diverse population of North Kensington and is culturally responsive.

Engagement has been a continuous process and conversations are taking place on a regular basis. The North Kensington Health Recovery Partnership comprised of representatives of the local community organisations and patient representatives has formed the foundations which has steered this health and wellbeing strategy.

A consistent theme emerging from community conversations is that barriers are automatically erected which prevent people accessing services and support when the service provider does not fully understand the role culture and religion can play in influencing the way people relate to their health and the way they experience loss and grief. Health interventions must be delivered in a way that is culturally-relevant to the person receiving the service if it is to be effective – one size does not fit all.

Drawing on the messages and narratives through community engagement, conversations with the survivors and bereaved, we have distilled the key themes on opposite page.





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Promote health and wellbeing services better so people know Help people manage exactly what help is their long-term conditions which may available to them Health care services for survivors and bereaved have worsened due to need to consider the displacement and stress e.g. diabetes, COPD, alcohol/drug use. Prioritise vulnerable Address new and emerging health needs groups who may not seek help e.g. parents with young children and that may be identified in the near future. young men. We heard services that impact of disasters understand and respect on diverse, deprived the importance of faith, & marginalised ethnicity, culture and gender. Create health Give people the knowledge they need media with young men to lead independent Work with about their health and wellbeing needs. and healthy lifestyles. community/voluntary/ faith groups to stengthen their health knowledge and support them to assist the community.

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The NHS and Health and Wellbeing

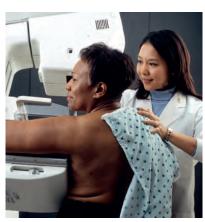
The NHS Constitution establishes the principles and values of the NHS in England. It sets out the rights for patients, public and staff. All NHS organisations operate within the context of this and the North Kensington Health and Wellbeing Strategy is framed within it. This strategy focuses on the role of the NHS, the services it funds and the support it can give in improving the health and wellbeing of the survivors, bereaved and residents of North Kensington affected by the Grenfell Tower Fire.

The NHS Long Term Plan¹ sets a direction for the NHS and how it will improve care for patients over the next ten years. It identifies key priorities for the NHS and these will support the local NHS in delivering on its priorities and vision for North Kensington.

This strategy would be incomplete without the acknowledgment of the global Coronavirus pandemic of spring 2020. This took place at the end of the foundation year however it is likely to impact the North Kensington community, further highlighting health inequalities. The strategy will need to consider longer term health impacts and disparities.

Working in partnership we will do all we can to address health inequalities.





¹ The NHS Long Term Plan January 2019

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The Royal Borough of Kensington and Chelsea's Journey of Recovery Needs Assessment

This Journey of Recovery Needs Assessment² was commissioned by the Royal Borough of Kensington and Chelsea's Public Health Department in July 2018 and considers the impact on the health and wellbeing of those affected by the disaster.

The report makes a number of recommendations drawing on insight from, and bringing together evidence in relation to:

- _ The health and wellbeing characteristics of the communities of North Kensington before the fire.
- _ Other disasters in the UK and across the world.
- Analysis of existing socioeconomic and health data on the impact of the disaster.
- _ Evidence from local communities about what matters most to those who have been affected and what their priorities for recovery are.³

It gives consideration to the following:

- _ Demography and socioeconomic factors.
- _ Housing.
- _ Community assets such as schools, diversity and activity of the community and voluntary organisations predating the fire.
- _ Inequalities.





² Journey of Recovery: Supporting health & wellbeing for the communities impacted by the Grenfell Tower fire disaster, July 2018

³ Community Voices 2020, Radhika Howarth, WLCCG

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The report makes six specific recommendations that relate directly to health services and to the health of the community:

- _ A long-term commitment to recovery from all partners.
- _ A commitment to addressing long-standing needs locally.
- _ On-going monitoring of the physical health of those impacted on the night of the fire.
- _ A diverse and well-resourced strategy to support mental health and wellbeing across the community.
- _ Putting community at the heart of recovery.
- _ Continuing to understand emerging need and adapt the strategy using high quality data.

As this strategy is implemented, we will work with our community to make sure that the various services and programmes that are introduced address these recommendations.

There will be a greater focus on Children and Young People through out 2020 into 2021 to ensure that we respond to what we have heard from the local community.





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An asset based approach to health care

A number of specific issues emerged from the community conversations we had with people from the community, faith groups and voluntary sectors.

These have been collated into three broad themes:

- _ Understanding the dynamic needs of the population affected by the disaster and services required.
- Ensuring that the needs of the diverse community are reflected in local services.
- Promoting and enabling self-care and community resilience through information and support.

