

# Annual Population Health Report 2024



Forewords	03	Objective 1	21	Objective 5	47
Summary	07	Employment support for service users, carers and local residents		Champion social justice, and fully commit to tackling racism and other forms of prejudice	
About this report	09	Objective 2	28	Objective 6	53
What we mean by population health and why it matters to ELFT	10	Income maximisation to support a healthy standard of living		Contribute to the creation of healthy and sustainable places, including taking action on climate change	
Cross-cutting programmes	16	Objective 3	35	Reflections	59
		Promoting the physical health of people with long term mental health conditions and learning disabilities		2024 population health activity and learning going forward	
		Objective 4	41	Acknowledgements	60
		Children and young peoples' emotional, physical, social, and learning development			

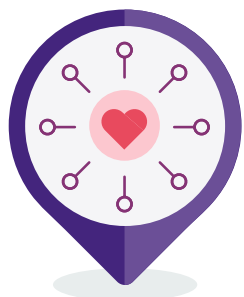
# Contents





# Foreword

**Congratulations to everyone who supported our population health work over the past year.**



This report is a celebration of many of our achievements and the partners working with us on this journey. In addition, I know behind each story and example there are many, many other colleagues, services, partners, volunteers who are making a difference to the wider health and wellbeing of others, whether its by initiating a conversation about help with employment, making a referral to our tobacco dependency service, developing a partnership with a community organisation or supporting the wider environment. Thank you.

Our commitment to improved population health at the Trust gives us space to talk about and then put into action what we can do collectively to make a difference to the quality of life for the

people we work with and who live in our service areas. It is underpinned by our Trust values – to be caring, respectful and inclusive. It is also about social justice. Far too many people in the places we provide support do not experience the same health outcomes when compared with the national average. This is not acceptable, and we need to continue to recognise and act on the ways we as an NHS trust can help reduce health inequities including working with our place-based and national partners.

I encourage you to read this report and think about the areas of work that speak to you. If you are not already, let us know how you can join our population health commitments at the Trust. And do share this work with others.

**Lorraine Sunduza OBE**  
**Chief Executive Officer**



# Foreword

My colleagues and I at the UCL Institute of Health have produced reports showing the dreadful state of health in the UK in 2024: life expectancy did not improve over the last 14 years, health inequalities increased and health for people in the most deprived areas deteriorated. We then put forward a set of recommendations on the social determinants of health, all actions that commonly have little to do with health care.



A common *cri de coeur* from people working in the health sector is: but what can we do?

My answer is: look at ELFT.

We point to eight areas that need action – give every child the best start in life, support good education and lifelong learning, create fair employment and good working conditions, ensure a healthy standard of living for all, develop healthy sustainable places, tackle racism, discrimination and pursue environmental sustainability and health equity together.

When these areas of action become the guiding framework for an organisation we celebrate this commitment as a Marmot Place. What makes

ELFT unique is that it's a 'Marmot Trust' – the first healthcare trust that says we will focus on addressing the social determinants of health, using these evidence-based principles to guide our work. Noting the government's mission to shift our healthcare system from sickness to prevention, ELFT is showing the way.

I therefore welcome this very timely publication of ELFT's second annual population health report. If people suffer ill health through the conditions in which they are born, grow, live, work and age then it is incumbent on all of us to help achieve health equity. I am delighted that ELFT is a partner, working alongside many others, in this journey.

**Professor Sir Michael Marmot**







# Foreword

I am delighted to introduce East London NHS Foundation Trust's second annual population health report. This builds on the first report published in 2023, that set out our strategic commitment to work on improving the health of everyone living in the places we serve alongside showcasing our initiatives.



As we deal with the financial challenges facing many of us in the NHS, we need to remember the values that guide us in our commitment to population health – to do our bit to make our corner of the world a fairer place to live and work. This is also timely with the government consulting on a new 10 Year Health Plan, including a focus on preventing illness occurring in the first place. This report helps us celebrate what we are achieving and look ahead to what more we can do.

Our population health work is the collaboration of the many - including teams from across our organisation and partnership working with place-based colleagues, including local authorities, health care partners, the voluntary and community sector and academics. Our

achievements are part of this partnership support, alongside our investment in People Participation and Quality Improvement in the Trust. This is evident in the case studies and quotes embedded in the report with many projects led by our People Participation leads with input from service users and carers, and Quality Improvement providing the tools and approach to support a diverse range of projects alongside delivering a Trust wide health equity programme.

Congratulations to all involved, including our population health advisory group of service users and carers helping guide the work over the year and oversee this report

**Eileen Taylor**  
**Chair East London NHS Foundation Trust**





## Service user and carer population health advisory group



Improving population health is vital for creating equitable, sustainable, and person-centred care. I'm proud of the strides we've made in collaborating across teams and communities, particularly in addressing health inequalities.

Over the next year, I encourage everyone—staff, partner organisations, service users and carers—to take collective action by embedding population health principles into everyday practices and co-creating solutions that truly make a difference.

*- Aurora Todisco*



This is a coproduced report with service users, and I am proud to be a part of it.

I support ELFT's work in Tower Hamlets, one of the most diverse boroughs in London. It faces a lot of inequalities and challenges when it comes to public health. The work we're doing with population health is critically important as it impacts all walks of life within the borough, especially people with serious mental illnesses who have an unfair reduced life expectancy.

*- Eleanor Addo*



I have enjoyed being part of the Population Health Advisory Group. It has been a great opportunity to advise on the format, layout and content of the Population Health Report to make it as accessible as possible. Along the way I have learned a lot about some of the great work that is happening across the Trust to tackle some of the issues that impact our local communities.

*- Jane Fernandes*



I am proud of being part of the Population Health Advisory Group and what's been achieved over the year. I've been part of a number of population health projects, including quality improvement work, developing an anti-racism framework for the Trust (PCREF) and being part of the domestic abuse steering group. I encourage others to join quality improvement projects that can support this work particularly connected to Bedford primary and secondary care.

*- Jeniffer Hedworth*



# Summary of annual achievements

Our Strategy commits us to improving population health together with improving quality of care, staff experience and value.

In 2024 we've focused on three specific areas alongside broader population health work:

## 1. Local employment [\(see Objective 1\)](#)

- Benefiting as an organisation from many people with lived experience in employment and volunteer roles at ELFT including in our People Participation directorate.
- Providing employment advisors to help service users stay in and return to work through Individual Placement Support, employment advisors in Talking Therapies and additional employment support through Compass Well-being.
- Helping local residents access healthcare careers through apprenticeships, taster days, volunteering, local partnerships and social value contracts.

## 2. Income maximisation [\(see Objective 2\)](#)

- Becoming a Real Living Wage accredited organisation, including increasing the proportion of suppliers paying the Real Living Wage by 13% in the past year.
- Co locating benefit advisors in our healthcare settings and evaluating its impact through the Healthier Wealthier Families in East London pilot.

- Launching a digital champion training programme to improve digital inclusion and providing cost of living support to service users, carers and local communities.

## 3. Promoting the physical health of people with severe mental illness and learning disabilities [\(see Objective 3\)](#)

- Providing health promotion support through specialist stop smoking and weight management services.
- Increasing access to health checks and physical activity opportunities.
- Creating learning spaces across the Trust to improve physical health outcomes through quality improvement and a diabetes prevention and management group.





## Next steps

In the coming year, our population health work will prioritise:



### 1. Early years and family support

- Reducing the impact of child poverty through co located income support.
- Strengthening awareness and access to mental health support through community partnerships.

### 2. Local employment

- Continuing to increase access to employment support and good quality job opportunities for service users, carers and local communities.

### 3. Homelessness prevention and support

- Strengthening support through ELFT service settings including for people with uncertain immigration status.
- Working with partners to strengthen health and housing support across the Trust.

### 4. Prevention and early support for physical ill health

- Reducing barriers to cancer screening for people with Severe Mental Illness and learning disabilities.
- Ongoing focus on physical health promotion and prevention including Type 2 diabetes and the development of a Trust physical health strategy.



# About this report

Improving population health is one of ELFT's four strategic pillars. Our second annual population health report celebrates the many ways this strategic commitment is driving action across the Trust, emboldened by partnerships, people participation, quality improvement and our recognised need to strengthen preventative action alongside delivering high quality clinical care.



The report describes actions against three agreed areas of focus for the Trust over the year:

- Employment support for service users and local people
- Income maximisation to support a healthy standard of living
- Promoting the physical health of people with severe mental illness and learning disabilities.

This is alongside activity for our three additional population health strategic objectives:

- Prioritise children and young people's emotional, physical, social and learning development
- Champion social justice and fully commit to tackling racism and other forms of prejudice
- Contribute to the creation of healthy and sustainable places, including taking action on climate change.

Quotes from staff, service users and carers, including interviews with ELFT's Academy of Lived Experience, are included in the report alongside numbers, charts and case studies, with key references listed at the end. We are very grateful to everyone's contribution, both in terms of report contents and delivery over the year.

**Laura Austin Croft**  
**Director of Population Health**







# What is population health?

Population health involves taking a broader look at what underpins the physical and mental health outcomes and wellbeing of staff, service users, carers and our communities. It includes providing good, accessible health care services that meet the needs of all population groups in our service areas, as well as addressing the wider determinants of health that play an important role in where we see unfair differences in health outcomes.



Population health to me means a more holistic approach to the health of the general population and not just talking about clinical terms or hospital waiting list times, but also the other factors that have an impact on people's health, whether that be housing, air quality and many other external factors in physical health as well as mental health.

- Academy of Lived Experience  
Service User interview



## Glossary

**Equity vs Equality:** A model that recognises the differing needs, challenges, and circumstances of individuals and communities, allowing tailored support to achieve fair outcomes. Unlike Equality, which treats everyone identically, Equity fosters fairness by adapting approaches based on specific needs. This approach aligns with ELFT's commitment to providing inclusive, patient-centred care.

**Integrated Care Systems:** Partnerships across a local area that bring health and care organisations together to develop shared plans and joined-up services.

**NHS-led Provider collaboratives:** Partnerships across services to ensure that people with specialist mental health, learning disability and autism needs experience high quality, specialist care, as close to home as appropriately possible, which is connected with local teams and support networks.

**Racialised groups/communities:** This term describes individuals who experience discrimination or different treatment based on perceived racial characteristics, shaped by social, historical, and institutional factors rather than biology. The term is not an acronym nor a label, rather an overarching term to refer to the wide range of ethnic and racial groups experiencing racial inequities.

**Wider determinants of health:** A range of social, economic, and environmental factors that impact our health and well-being.



Wider determinants of health can be described as the ‘building blocks of health’ - the things we need in place to help us stay well and safe, for example good housing, employment, air quality and education. It’s estimated that health care services contribute around 20% of what keeps us well compared to our everyday activities and the environment where we live contributing around 50%.

Improving population health includes a strong emphasis on improving health equity, which means reducing the unfair and avoidable differences in health across population groups. Health equity challenges are often linked to the wider determinants of health. For example, being a carer may make it more difficult to get a job, resulting in a low income that can impact on living conditions and participation in activities that help us stay well. Reducing barriers to health equity also means designing services with others, specifically people with lived experience, to support everyone to achieve good access, experience and outcomes.

Partnerships are key to population health improvement. Healthcare settings frequently use the term population health to describe the collective and collaborative approaches required across Integrated Care Systems, local government, the NHS, voluntary and community sector organisations, education and other partners to support the health and wellbeing and reduce health inequities of communities in a specific geographical area.



**From a carers perspective I found that many places work in silos and don’t actually connect with each other, so talking about population health will help people to join up, to think holistically about how they are going to help their patients and their loved ones.**

*- Academy of Lived Experience Carer interview*

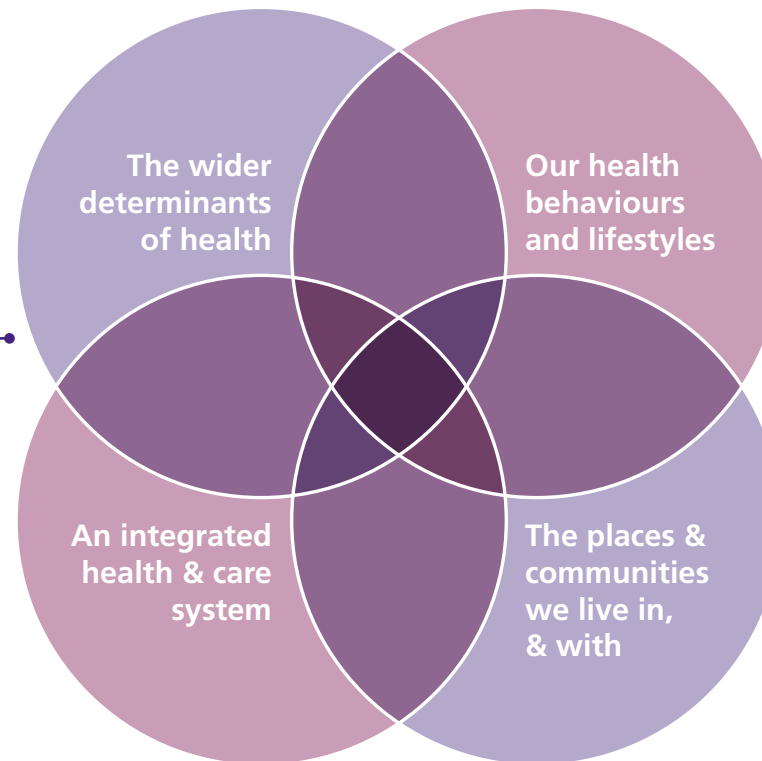




**A population health framework developed by the King's Fund** helps illustrate the different areas of population health activity, noting that there are overlaps across areas. This includes acting on the wider determinants of health, supporting healthier behaviours and lifestyles, working with local place-based partners and building on community assets, and developing relationships with other organisations to better meet the needs of our populations.

- Maximising social value for our population through role as an Anchor Trust (e.g. being a Real Living Wage employer).
- Supporting our service users with advice and access to:
  - employment support
  - income maximisation
  - education and training
  - and green space across our sites.

- Identifying areas where we can join up with other organisations to better meet the needs of our populations.
- Collaborating with other health and NHS organisations in our geographical patch to better meet the needs of particular groups either through formal partnerships (eg. North Central East London Collaborative for children and young people) or through improvement networks.



- Creating environments for our staff, service users and carers to support them to make healthy lifestyle choices (eg. the availability and affordability of a healthy nutritious food offering in our canteen; offering vaccinations to our staff).
- Supporting our service users with: smoking cessation; alcohol reduction; weight management and opportunities for physical activity.

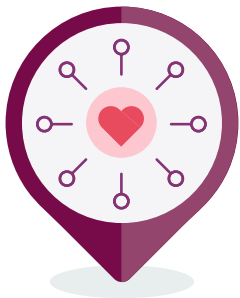
- Locating our services where they are needed.
- Working with our local communities and their assets.
- Enhancing social relationships and community networks.
- Developing our services with our communities so they are culturally sensitive.
- Tackling racism and other forms of discrimination.





# Why does population health matter to ELFT?

More and more of us are sadly spending a greater proportion of our lives in ill health, with this unfairly affecting people who are most negatively impacted by the wider determinants of health, such as poor quality housing, low income and insecure employment.



The more we can help address health concerns early or prevent health problems developing by addressing the causes of ill health, the better we will be in providing care when needed and reducing demand on emergency access to healthcare support. **This is also about doing the right thing – taking action where we can to support healthier and happier lives.**

## Independent Investigation of the National Health Service in England

Lord Professor Ara Darzi completed a rapid independent review of NHS performance for the new government, published in September 2024. The review sets out serious population health challenges, noting the recent fall in the number of years people can expect to live in good health and the contribution of the wider determinants of health to poorer health outcomes.

The reviews findings, alongside a wider consultation, are informing a new ten-year plan being developed by the government for the NHS, which will be based on three shifts in healthcare: focusing on preventing sickness, not just treating it; moving more care from hospitals to communities; making better use of technology in health and care.

Examples in this report set out the shifts we are making each day towards embedding prevention and health equity in our work as a provider of mental health, community health and primary care services, alongside the role we play as an employer, a procurer of services, and being part of two Integrated Care Systems. These examples can be mapped onto the three health missions set out by the government in October 2024.



**Everyone knows that prevention is better than cure.**

*- Independent Investigation of the NHS in England, 2024*



## Examples of ELFT activity against the Three Big NHS shifts

### Treatment to prevention

Supporting people with mental health needs and long-term health conditions stay in and return to employment including bringing together local services and organisations.

Co locating benefit advice in our healthcare settings to mitigate the health harms of poverty.

Strengthening physical health support for population groups experiencing inequitable gaps in life and healthy life expectancy.

Tackling racism and discrimination in the NHS for staff and service users.

### Analogue to digital

Training Digital Champions in the Trust to support service users, carers and staff who face barriers to digital access.

Ongoing use of needs assessments to better understand our population health data to improve support.

### Hospital to community

Working across provider collaboratives to support care at home and in the community.

Delivering weight management and smoking cessation programmes in community settings.

Piloting a mental health hub in a community setting to reduce need for inpatient admissions.

**For more information visit our population health web page:**

> <https://www.elft.nhs.uk/information-about-elft/our-strategy-vision-and-values/population-health>

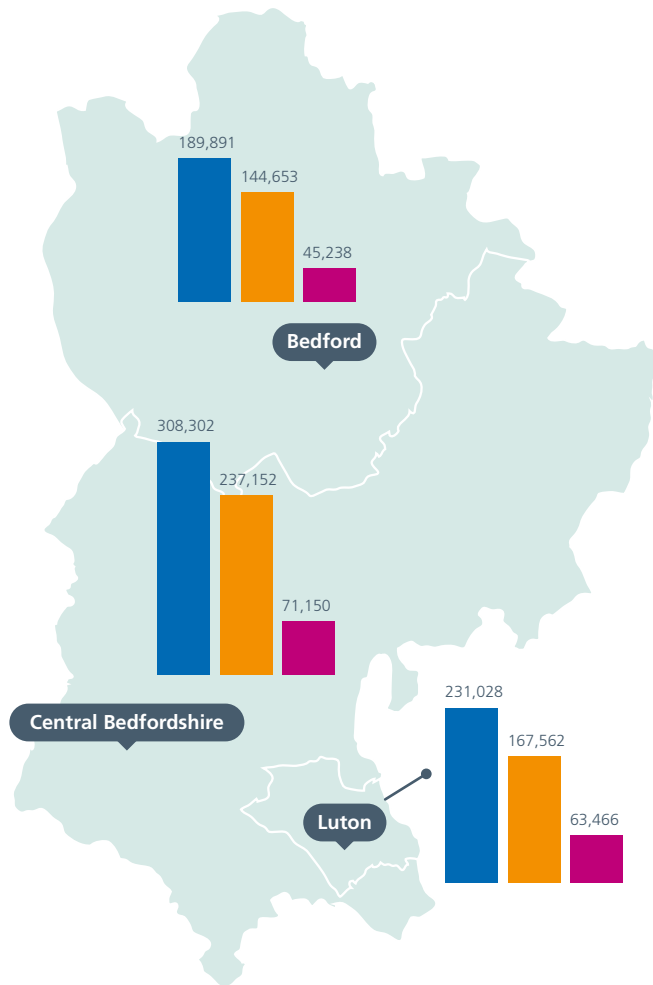
## Overview of ELFT's populations

We provide services to over 2 million people. This includes around 1,700,000 people living in the East London boroughs Tower Hamlets, Newham and City and Hackney and Bedford, Central Bedfordshire and Luton, alongside commissioning responsibilities for North Central East London and providing forensics services across North London.

Our populations are ethnically diverse. Newham and Tower Hamlets are in the top ten most diverse local authorities in England and Wales and there are also high levels of ethnic diversity in City and Hackney and Luton. The proportion of people 18 years and under compared to the overall population is highest in Luton (27%) and lowest in Tower Hamlets (20.4%). All ELFT areas have seen an increase in population size since the 2021 Census data, with this highest in Central Bedfordshire at just over 2%.

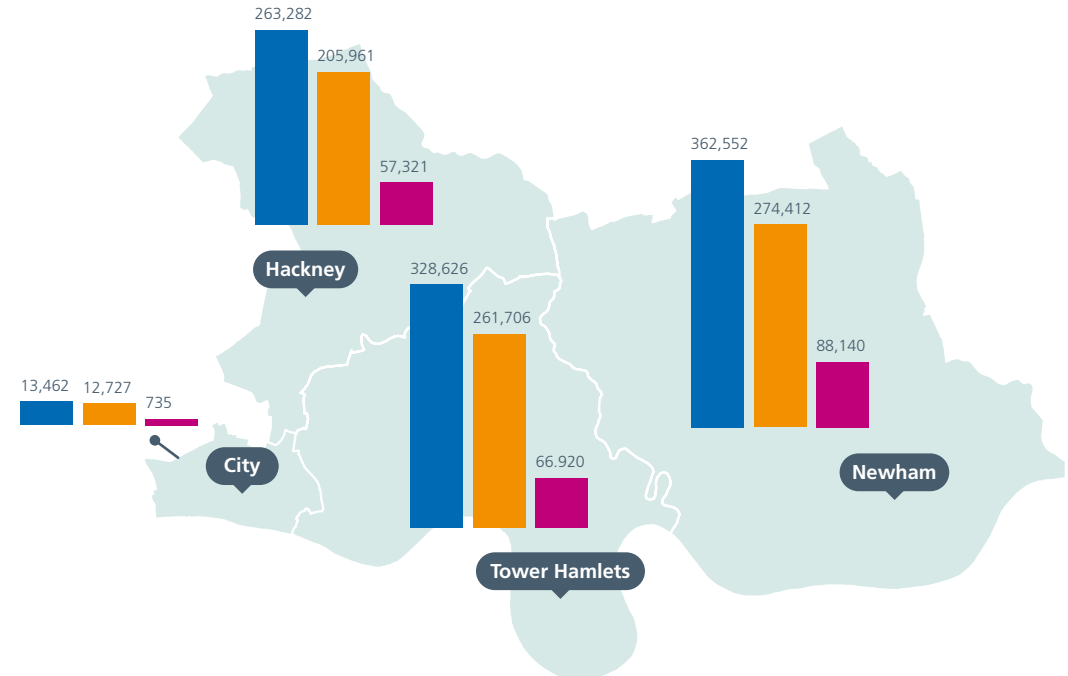


## Bedfordshire and Luton population estimates mid 2023, ONS



Key - Age Group ● Total population ● 19 year+ ● 0-18 years

## East London population estimates mid 2023, ONS



For a more detailed overview of our populations and characteristics see:

- > [Annual population health report 2023](#)
- > [Local area data packs](#)



# Cross-cutting programmes of work

We believe we have a responsibility to do our bit to make our corner of the world a fairer place to live and work. Our work on population health, including being an Anchor organisation and a Marmot Trust, is our way of turning this aspiration into reality.