We have said previously that, moving forward our ambition is to make the community healthier and more resilient by recognising that everyone has the potential to make a contribution to their community. We want to work with individuals and the community to make this happen.

This is called an asset based approach to delivering health care. We will do this by making use of all the resources we have available to help us achieve the outcomes and priorities set out within the Health and Wellbeing Strategy. It also recognises the challenges we face around health inequalities and the need for a diverse and action-focused partnership between the statutory and community, voluntary and faith organisations that is capable of making the best use of inward investment into North Kensington.





⁴Community Voices 2020, Radhika Howarth, WLCCG

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Developing NHS services for the North Kensington Health Recovery programme

Only the Foundation Year and first full year of the strategy have been detailed below, recognising the flexibility required to meet new needs of the wider community as well as survivors and bereaved. The strategy is underpinned by planned and responsive engagement programmes to enable rapid feedback on services to address any emerging needs.

To better inform this strategy we have:

- _ Listened to the wider community survivors and bereaved and the wider community have told us.
- Accessed and learned from international disaster reviews. These suggest that we need to be ready to be flexible to meet increased demands across services, especially primary care, and to address on-going anxiety and distress.
- Continued work on how best the identified priorities are delivered, with capacity for improvement and change.

This learning will put us in better position to meet emerging needs over the following vears.

The mental health and wellbeing services currently being provided will continue to adapt to changing and identified needs.

Alongside this, physical health monitoring will be established to ensure that services to meet emerging health needs are both identified and commissioned.

We will introduce clear outcome measures so that we can provide evidence of progress in the delivery of the health and wellbeing strategy.



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Primary health care

Core GP services.

Enhanced services in GP practices.

Self-care

Access to non-medical activities and services in the community.

Children and young people

Helping children, young people and families with health and wellbeing needs.

Specialist care

Timely and responsive access to specialist care to meet current and emerging needs.

Emotional wellbeing

Supporting non-physical needs such as feelings, anxiety and distress.

Engagement and building resilience

Measure of the capacity to recover from disruptive events.

Dedicated service

For the bereaved, survivors and Grenfell Walk residents, developed with the community and supporting the long-term needs of those most affected by the fire.

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Primary care		
Definition or statement by community	Service commissioned /action taken	Outcome wanted
Participants reported a difference in quality of service provision across GP practices in the North Kensington area	Standardisation of service offer in Primary Care	Creation of and, on-going monitoring of the GP Compact which aims to develop a consistent and high standard service
Alternative therapies (massage) provided by some GP practices appeared to help people with their wellbeing	Alternative sources for the provision of massage to address wellbeing needs	Patients report that primary care services are culturally sensitive and appropriate
Understanding by primary care of the longer term impact of the fire on survivors, bereaved and the wider community	Specific training to understand the impact, identification and management of trauma and other allied conditions	Primary Care skilled in identifying the mental and physical impact of the fire on individuals

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Children and young people (CYP)		
Definition or statement by community	Service commissioned /action taken	Outcome wanted
Parents were extremely concerned about the long-term psychological effects of the fire on CYP, particularly those living in the vicinity of Grenfell	Child and Adolescent Mental Health services from CNWL	The voice of children and young people impacted by the fire influence health and wellbeing service provision to meet identified need
Parents had observed a change in behaviour of their older children (teenagers) after the fire, and assumed that this was perhaps a delayed response to the fire	Consider other requirements as a result of active engagement with CYP	
They were concerned at the lack of adequate support from certain schools to deal with their children's emotional issues and behavioural problems	Children and Young People forum scoping	
Specialist/Hospital services and support	WLCCG to link with school health services and RBKC to inform commissioning	Children and young people receive appropriate support at whatever point they access services
Working with children, young people and their families to provide services that support their health	Closer working with third sector organisations to ensure that appropriate services are commissioned	Services for Children and Young People available and delivered through a range of providers