## ELFT as an Anchor organisation

The Health Foundation describes anchor institutions as large organisations whose long-term sustainability is tied to the wellbeing of the populations they serve. As an anchor institution, the East London NHS Foundation Trust (ELFT) has a significant stake in influencing the health and wellbeing of its communities by its local presence and activities.

In 2023, ELFT published an Anchor Plan with commitments for the years 2023-2026, focused around four key areas called 'pillars':

1. Employment - Widening access to employment for local people and those facing barriers to the labour market.
2. Procurement - Embedding social values in procurement so that we purchase more goods and services from local businesses and those that promote social, economic and environmental wellbeing in local communities.
3. Sustainability - Improving environmental sustainability in our operations and in the wider community.
4. Land and Estates - Using our land and buildings to benefit local communities.

Our progress towards Anchor Plan commitments are celebrated in this report, for example the number of suppliers now paying the Real Living Wage and increasing the number of green spaces in the Trust. We are currently in the process of reviewing the commitments we made in the [2023-2026 Anchor Plan](#). We are doing this by speaking with the pillar leads and other stakeholders, including service users and carers, as well as reviewing performance data where available. Findings of the review will inform our population health plan over the next year.





## Being a Marmot Trust – focusing on upstream actions to improve health



**A good example is how East London Foundation Trust is working with the people it serves to be a Marmot Trust, seeking to tackle health inequalities in all it does. A strong voice for patients and local communities would promote more responsive services, while making it easier for the NHS to fulfil its promises to promote population health and to narrow health inequalities.**

*- Independent investigation of the NHS in England*

We have worked with the Institute of Health Equity to become the first NHS “Marmot Trust”, testing the boundaries of what an NHS Trust can and should do to improve the health of the whole population it serves. This includes embedding the evidence-based principles led by Professor Sir Michael Marmot for reducing health inequities in our strategic population health work across the Trust.

This year we established an ELFT Marmot Implementation and Learning Advisory Group to learn and critically assess with public health and academic colleagues how we are testing the boundaries of an NHS provider trust against Marmot principles and to help prioritise areas of action and focus.

Compass Wellbeing, a community interest company owned by ELFT, includes supporting the ambition of ELFT being a Marmot Trust as central to its mission. This helps provide a strong community focus in our work to tackle the drivers of poor health through partnership working with the voluntary community sector.

### **A commitment to People Participation in everything we do**

As noted in the Independent Investigation of the NHS in England, the strong voice of ELFT service users and carers is key to our population health work. ELFT’s People Participation directorate, dedicated to involving service users and carers in the work of the organisation and its partnerships, is central to the delivery of a wide range of our population health action and celebrated throughout this report.

### **A commitment to Quality Improvement in everything we do**

Quality Improvement (QI) uses a systematic approach to solve complex issues through testing, learning, and measuring progress, with staff and service users actively involved in the process. Since 2022, the Trust has run two phases of its Pursuing Equity QI programme, supporting over 30 teams to address inequities for racialised communities and issues related to gender and sexuality. Currently phase three is focussing on supporting 31 teams to reduce the gap in missed appointments between the most and least deprived areas served by the Trust.

Other QI initiatives include working to improve physical health and drive environmental sustainability. For example, supporting a 54% reduction in single-use cutlery in forensics, a 95% reduction in tablet waste in the Luton crisis team, and an increase in walking aid recycling in Newham from zero to six per week.







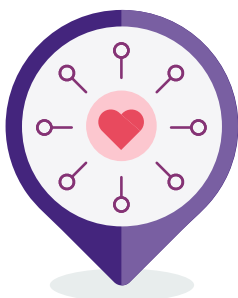
## Integrated Care Partnerships



**One of the biggest barriers that I've found as a service user is no joined up thinking. Everybody works very hard. Everybody is very conscientious and everybody wants the best for service users, but many departments seem to work in isolation....So I would say to anybody think about the whole network...think about joined up thinking approach.**

*- Academy of Lived Experience  
service user interview*

ELFT is pleased to work across two Integrated Care Systems (ICSs), North East London and Bedfordshire, Luton and Milton Keynes, bringing together providers and commissioners of NHS services with local authorities and other local partners to plan, co-ordinate and commission health and care services. They provide a space to work with partners on prevention and reducing health inequities, based on a local understanding of population needs and therefore supporting us with many aspects of our population health ambitions as a Trust.





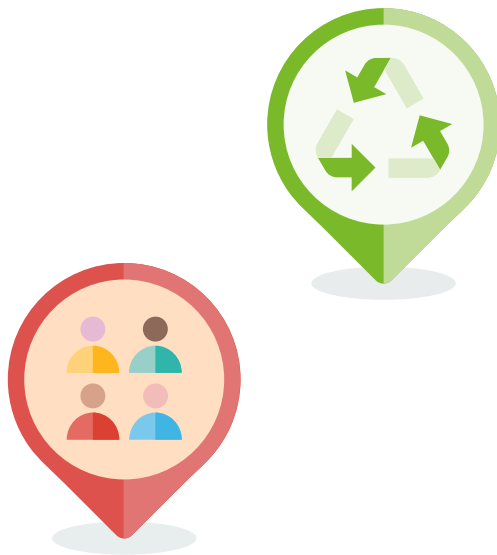
# Building population capability, capacity and coherence

Enabling all ELFT staff to take a population health approach to their work is how we achieve scale and wide-reaching impact across the Trust.

A series of learning programmes are in place to support staff, including an introduction to ELFT's commitment to population health during induction and the newly accredited ELFT Lead Programme.

We offer ongoing opportunities to develop skills through webinars and presentations. This year we focused on how to support people experiencing poverty with webinars on destitution in the UK, poverty proofing NHS organisations as well as practical advice on supporting people with No Recourse to Public Funds. We also delivered population health learning sessions at staff awaydays, conferences and for ELFT networks.

Outstanding contributions to population health are celebrated through the Commissioners Award for Improving Population Health in the annual staff awards and the Living Well Working Together Award for Allied Health Professionals (AHPs).



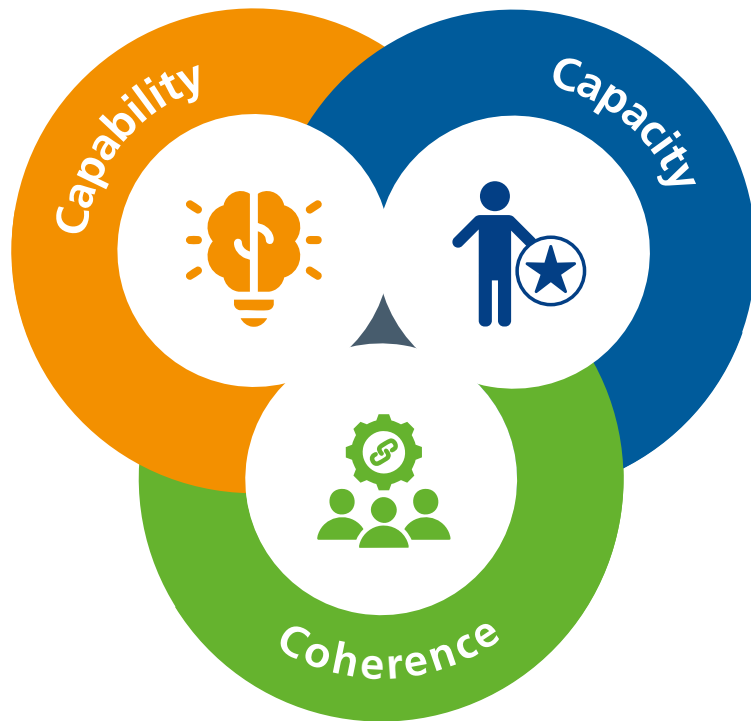
## Allied Health Professional (AHP) Living Well Working Together Award

This award recognises an AHP team or individual who has worked together with service users, local communities and service providers to deliver service improvements that benefit population health and wellbeing, prevention, self-management, recovery and rehabilitation.

**The 2024 winner was the Developmental Co-ordination Disorder (DCD) Team of the Specialist Children Young People & Services (SCYPS) Occupational Therapy Service for Children.** With Leyton Orient Football Club, the team developed and delivered football group sessions for children, young people and their families with DCD across Newham, Hackney and Tower Hamlets. 100% of the parents said that their child or young person enjoyed these sessions and there was a 71.4% improvement in the number of football goals children scored following participation.



A review is currently taking place to understand how we further develop the population health capability and capacity of the organisation, with this informing action plans for 2025 to 2026.



### Capability

Equipping staff with the knowledge and skills they need to take a population health approach to their work

### Capacity

Grow capacity as an organisation to deliver improved population health

### Coherence

Linking population health work across initiatives so it makes sense for staff, service users and partners







## Objective 1

# Employment support for service users, carers and local residents

# 1





## Objective 1

# Employment support for service users, carers and local residents

Over 2024 we've been prioritising activity that supports service users, carers and the communities we serve to develop skills and access meaningful activity and good quality work.

### Highlights over the year:

#### Supporting service users to stay in and find good employment

- **224** people are currently employed at ELFT in roles that directly use lived experience expertise. This includes peer support workers, befrienders, peer tutors at Recovery Colleges and People Participation leads across all ELFT service delivery areas. In addition, service users and carers are involved in programmes of work across the Trust and reimbursed for their time.

- Around **1,000 people with long term mental health conditions received Individual Placement Support** over the past year helping **236 (24%) people enter employment and 85 education, training or volunteering**.
- **1,165** people accessed employment advice as part of Tower Hamlets Talking Therapies provision. Two new employment advice services were launched this year for people using Talking Therapies services in Newham and Bedfordshire, with **1,067 people** receiving support in the first ten months.
- ELFT hosted **two in person co produced employment events** for service users and carers, bringing together NHS, local authority and voluntary and community sector employment support services.

### Glossary

**Unemployment rate:** The proportion of people who are unemployed and looking for work.



**At the Recovery College I began to discover capabilities I didn't know I possessed: skills in teaching and peer support...My perception of myself, of what I was capable of and the future I might be able to dream of, started to shift.**

*- Katherine, Recovery College previous student and peer tutor*





## Working with partners to support local people into employment and apprenticeships

- **304** local residents accessed employment since April 2022 through ELFT's facilities social value contract, with nearly £15 million in social and economic value delivered so far. This contract is in the top 10% of NHS social value contracts delivering for its service areas.
- A Quality Improvement programme started this year to **develop a healthcare careers awareness programme** for the Trust, including holding our first career taster day for young people in two East London service areas.
- Around **60% of apprentices** recruited from ELFT footprint areas. In addition, seven apprenticeships supported in local employer settings through the **transfer of ELFT's apprenticeship levy** (a way of supporting smaller businesses provide apprenticeship placements).
- ELFT achieved a gold standard for the Ministry of Defence Employment Recognition scheme recognising its work to improve employment opportunities for the Armed Forces community.



**The information given was helpful for if I want to pursue a certain career, or if I want to consider other options for moving up in my career.**

*- Attendee of the summer 2024 healthcare career taster day*

## Why does it matter?

Good jobs provide fair pay, safety, job security, opportunities to progress, flexibility and opportunities to help make decisions. A good job helps people stay well and recover.

Supporting people to return and stay in employment is an important health and economic issue. There are rising levels of people not able to work owing to ill health and this is affecting more people living in poorer economic areas and in younger age groups.

Some people face particular barriers to employment, including carers, people with learning disabilities, and people with long term physical or mental health conditions. For example, only 6% of people in contact

with secondary mental health services are in employment nationally and 4.7% of people with learning disabilities. This is despite approximately 80% of people with mental health conditions wanting to work. Health care services therefore play a key role in supporting people to stay in and return to work, including by sharing what support is available within their own services or in their local area.



**Too often, disabled people and people with health conditions cannot get the help they need or cannot access support in a way that is joined up between services. To tackle these trends, preventative health interventions, a stronger role for local areas in integrating support, reforms to the benefits system and support for employers to play a proactive role, are all needed.**

*- Get Britain Working White Paper*



## Employment support programmes available in healthcare settings

**Individual Placement and Support (IPS)** - Helps people with long term or complex mental health and people in structured community treatment for drug and/ or alcohol misuse access employment. Employment specialists work with clients on rapid job searches, confidence building, CV development, employer engagement, interview techniques and reasonable adjustments. IPS is now also offered in Primary Care for people with common mental health or physical health disabilities in City and Hackney, Newham and Tower Hamlets.

**Employment Advisors in NHS Talking Therapies** - For people experiencing common mental health disorders and receiving NHS Talking Therapies treatment, who are either in or out of work. The service user, employment advisor and therapist work together to set employment goals and deliver a bespoke action plan.

### Our local context

The proportion of people in employment varies across ELFT, with the unemployment rate higher than the national average in four areas.

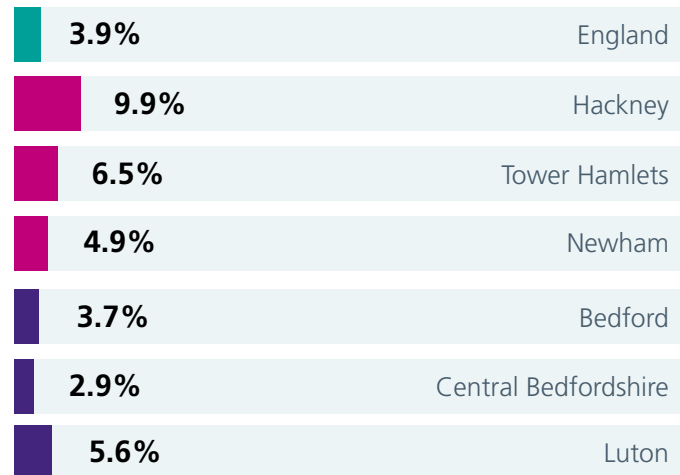
Gaps in employment rates refer to the percentage point difference between the employment rate for one group compared to another. It can therefore be a measure of inequity and show structural challenges for different population groups accessing employment.



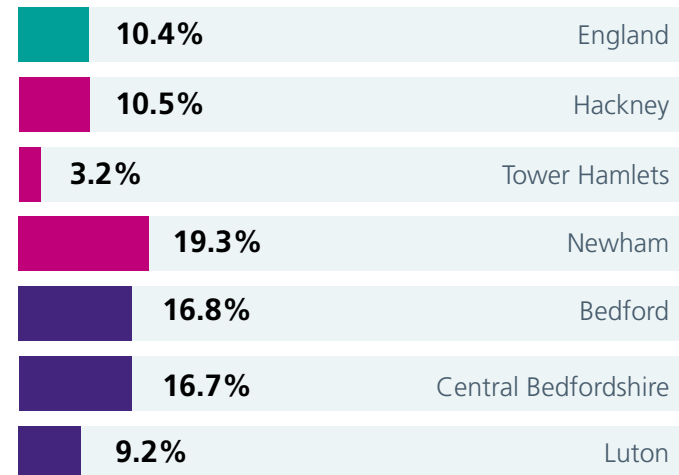


## Unemployment rate

(2023 / 24)



## Gap in the employment rate: People with a physical or mental long term health condition (aged 16 to 64) and the overall employment rate (2022 / 23)



### Key - Region

- England
- East London
- Bedfordshire and Luton

## Examples of local partnerships

### Improving Equity with ELFT Quality Improvement and Tower Hamlets Council

Projects included supporting 15 Somali women into healthcare careers through a partnership between Women in Training and Tower Hamlets GP Care Group and development of a peer network to support African men over 50 access employment.

### Project Jobs - Co-produced to increase lived experience employment within ELFT and NELFT (North East London Mental Health & Learning Disability Provider Collaborative)

Developed from service users feedback for better representation ('people like me') in services and more career development opportunities for lived experience roles. Actions so far include a skills and interests audit and support with digital and project working skills.

### ELFT and Our Newham Works (Newham Council's employment support team)

Piloted in 2023 and now an embedded partnership, supporting so far over 90 local people secure healthcare roles. Help includes information workshops and interview practice.





## Case Studies

### 1. Compass Wellbeing CIC: Supporting Employment Pathways

Compass Wellbeing, a community interest company owned by ELFT, launched a two-year Employment Support programme this year with NHS Charities Together to help hundreds of mental health service users across Tower Hamlets, Newham, Hackney, Bedford, Luton and Central Bedfordshire overcome employment difficulties worsened by the pandemic. Compass Wellbeing also provides an employability and training programme for service users transitioning from inpatient or secure facilities, many with a history of offending. In 2024, twelve people completed work placements. All were formally contracted as business administrators in paid part-time roles and received skills training and an initial allowance to help prepare for work, such as buying office clothing. Participants reported improvements in confidence, motivation and work skills.



**I developed and refined my computer skills and am now more comfortable.**

*- Compass Well-being work placement participant*

### 2. ELFT volunteer placements for local graduates

ELFT partners with local universities to provide volunteer placements in healthcare settings to around 100 graduates each year. This supports graduates gain an understanding of the work environment, develop links with ELFT staff and open up opportunities for further learning and development, such as apprenticeships. Even with a degree it is not always easy to get a job and pre-employment support, such as through volunteering, can build confidence and greater appreciation of the work environment.



**I wanted to volunteer with ELFT because it would give me a really good insight into how the NHS works, working with vulnerable people especially.**

*- Gabriela, ELFT volunteer*



### 3. Work placements for people with learning disabilities

ELFT's Occupational Therapists in Forensics and Community Services came together to increase work placement opportunities for people with learning disabilities.

An ELFT charity application supported a partnership with Unity Works, providing work placements opportunities in a range of settings including cafes and horticultural placements. This has supported two service users to complete a year work placement. The success of the partnership is being followed up with an application to the North London Forensics Collaborative to fund two more placements next year.



**I have made friends with other people that have learning disabilities.**

*- Service user completing a work placement at Unity Works*



#### Next steps

Start a learning disabilities employment network for ELFT to learn from different areas and identify ways to increase training and employment opportunities.

Continue to increase awareness of local employment support including through in person events, encouraging clinically led conversations and strengthening partnerships in each ELFT service area.

Work with Integrated Care System partners, including local authority public health teams, ICS Anchor networks and Provider collaboratives on employment support goals.







## Objective 2

# Income maximisation to support a healthy standard of living







## Objective 2

# Income maximisation to support a healthy standard of living

Over 2024 we've supported service users, carers and our communities to achieve a healthy standard of living through tackling low pay, supporting people to access the benefits they are entitled to, building awareness of cost of living support and helping improve digital inclusion.

### Highlights over the year:

- ELFT is now a **Real Living Wage (RLW) accredited organisation** recognising its ambition for all suppliers to pay the RLW by March 2026 as well as paying staff Real Living Wage rates. **81% of our suppliers now pay the Real Living Wage** compared to 22% three years ago.
- The Healthier Wealthier Families project at Newham's specialist neuro disability clinic SCYPS has so far supported access to around **£665,000 in unclaimed benefits for 107**

**families.** Many similar examples of co located benefit advice continue to happen across the Trust including in Forensics, Centre for Mental Health in Hackney and Newham, Mind providing support for East London community mental health teams, Citizens Advice supporting Luton primary care services and the Claim the Max clinic running in Mile End hospital.

- **ELFT's Digital Life Coach programme** is training 25 Digital Champions at the Trust to train other staff and service users to be digitally confident. This builds on national examples of practice, such as Bradford City Council where 50 Digital Champions supported 500 local residents over two years.
- **Wide range of support by ELFT's People Participation Cost of Living lead** including a [Trust-wide online resource](#) for service

### Glossary

**Deprivation:** Where you do not have the things or conditions needed for an agreeable life.

**Real Living Wage:** Recommended UK wage rate based on the cost of living.

users, carers, staff and local communities. This includes advice and tips for reducing household bills along with details of local borough free resources.

- Hosting **three webinars** for staff and partner organisations to deepen understanding and provide spaces for discussion around income support including who is affected by **destitution**, what we mean by **poverty proofing** and awareness of people with **No Recourse to Public Funds** (NRPF).



**After completing the digital life coach training one of the things I really wanted to do was support people to get the NHS app... I volunteer in a small community centre where ladies meet. A number of them have limited English and most of them have health issues.**

**I collected different resources including YouTube videos and set the group session to follow the instructions step-by-step... Everyone managed to install the app and I explained how to order medicines so you don't have to go to the GP.**

*- Moniek, Digital Life Coach*

## Why does it matter?



**I was quite shocked how many carers did not know what was available to them financially, things like benefits, attendance allowance..."**

*- Academy of Lived Experience  
Carer interview*

Living in poverty makes it much harder to live a healthy life. Poverty can stop people being able to buy what they need, reach their full potential in education, participate in social activities and manage unexpected expenses. It can be harder to access healthcare owing to transport costs or difficulties taking time off work. Eating well is difficult, with the Food Foundation estimating that people in the poorest 20% of the population need to spend half of their income for a healthy diet. Poverty also worsens mental health and well-being, for example increasing feelings of loneliness and anxiety.