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Emotional wellbeing (Mental Health and Wellbeing)		
Definition or statement by community	Service commissioned/ action taken	Outcome wanted
Culture significantly influenced the way people experienced loss and grief. The language of trauma and the ways in which they expressed these feelings differed across cultures.	Working with the local community to develop a Cultural Competency Framework	Level of trauma, anxiety, depression, distress and suffering reduced to the 'norm'
The language used by people to express their grief focused more on their emotions and feelings. They talked about the pain in their heart. They did not associate it with the mind and therefore could not relate to the western therapies that appeared to be targeting their thoughts and mind. Therefore, health services and related activities to support people's healing need to be culturally meaningful to be effective	Working with the local community to develop a Cultural Competency Framework	Emotional health does not get in the way of daily life to a disproportionate extent for those who have suffered as a result of the fire
Some older people displayed a delayed emotional reaction to the fire. There were also some who were experiencing possible re-traumatisation	Focussed work with CNWL to provide appropriate therapy services	Reduction in re-traumatisation through early identification of risk
Many were unable to understand the reasons for the change in their sleeping patterns, feelings and health condition. They were unsure about how to deal with this change in their condition.		Access to culturally appropriate services and self-care programmes that enable understanding of physical and psychological changes
Those living on their own appeared to be more at risk as they were isolated from the wider community and local services, and remained disenfranchised	Focussed work with groups for older age adults to ensure their voices are heard	Options for engagement with wider community not dependent upon statutory services

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Dedicated service		
Definition or statement	Service commissioned /action taken	Outcome wanted
Bereaved: people who lost a close family member in the tragedy	Dedicated service providing caseworker to link with the family	Health needs identified and physical, emotional and wellbeing services are in place and sufficiently flexible to meet community needs
Survivors: people whose main residence at the time of the tragedy was in Grenfell Tower		
Those residing in Grenfell Walk		
		Long term follow up programmes in place for survivors, bereaved and wider affected communities

Self-care Self-care			
Definition or statement by community	Service commissioned/ action taken	Outcome wanted	
The trauma and emotional upheaval caused by the fire had had an impact on their motivation and willingness to engage in self-care	Specific self-care programmes such as Maxilla Men's Shed; Yoga; Mind, Body and Breath training	Increased self care and self management options taken up and initiated by the community	
People were looking for activities that were culturally relevant and based in their local community	Grant programme being developed Menu of self-care options to be made available	Access to culturally appropriate self-care options	

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Specialist services				
Definition or statement by community	Service commissioned/ action taken	Outcome wanted		
Concerns regarding the impact of the fire on survivors		Any long term impacts are identified and services commissioned		
Specialist services that are easy for people to get access to	Services to be provided locally at two sites to ensure on-going annual health monitoring	Long term monitoring programme established		
Concerns in relation to the toxins from smoke inhalation and its impact on individuals particularly children	Specialist service to be commissioned from Guys and St Thomas's Hospital to review individual cases referred by GPs	Learning from research to commission appropriate services		

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Priority areas with activities

Primary care

- Core GP services
- _ Enhanced services in GP practices



Actions

- _ Consistent standard Primary care compact
- _ Enhanced health checks
- _ Extended appointments
- _ Training in cultural competence

Children and Young People

Helping children, young people and families with health and wellbeing needs



Actions

- _ Engagement platform
- Hearing children and young peoples' voices
- Work with RBKC and others
- Use of digital media
- Specialist paediatric annual review clinics

Emotional wellbeing

Supporting non-physical needs such as feelings, anxiety and distress



Actions

- _ CNWL commissioned provision
- _ Community based provision
- _ Training in cultural competence

Self-care

Access to non-medical activities and services in the community



Actions

- Social prescribing
- Trained professionals
- **Grant schemes**

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Dedicated service

For the survivors, bereaved and Grenfell Walk residents, developed with the community.



Actions

- **Enhanced Health Checks**
- _ Specialist Respiratory assessment
- _ Specialist paediatric clinics
- _ Annual review clinics for adults, children and young people
- _ Training in cultural competence

Specialist care

Timely and responsive access to specialist care to meet emerging needs.



Actions

- **Respiratory clinics**
- Toxicology for those concerned about the impact of smoke inhalation
- **Urgent referrals**

Engagement and building resilience

Community involvement in developing our approach to health. Resilience as a measure to cope and recover.



Actions

- _ Health partners programme
- _ Health literacy programmes
- _ Community health events

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We want to hear from local residents and continue our conversations on how best their needs can be met and to ensure the services detailed in the health and wellbeing strategy are what is needed.

We are really interested to hear from you this will help shape this strategy further, so please get in touch by:

Email: grenfell.response@nhs.net

Post: **West London CCG**

North Kensington Health Recovery Programme

3rd Floor

15 Marylebone Road **London NW1 3JD**

Website: www.grenfell.nhs.uk/get-in-touch

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Get in touch with us

If you want to get in touch with us and find out more about A Health and Wellbeing Strategy for North Kensington please email or write to us using the contact details below:

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