National data shows a recent increase in poverty. It now affects 3 in 10 children, 2 in 10 working age adults and 1 in 6 pensioners. There's also been an increase in people experiencing destitution, which is when you are not able to afford the most basic needs to stay warm, dry, clean and fed.

Rising poverty increases demand on healthcare services. For mental health care, if you live in the most deprived areas of the UK three times as many people are in hospital and five times as many stay longer than 60 days compared to the least deprived. It may also be more difficult

to access early healthcare support - for example people with diabetes in the poorest areas are less likely to receive all the care processes they need as compared to people in the least deprived.

Digital poverty can affect income, employment, education and access to healthcare appointments and advice. Digital exclusion affects population groups likely to also experience other social and economic challenges – for example older people, disabled people, low-income families, refugees, asylum seekers and migrants and people who are homeless.





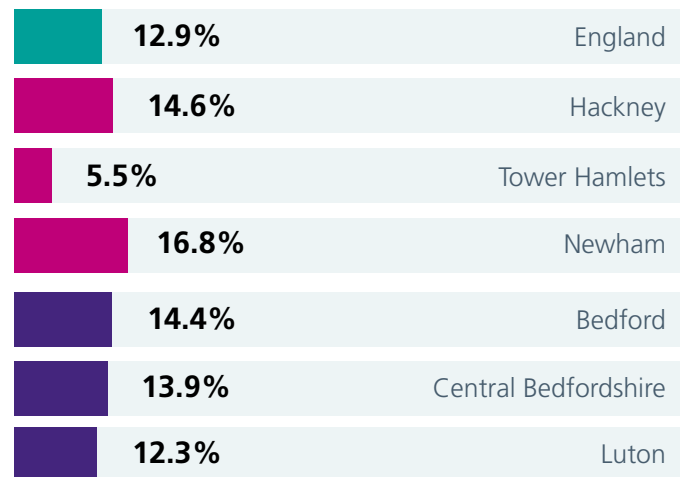
## Our local context

Many people living in ELFT service areas are impacted by poverty with accompanying poor health outcomes. For example, the Denny Review, investigating health-related inequalities in Bedfordshire, Luton and Milton Keynes, shows differences in life expectancy of more than eight years between the least and most deprived areas of Bedford and Luton. It also describes inequalities between different population groups, for example estimating that one in 66 people in Luton are homeless.

Children living in poverty are more likely to have poorer physical and mental health problems with potential lifelong impacts. Some adult populations using ELFT services are also at increased risk of health harms owing to less money. For example, the Trust's learning disability needs assessment showed that nearly all people on the learning disability register live in the most deprived parts of ELFT's East London boroughs.

Integrating welfare and money advice into our healthcare settings provides a targeted form of support for people in most need. An evaluation of health setting advice services in Hackney showed that a higher proportion of people with disabilities and/ or long-term health conditions accessed advice when in a healthcare setting compared to its main setting. A Centre for Mental Health report on the impacts to mental health from the cost of living crisis recommends all mental health services to offer money, housing and welfare advice to help address the two crises of mental ill-health and poverty.

## Percentage of employee jobs below the living wage (2022 / 23)



### Key - Region

- England
- East London
- Bedfordshire and Luton



**Support can encompass a range of needs, including support with applying for benefits, blue badges, housing queries and employment difficulties... The health and wellbeing team at Hatters have found that having Citizens Advice Luton support their patients has been hugely beneficial.**

*- Jane Lee,  
Social Prescription Link Worker, Hatters  
Primary Care Network (PCN), one of six  
PCNs in Luton where Citizens Advice are  
co locating welfare support*



## Case Studies

### 1. Healthier Wealthier Families in East London

Funded by the ELFT Charity and other partners, ELFT piloted with UCL the Healthier Wealthier Families model at SCYPS (Specialist Children & Young People's Services), its neurodisability clinic for children and young people in Newham.

Healthier Wealthier Families involves two aspects: first, co-locating welfare benefit advice in health services, and second, integrating referrals to benefit advice through health and other routine appointments.

Over the research period (April 2023 to June 2024) nearly half a million pounds was achieved for 76 families attending SCYPS through co located support provided by Our Newham Money, the Council's financial support service. On average this is around £6,000 per family with an estimated return on investment of £47 for every £1 invested in advice. Evaluation research themes include: the importance of co-location of money advice in trusted healthcare settings to improve access; greater awareness of financial benefits for healthcare staff through co location; and the role of the advisor to

help overcome other barriers such as digital exclusion and language. It's being shared as an example of practice with a range of national and international partners.



**It's a weight off my mind, because I know they are getting the support that they need with experts.**

*- Nurse in neuro-disability clinic*



**With bulk shopping, the money can go further. We can eat properly and get clothes for summer.**

*- SCYPS family receiving Our Newham Money benefit advice*





## 2. Cost of living in person event in Hackney

Organised by ELFT's People Participation Cost of Living lead in partnership with Hackney Council, an opportunity for residents not digitally enabled, homeless, or who prefer to communicate in-person, to engage with local support services and get immediate support.

Around 55 people attended, learning about the event from a wide range of community support including food banks, Age UK, employment

coaching for young adults, play groups for families with young children in temporary accommodation, support groups for recovering addicts and ex-offenders, and charitable support from local churches. Half of attendees were ELFT service users but the main way of finding out about the event was from local community services they use, showing the value of building local connections. Help at the event included benefit advice, food vouchers, Household Support Fund vouchers and ELFT's Cost of Living Support Household Bills printed booklet.



**Broad spectrum of help and support and welcoming atmosphere. Personalised help was accomplished when I spoke to each person...Thank you for such a supportive event!**

*- Cost of living Hackney event attendee*





### 3. Personal Health Budgets in East London

Personal Health Budgets (PHB) are available to people receiving recovery focused mental health support from ELFT. It provides money to purchase an item, activity or service to support someone to work towards an identified, personalised mental health recovery goal.

ELFT East London boroughs saw 1,074 PHB referrals over a year with 42 mental health teams referring into the service. PHBs are supporting a range of goals, including physical health, accessing leisure activities, supporting and developing friendships and improving employment. The positive impact on recovery is demonstrated in the outcome scores and feedback from individuals; over 2023-2024, 78% of people accessing PHB had improved wellbeing scores measured by a quality of life tool.



**Mental Health is multi-faceted, and you have internal resources you can draw on to empower you. Personal Health Budgets enable you to tap into these internal resources.**

*- Community Occupational Therapy team member, Newham*



#### Next steps

Help expand the co-location of benefit and welfare advice in health care settings, working with partners such as DWP, Citizens Advice and local authority teams.

Provide co located immigration advice in mental health services to support people with uncertain migration status access healthy living support.

Reach 100% of all ELFT suppliers paying the Real Living Wage.

Work across ELFT areas to tackle digital inequalities including supporting digital access, skill development through digital coaches and repurposing digital devices.

Explore partnership opportunities to strengthen health and housing support in Luton, Bedfordshire and East London.

Continue to reach staff, service users and community groups that are less easy to connect with Trust wide Cost of Living support, including building council and community connections and hosting in-person events.





## Objective 3

# Promoting the physical health of people with severe mental illness and learning disabilities

# 3





## Objective 3

# Promoting the physical health of people with severe mental illness and learning disabilities

This year we've prioritised activities to promote the physical health of people with severe mental illness and learning disabilities. This supports ELFT's strategic commitment to prioritise prevention and early detection of illness in disadvantaged groups including through vaccination, screening and health checks alongside increasing the proportion of service users who stop smoking and can access weight management support.

### Highlights over the year:

**Over twenty Quality Improvement (QI) projects** taking place across the trust focusing on supporting the physical health of people with learning disabilities and/ or Severe Mental Illness.

**Establishment of a Physical Health Working Together Group (WTG)** involving service users directly in shaping physical health services. Key

achievements include supporting Newham Recovery College's first Physical Health Week, helping 22 people receive health checks, a **Healthwise Newsletter** to keep service users informed about physical activity opportunities and an online **Physical Activity Hub**.

**64%** of people living with a severe mental illness receiving a **physical health check** in North East London and **55%** in Bedfordshire, Luton and Milton Keynes with a target of 70% and 60% for each ICS area by the end of March 2025. A range of partnership work and initiatives are taking place to help increase uptake.

**Nearly 1 in 4 service users accessing ELFT's smoking cessation service are supported to quit** with many others reducing their smoking intake. An internal smoking cessation evaluation showed over 1,350 inpatient and community health service users supported over a year to

### Glossary

**Life expectancy:** An estimate of the number of years a person may live from a particular population group.

**Severe Mental Illness:** Refers to people who have received a diagnosis of psychosis, schizophrenia or bipolar affective disorder. This definition does not imply that other diagnoses are not 'serious' or 'severe' but is a term used for healthcare guidance around physical health checks.







stop smoking with an estimated 19 lives saved alongside reducing the risks of smoking related diseases in many others.

ELFT is piloting a **community tobacco dependency service**, supporting 234 service users in 2024. Local authority partnership work is also helping expand smoking cessation support for ELFT service users, including a **smoking cessation advisor at Path 2 Recovery in Bedford**, supporting people accessing drug and alcohol advice and treatment.

A Trust wide **diabetes prevention and management group** is now established to strengthen learning and resources around diabetes prevention for staff, service users and carers.

**Strengthened physical health support for people with learning disabilities in Bedfordshire and Luton** including the development of a dementia pathway for people with Downs Syndrome over the age of 30 and piloting a Learning Disability Friendly GP Practice project.

Expansion of the **'Shape Up' Healthy Eating**

**programme for people with learning disabilities in Tower Hamlets** including carer training, supporting staff with nutritional screening and partnership working with Barts Health and London Borough of Tower Hamlets Public Health. Learning is being shared with other areas of the Trust.

### Why does it matter?



**ditching bad habits, including smoking, physical inactivity...promote good nutrition and social integration in a positive environment...integrating physical health properly in the ward environment.**

*- Academy of Lived Experience  
Service User interview*

There is an unacceptable difference in health between people with long term health conditions, learning disabilities and the general population. This includes longer periods in poor health as well as dying earlier - up to 20 years less life expectancy than the general population.

A Nuffield Foundation report describes preventable physical health challenges for people with learning disabilities. This includes obesity particularly in teenage years and young adulthood, which can increase risk of physical ill health including type 2 diabetes and cardiovascular disease. People with learning disabilities have lower access to cancer screening rates, resulting in cancer often diagnosed at a later stage. In addition, only around 26% of people with a learning disability in England are on the learning disability register which can be a barrier to accessing annual health checks and flu vaccinations. Over medication of people with learning disabilities can cause side effects such as weight gain, tiredness and some serious physical health problems.

People with long term mental health needs are twice as likely to suffer from diabetes and respiratory conditions and experience more deaths from cancer and heart disease despite having the same number of people with these conditions as in the general population. Risk factors for physical ill health include lifestyle factors often linked to deprivation such as poor diet alongside side effects of antipsychotic medication. Two in three of these deaths are for physical illnesses that can be prevented with the right support.



For people with a serious mental health condition an annual health check in the past year is associated with a **20% reduction** in Accident and Emergency attendance and a **25% reduction** in mental illness admissions.

Smoking tobacco is the biggest cause of preventable death, disability and ill-health in the UK. A strong body of research shows the positive difference smoking cessation support makes in healthcare settings.

Flu vaccines in 2023 supported a **30% reduction** in people aged 65 and over being hospitalised and a **74% reduction** in those between 2 and 17 years of age.

## Our local context

Inpatient service data shows estimates of around 50% of inpatient service users smoke compared to 11.6% of adults in the general population, a 38.4% difference. By providing smoking cessation support through a healthcare setting we not only save lives but directly support

people from lower income settings, with North East London data showing that 85% of people supported to stop smoking through healthcare services are from the 40% most deprived areas.

An ELFT commissioned East London needs assessment for people with learning disabilities recommends a number of actions to strengthen preventative and health promoting services following analysis of local data. For example, in Tower Hamlets, Newham and City and Hackney there is lower cancer screening for cervical, bowel and breast cancer for people with learning disabilities compared to the general population, and this varies by local authority.

Over 54% of the adult population in areas where ELFT provides support are overweight or obese. Being overweight or obese increases risk of a range of long-term health conditions for people ELFT supports, such as cardiovascular disease and type 2 diabetes. For example, people with learning disabilities experience poorer access to mainstream weight management services and are more dependent on others for nutrition care leading to greater risk of poor physical health. In Newham, 25% of adults with Severe Mental Illness have type 2 diabetes compared to 8.8%

in the local population. In Luton, 10% of the adult population have diabetes, with the Hatters Health Primary Care Network noting an increase of a third of type 2 diabetes service users in the past five years with 25% of these service users being from the most 20% deprived areas of the borough.





## Case Studies

### 1. Reducing weight management inequalities for people with learning disabilities

The Community Learning Disabilities Service (CLDS) in Tower Hamlets started a Quality Improvement project in response to the higher risk of obesity and related physical health conditions for people with learning disabilities. It aimed to increase the monitoring of Body Mass Index during service users' appointments, a key way to identify and mitigate risks such as diabetes and cardiovascular disease. It used a multidisciplinary approach involving dietitians, clinicians, and carers.

Key project interventions included the installation of a health monitoring machine in the waiting area, development of educational resources and nutrition training for staff. This resulted in an increase in BMI recordings from less than 3% to over 15% of service users by the end of the project period. Both service users and staff also reported increased awareness and engagement with weight management practices.

Next steps for the project include refining interventions based on ongoing data collection and user feedback, expanding the use of health monitoring tools, and improving data recording systems.

### 2. Increasing engagement of Black, Asian and ethnic minority service users with severe mental illness (SMI) taking up annual physical health checks

ELFT worked jointly with staff from the Hatters Health Primary Care Network (PCN) to undertake a Quality Improvement (QI) project. The aim was to identify Black, Asian and minority ethnic clients on Hatters Health PCN's SMI register with low engagement with primary care mental health services in the past two years. This led to a change from 62% receiving health checks in September 2022 to 87% by January 2024.

A number of change ideas took place including improvements to appointment information and reminders and offering preferences in terms of where the health check takes place including





home visits. Learning includes the importance of changing processes to support different cultural backgrounds, publishing leaflets and letters in different languages and ensuring GP surgeries hold the correct ethnicity data on service users. The project won the ELFT Commissioners award and finalists of the 'Improving Health Outcomes for Minority Ethnic Communities' category at the 2024 HSJ Patient Safety Awards.



**I will come next year again as I know it's nothing to worry about.**



**I'm happy to have the review at home as I'm too anxious to go out.**

*- Hatters Health service users who have now taken up annual physical health checks*

### 3. Supporting weight loss and annual health check attendance at Clerkenwell Ward

Clerkenwell Ward is a low secure forensic ward for men with learning disabilities. Over the past year the clinical team has been supporting its service users with weight loss, leading to an average reduction in weight of nearly 14kg per inpatient, representing a shift in Body Mass Index readings from obese to overweight.

Reducing medication where possible can also help reduce weight loss. The use of antipsychotics on the ward has on average decreased by 22%, with complete discontinuation in 3 out of 12 patients on antipsychotic medication. Pharmacy teams are now part of regular ward rounds, reviewing medication use on a monthly basis. Other weight loss support includes sports groups and activities such as volunteering and work placements. In addition, GPs are now completing annual health checks on the wards, with all service users receiving an annual check in the past 12 months.



#### Next steps

Develop a Trust wide physical health strategy as part of ongoing work to support improved physical health outcomes for our service users.

Reduce barriers for people with severe mental illness and learning disabilities to access cancer screening.

Deliver an action plan to strengthen diabetes prevention and management across the Trust, including learning from Quality Improvement projects.

Work with ELFT Allied Health Professionals through structured learning opportunities to develop a Living Well approach that supports equitable access to health promotion and prevention.

Continue to roll out smoking cessation support across the Trust.





## Objective 4

# Children and young peoples' emotional, physical, social, and learning development





## Objective 4

# Children and young peoples' emotional, physical, social, and learning development

ELFT's work with children and young people's healthy development involves leading the North Central East London (NCEL) CAMHS Provider Collaborative, supporting the work of the Mental Health Support Teams (MHSTs) in schools and other innovative projects.

### Highlights over the year:

**Discovery College Bedfordshire and Luton continued its work supporting and enhancing community resilience by developing wellbeing programmes for young people.** Examples of this work include:

- The **Mindful Journeys** project, a platform for young people within the South Asian community in Luton to share and discuss challenges they face around mental health or accessing healthcare services.
- The **Raising Aspirations Programme** which supports underprivileged young people to reach their academic and personal potential.
- The **Young People Seeking Sanctuary** event in collaboration with Central Bedfordshire Council created a safe space for care leavers to improve their understanding of community services in a fun environment with sport and creative activities.

### Glossary

**CAMHS:** Child and adolescent mental health services.

**MASH:** Multi-agency safeguarding hub. This is a team that receives and coordinates responses to safeguarding referrals in a local area.

**MHSTs: Mental Health Support Teams** are based in schools and involve the provision of Educational Mental Health Practitioners who can deliver schools based mental health support.

**NCEL CAMHS Provider collaborative:** This is the North Central and East London provider collaborative, a partnership of five NHS trusts across 13 boroughs in North London.

**School readiness:** There are several different measures of 'school readiness' used by the Department for Education. Here we refer to the percentage of children achieving a 'good level of development' at the end of Reception (age 4/5). Children achieve a good level of development if they have reached the expected (or better) level of early learning goals.

**Strategic health needs assessments (SHNA):** A tool to inform service planning and improvement by systematically identifying the unmet health needs of a population and recommending changes to meet those unmet needs.





## ELFT continues to improve understanding of the health and wellbeing needs of our children and young people in collaboration with the NCEL CAMHS Provider Collaborative:

A strategic health needs assessment (SHNA) of inpatient CAMHS services for children and young people with Learning Disability and/or Autism was completed. It engaged extensively with service users and their families/carers, developing a deeper understanding of living conditions in inpatient settings, and the need for better joint working between inpatient and community CAMHS. Plans are now in place to support improvements.

The NCEL VCSE (Voluntary and Community and Social Enterprises) small grants programme launched in 2022 with a £1.5million fund and was recently evaluated. Funds were distributed across 47 projects in the NCEL patch, focused on prevention, early intervention, recovery, and crisis support. The evaluation found evidence of moderate to significant impact across key outcomes for Young People, particularly in improving young people's mental health and wellbeing, young people being better able to manage their mental health (high impact), and with significant impact on improving knowledge and understanding about mental health among young people.



**I've learned so much about mental health. Not just about my own. But the mental health of others. I've been telling my family all this stuff and now they are coming to me and asking me questions!**

*- Beneficiary - Focus Group*





## Why does it matter?

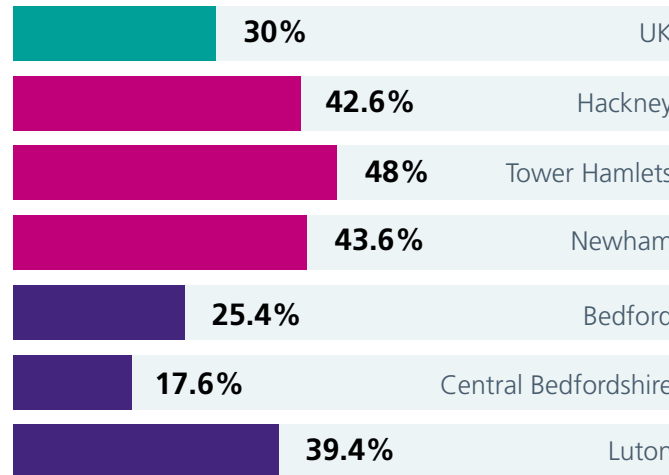
A good childhood matters, and difficulties in childhood, even before birth, can influence a child's emotional, physical, social, and learning development in enduring ways, shaping the life course.

This year the 2024 Good Childhood Report identified that children in the UK are less happy compared to ten years ago, and that 1 in 10 children aged 10-17 experience low well-being. For children and young people living in households under financial strain, 2 in 5 children and young people were either 'often' or 'always' worried about how much money their family had. This sort of concern about the cost of living underlines a widening gap between the richest and poorest and the physical and mental health and wellbeing of children and young people.

## Our local context

In the areas within the ELFT footprint, there is variation in 'school readiness' at the end of reception and rates of child poverty:

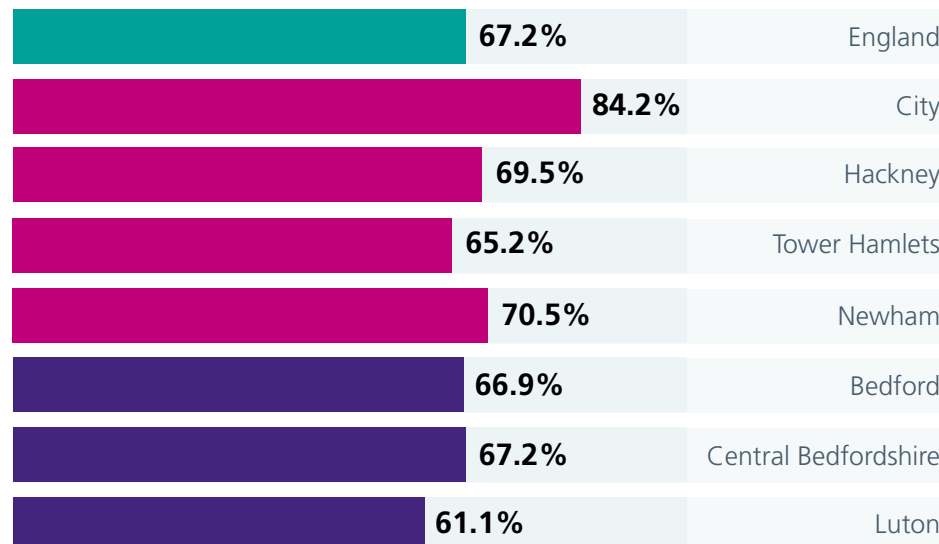
### Child Poverty, % of children living in poverty after housing costs



#### Key - Region

- England
- East London
- Bedfordshire and Luton

### School Readiness, % of children with a good level of development at end of reception





## Case Studies

### 1. Identifying, addressing, and improving the mental health inequalities in the South Neighbourhood of Luton

This co-produced community project uses quality improvement methodology to improve mental health equity in the South Neighbourhood of Luton. It aims to strengthen system resilience around children, young people, families, and their communities, taking an asset-based approach.

A co-produced strategy and action plan was developed after an exploration of what parents, young people and school staff think are the issues most impacting on their children's mental health and well-being. Several projects have developed from this including a new peer-led parenting programme which aims to support parents to receive training and gain qualifications. The first cohort is currently in training to lead a peer-led parenting group (Empowering Parents Empowering Communities). A psycho-education programme on child mental health and how to access support is also co-designed specifically for South

Asian communities in the neighbourhood to improve accessibility and acceptability to CAMHS services.

### 2. ELFT and North East London (NEL) partners All About Me project: developing a booklet on consent and confidentiality for young people using healthcare

Together with NEL partners, young people who use ELFT CAMHS were involved in an All About Me project, to better understand young people's rights in relation to healthcare. They focused on consent and confidentiality and explored how these apply across the health system, including how they relate to safeguarding and looking after yourself.

Over the October half term, young people completed the first stage of creating a new booklet for use in the system, that can be placed in any venue where young people seek help and advice including schools, GP surgeries and hospitals. Having developed the content, the next stages will involve working with a graphics team to design the layout and images for the





booklet, and to agree on a name. Young people and NEL partners will complete the booklet, with the ambition of cascading across NE London to services working with children and young people.



**It was really nice to work with other young people to create the leaflet. It has deepened my knowledge about consent, which I can now use in my own life. I could also converse with others [young people] and share our stories and knowledge on the topic, which created an atmosphere where we could share information with others in a safe space.**

*- Shante, young participant – Newham*

### 3. New 'Integrated Front Door' for children, young people and families in East Ham and Plaistow, Newham

The Integrated Front Door (IFD) is a pilot programme (2023 – 2025) in Newham, designed

to enable a timely response to emerging emotional or mental wellbeing needs of children, young people and families. The IFD multi-agency team of CAMHS, local authority social workers and mental health in schools practitioners accepts referrals from schools, GPs, community and voluntary sector services and aims to provide an initial assessment and develop a multi-agency plan within 3 – 4 working days. Where there are safeguarding concerns or a mental health crisis identified, these are referred into the MASH/CAMHS crisis team.

An external evaluation shows the service succeeds in reviewing just over half of their cases within one day of referral and 97% of cases within 4 or fewer working days.



**I appreciated the time spent speaking with me to understand our needs and for holding space for me to talk about how I was feeling and the struggles we have gone through. It felt like we had someone on our side.**

*- Parent/Guardian from evaluation*



### Next steps

Carry out a review with Trust wide partners to identify additional areas of population health focus to support children and young peoples' emotional and social wellbeing in community settings.

Further develop the participation and engagement of children and young people in the population health work of the Trust.

Continue collaborating with system partners on strategic health needs assessments including taking forward findings from the NCEL Perinatal Mental Health Needs Assessment delivered through the Anna Freud Centre.



## Objective 5

# Champion social justice, and fully commit to tackling racism and other forms of prejudice

# 5





## Objective 5

# Champion social justice, and fully commit to tackling racism and other forms of prejudice



Over 2024 we've been identifying ways we can create more inclusive services for all our communities, including implementing the Patient and Carer Race Equality Framework (PCREF), supporting zero tolerance of racism within our organisation and continuing to work in partnership with local voluntary and community sector organisations to support community-based health and well-being support.

### Highlights over the year:

Published a **needs assessment for East London on people with learning disabilities** to help with future service planning. This showed that the number of older people with learning disabilities will increase significantly over the next 15 years and that people with learning disabilities live in our most deprived areas.

Analysed **access and recovery rates to Talking Therapies services for ethnic minority communities across North East London**. This identified similarities in population groups with lower access rates (including Bangladeshi, Pakistani, African and Other ethnicity categories) leading to a number of recommendations and actions being taken forward by the North East London (NEL) Talking Therapies collaborative. These include joining up community engagement strategies and adapting interventions for these identified populations. For example, development of culturally and faith-adapted interventions and partnerships with mosques, churches and community centres.

A **series of training sessions** are being delivered as part of ELFT's ongoing commitment to being an **anti-racist Trust**. The sessions have individual focuses on antisemitism, xenophobia and Islamophobia. Through these sessions,

the Trust aims to improve staff knowledge and awareness of harmful impacts and offer practical tools to challenge these forms of discrimination in the workplace.

Learning sessions to **strengthen Asset Based Development approaches** to help recognise and work with community assets in place. A project group has been established to start taking forward these approaches in our work including mapping local assets.

The **ELFT Domestic Abuse Steering group** is carrying out a Quality Improvement (QI) project to increase **Routine Enquiry into Domestic Abuse (REDA)**. This uses regular, structured questioning to improve identification of domestic abuse experienced by service users, helping improve early identification and connection with support services.





## Implementation of the Patient and Carer Race Equality Framework (PCREF)

PCREF is the first NHS anti-racism framework. As a Pilot Site, ELFT has embedded PCREF into its governance and strategy. The Trust launched PCREF in November 2023, ahead of it becoming mandatory for all mental health service providers from March 2025.

Implementation is monitored by the PCREF Steering Group, co-chaired by a clinical director and a service user, plus a Data Subgroup that breaks down data by place and ethnicity to compare access, experience and outcomes data to local demographics to help better identify inequities. All Service User Co-Chairs and deputies are of racialised backgrounds. Their lived experience of accessing mental health services and their racial backgrounds help inform PCREF implementation and support robust accountability when monitoring progress.

## Why does it matter?

When we champion social justice we are trying to create a fair and equal society in which individual's rights are recognised, respected and protected. This is particularly significant for marginalised groups such as racialised ethnicities, LGBTQ+ communities, people with lived experience of poor mental health, asylum seekers, people who have been in the care of criminal justice systems, victims of domestic abuse and people who have experienced homelessness. These characteristics may overlap and cause greater differences in health and quality of life that are unfair and avoidable.

Racism has direct and long-term impacts on mental and physical health and affects service users, carers and employees within health and social care. An Institute of Health Equity report on structural racism, ethnicity and health inequalities in London sets out evidence on these impacts, including how the fear of experiencing racism, such as feeling unsafe and/or avoiding certain spaces, has a cumulative, negative effect on the mental health of people

from ethnic minority groups. The 2024 Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries report found that Black women are almost three times more likely to die from pregnancy and childbearing-related complications than white women, while women from Asian ethnic backgrounds are almost two times more likely to die.

## Our local context

The ethnic and cultural diversity of ELFT's service areas is one of our greatest strengths and we are committed to doing what we can to reduce unjust differences in health outcomes in our local communities. This includes a strong focus on data analysis to understand how different population groups are accessing and benefiting from the services we provide and how we can address barriers to accessing support. We also recognise the need to work closely with voluntary and community sector partners, often led by and/or working closely with communities experiencing inequities, and the importance of placing people participation at the centre of our work.



## 24 hour mental health hub pilot

Mental health services in Tower Hamlets are one of six areas selected across the country to trial a new approach to supporting people needing mental health support. The Trust and Look Ahead charity have partnered to develop a new mental health hub in the borough for anyone known to GP and mental health services in the area. People with serious mental health problems will be able to drop into the centre without an appointment and receive support from psychiatrists, mental health professionals, social workers, voluntary sector workers and peer support workers at any time of day. Support for wider determinants of health such as housing or employment will be available alongside psychological therapies and medication.







# Case Studies

## 1. ELFT Pursuing Equity programme: Bridging the missing appointment gap

Across ELFT services data reveals that service users from the most deprived neighbourhoods are more likely to miss their appointments than those from more affluent areas. This disparity leads to longer waiting times, not using resources to their best potential and poorer health outcomes for those who need care the most.

The Pursuing Equity Programme brings together 31 teams from across ELFT to reduce missed appointments and tackle these inequities. A programme-level theory of change framework helps support understanding of the drivers behind missed appointments and offers a practical “menu” of evidence-based change ideas. Initiatives being tested include peer-support workers making reminder calls, automated text reminders and distributing translated service information packs. Teams will start by testing change ideas locally and using their data to see what works. In learning sessions, they’ll share successful ideas for others to test and adopt. These efforts will

come together in a change package for sharing across the Trust and beyond, helping everyone benefit from proven ways to reduce missed appointments.

## 2. Developing a trauma informed integrated clinical pathway for unaccompanied asylum-seeking young people

Unaccompanied asylum-seeking children (UASC) in the UK are a vulnerable population with complex social, mental and physical health needs. A recent survey of initial health assessments (IHA) across England showed significant variation in scope and quality of care. With support from Barts Charity, two ELFT doctors are developing alongside peer group workshops a trauma informed integrated pathway for unaccompanied asylum-seeking young people for use across North East London (NEL). The pathway includes an enhanced initial health assessment with support from a senior CAMHS and a Health Improvement practitioner with a follow up professional multi-disciplinary team to support the foster carer and social worker with care planning. An interpreter is provided at each assessment.

So far the pathway’s been rolled out in Tower Hamlets, Barking and Dagenham, Havering and Waltham Forest in partnership with ELFT, NELFT and Barts Health. An evaluation framework is being developed to understand the feasibility, acceptability and impact of the pathway.





### 3. Perinatal mental health Race and Health Observatory Learning Action Network

In collaboration with the Race and Health Observatory, ELFT is undertaking a quality improvement project to increase referrals to perinatal mental health services for Black African and Black Caribbean women and birthing people across the Trust. Its aims are to increase access and improve experience, through service user and staff interviews and collection of quantitative and qualitative data.

Black Caribbean and Black African Experts by Experience are on the project team, along with representatives from community organisations such as Sister Circle, enabling the Trust to reach those within the demographic who have never accessed perinatal mental health services. Early change actions include co creating a poster to increase awareness of perinatal mental health care and engaging with primary care. The project will bring learning together at the end of March 2025 to then embed new positive ways of working into everyday practice.



#### Next steps

Continue to increase use of routine enquiry for domestic abuse as part of ELFT healthcare services to facilitate early identification of those affected and ensuring they are connected to the appropriate support services.

Develop a sustainability plan following the perinatal mental health Race and Health Observatory Learning Action Network to embed positive change ideas.

Carry out data analysis to strengthen preventative approaches to health and wellbeing in our three East London primary care practices for homeless service users.

Launch the Trust's Patient and Carer Equity Strategy and run an equality campaign for ELFT staff.





## Objective 6

# Contribute to the creation of healthy and sustainable places, including taking action on climate change

# 6







## Objective 6

# Contribute to the creation of healthy and sustainable places, including taking action on climate change

### Highlights over the year:

#### Delivering our [Green Plan](#) for 2022-25.

The plan sets actions for how the Trust will reduce our carbon emissions to zero as an organisation by 2040 and of those we can influence - such as our suppliers of food or medicines - by 2045. We've written an [article](#) explaining how we - staff and service users at ELFT - are doing this using quality improvement. We have already reduced carbon emissions by over 40% compared to 1990 levels in the emissions we control directly. This has been achieved by removing carbon from our electricity supply which is now 100% renewably sourced; reducing our use of energy and water utilities by 20% since 2016 and moving from polluting to Ultra Low Emission vehicles across ELFTs transport vehicles.

More than 60% of directorates mentioned sustainability within their annual plans in 2024. Our Climate Network has grown to 300 members of staff and service users, we now have 37 staff Climate Champions and the Greener Health awards are part of staff awards each year. In September 2023, the Leading Environmental Action Forwards Working Together Group (LEAF WTG) was formed to support service users within our sustainability efforts. Since then, over 40 service users and carers have taken part in a range of opportunities including: developing the Green Plan, participating in sustainability workstreams, developing new programmes and five members are soon to become our first service user or carer Climate Champions.

We promote community wealth by spending our resources locally where we can, for example

### Glossary

**Carbon emissions:** These are the emissions of carbon dioxide that come from the use of fossil fuels as energy sources. They can be direct emissions - that the NHS directly controls - such as energy use in buildings or waste generated. They can also be indirect emissions - that the NHS can influence - such as equipment and medicines purchased by the NHS.

**Net zero carbon emissions:** Means that the amount of carbon emissions produced is equal to or less than the amount removed from the atmosphere. In other words, that no more carbon dioxide is being added to the atmosphere.

**Sustainability:** The NHS defines sustainability as meeting the needs of patients without compromising the needs of the future. This includes the needs of patients, the public and the environment.



using community-owned sites for away days and increasing the numbers of local apprenticeships. We have also introduced a new furniture re-use portal to re-use unwanted furniture and equipment, increasing recycling by 5% since 2023. We have continued to reduce carbon emissions and costs by carefully managing and monitoring the use of energy across the Trust.

## Why does it matter?



**Climate change will affect everyone, but it is the most vulnerable in society who will feel its impacts more significantly. This crisis demands a collective effort; we rely on the diverse perspectives of our staff, service users and carers to successfully reach our net-zero goals.**

*- Siân Hodgkinson, People Participation Lead for Environmental Sustainability*

At ELFT, we understand that the climate and ecological crisis is fundamentally a public health crisis that affects our populations now and threatens the physical and mental health of our communities in the years to come. We know that children and young people in particular are harmed by the crisis.

As a healthcare organisation providing mental healthcare alongside community health and primary care services, we are especially aware of our responsibilities in helping our service users, staff and partners navigate this challenging and concerning crisis. The World Health Organisation (WHO) has said that we need to be concerned about mental health in the context of climate change. There are many ways that climate change impacts on our mental health. This might be directly through the stress of experiencing flooding or indirectly through cancelled medical appointments during extreme weather events. The wider building blocks of our mental health such as our environment and the quality of the air we breathe, our financial circumstances

and our social connections are also affected by climate change. We must tackle these issues head on, not just in our own operations but working with our partners and peers.

Fortunately, action to tackle climate change has the opportunity to improve physical and mental health. According to the Climate Cares Centre at Imperial College London, climate action can be an opportunity multiplier for creating a world that supports good mental health. This is because climate action can lead to conditions that foster good mental health such as: clean air, access to green spaces, and more connected and equal societies.





## Our local context

In June 2021 ELFT declared a Climate and Ecological Emergency, with a commitment to raise awareness of the health and social implications of the climate crisis and drive down emissions from the work that we do. This includes contributing to reducing national emissions through our supply chain and how we deliver our service and also locally in our communities through how we get to and from our sites, our deliveries and the emissions from our local contractors.

Our local areas are vulnerable to the impacts of climate change. For example, air pollution is the largest environmental risk to public health in the UK. It affects people's health throughout their lives, from before birth to old age. Although it affects everyone, it has the greatest impact on the most vulnerable. There is no clear evidence of a 'safe level' of exposure to air pollution. Across ELFT, our areas are exposed to these risks.

Although air quality has improved in recent years, London still has some of the worst air quality in the UK. Air pollution alone is estimated to have caused 5,600 deaths in London in 2024. Luton is also bottom of a UK league table of predicted city-wide air pollution concentrations according to analysis by the Universities of Birmingham and Lancaster.





# Case Studies

## 1. Reducing single use products in a continence service

Sustainable healthcare is a major goal both worldwide and for the NHS as well in ELFT, where single-use products are a key contributor to plastic waste. Staff in the [Tower Hamlet's Community Continence Service](#) identified that there was an opportunity to take a more sustainable approach to incontinence management by reducing the amount of single use products and finding longer life multi-use alternatives. For example, the service is now using washable incontinence underwear, which can be washed and re-worn multiple times and reusable male and female body-worn support devices. These changes result in fewer products being thrown away, fewer products being produced in the first place and can also be more cost-effective than disposable product alternatives. For their work, the service was awarded a 2024 ELFT Greener Health Award.

## 2. Reducing the use of non-sterile gloves when serving food to patients

The John Howard Centre service provides care for people recovering from a mental health crisis, with a focus on supporting their rehabilitation back into the community, rather than treating acute illness. Gloves have a significant impact on our environment in their manufacture, supply and disposal. In fact, a recent study suggests that every box of 100 gloves is equivalent to driving 20 miles in a standard petrol car. Since the COVID-19 pandemic an expectation developed that staff would wear gloves. This has led to an unnecessary use of gloves for many tasks such as when serving food to patients. The Gloves Off project is now underway with the aim of promoting safe and sustainable glove use whilst minimising infection risks. The project is involving service users, infection control nursing staff, sustainability staff and a quality improvement coach.

## 3. Gardening project within the grounds of a co-produced mental health drop-in service

The gardening project at the [Lighthouse in Leighton Buzzard](#) is an example of ELFTs commitment to sustainability and community building. The gardening project is one of the initiatives that all visitors, staff and service users can be involved in. It offers the opportunity to improve the green space for other service users and for people working in the garden to experience a sense of belonging and the benefits of horticultural therapy.



**I love working in the garden especially in the fruit and vegetable area – it gets me outdoors – I really enjoy the work – it helps with my Mental Health – I can relax and it reduces my stress. I have a real sense of achievement and such a positive wellbeing especially when everything starts to grow – I love seeing other people's faces when we achieve.**

*- Darren who works at the Lighthouse in Leighton Buzzard*





## Opportunities to do more

Going forward, as a Trust we see that there is more work to be done in many areas. In 2025 we will be delivering the actions outlined in our [Green Plan](#). We highlight some of these here:

- Establishing projects to reduce medication waste and the over prescription of medicines and to increase annual recycling from 31% in 2024 to 40% across Trust sites by end of 2025.
- Improving air quality around the Trust site in relation to transport options and promoting active travel, as well as influencing contractors and reviewing our supply chains.
- Reviewing sustainability of diets, especially for in-patient wards, and what our canteens offer to service users, families and staff.





# Reflections on 2024 population health activity and learning going forward

This report celebrates what can be achieved when population health is embedded as part of organisational strategy, with priorities then agreed for specific focus.

## Population health enablers over the past year include:

- Dedicated leadership support, including from the Trust Board, staff teams and place-based partners such as Directors of Public Health and Integrated Care Board colleagues.
- A Trust wide commitment to Quality Improvement and People Participation to improve population health and promote equity in healthcare for some of the most under-served communities that we support in our settings.
- Maximising the opportunities afforded to us by being an 'Anchor' organisation within the communities we serve.

- Alignment of national policies and initiatives, such as the Patient Carer and Race Equality Framework and the Tobacco and Vapes Bill, which strengthen our population health principles and approach.

Challenges experienced include financial pressures, felt both internally and across both our Integrated Care Systems. In addition, there is a lack of recurrent funding for specific initiatives, such as Healthier Wealthier Families, despite the significant value they are showing to service users, carers and clinical teams. Population health also requires skills and tools to identify risks early, target interventions and evaluate impact, and these need to continue to be developed across the Trust.

## We will carry this learning into next year by:

- An ongoing focus on population groups at risk of experiencing the greatest gaps in life and healthy life expectancy through preventative healthcare support including people who are homeless, people with learning disabilities and people with Severe Mental Illness.

- Continuing to support pathways to employment through our role as an Anchor organisation and integrating employment advisers in our healthcare services.
- Supporting children and families through community-based partnerships, including by reducing the impacts of poverty, improving access to perinatal mental health support and working with schools.
- Building population health capacity and capability across the Trust, for example through skill development and learning opportunities.
- Working with national, regional and local partners to support the government's new ten-year health plan.





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### Key reports and articles:

- > [ELFT Anchor Programme and Plan](#)
- > [ELFT Equality Diversity Inclusion Annual Report 2023](#)
- > [Learning disabilities needs assessment City and Hackney, Tower Hamlets and Newham report](#)
- > [The Denny Review](#)
- > [Independent Investigation of the NHS in England, 2024](#)
- > [Get Britain Working White Paper](#)
- > [Building healthier communities: the role of the NHS as an anchor institution. The Health Foundation, 2019.](#)
- > [Joseph Rowntree Foundation Destitution in the UK 2023](#)
- > [The Broken Plate 2023: The State of the Nation's Food System, The Food Foundation](#)
- > [Centre for Mental Health: Just Living and Coping, 2024](#)
- > [The Childrens Society - The Good Childhood Report 2024](#)
- > [Illustrating the relationship between poverty and NHS services, The Kings Fund](#)
- > [Preventing people with a learning disability from dying too young | Nuffield Trust](#)
- > [Individual placement and support for severe mental illness guidance, NHS England](#)
- > [Community Mental Health Survey 2023](#)
- > [WHO Mental Health and Climate Change Policy Brief](#)
- > [Blog from Climate Cares Centre at Imperial College London](#)
- > [NICE Domestic violence and abuse Quality standard \[QS116\] Published: 29 February 2016.](#)

### Key data sets:

- > [Child Poverty Statistics from End Child Poverty](#)
- > [Department of Health & Social Care Fingertips Public Health Profiles](#)
- > [Health Foundation Local Authority dashboard](#)
- > [Office for National Statistics Population estimates](#)





