

Annual Population Health Report 2025



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Foreword

It is with great pleasure that I introduce ELFT’s third population health report. I am proud of the rich variety of work reflected in this report, showcasing projects across our geographical and service areas. Thank you to all colleagues who make these achievements possible through your commitment, partnership working and innovation.

As part of the refresh of ELFT’s organisational strategy, we carried out a Big Conversation with colleagues and partners including asking people what matters most to them. Throughout this process, we learned that prevention and improving equity of access, experience and outcomes remain deeply important to people. This chimes with the direction of the government’s new 10 Year Health Plan for England. This plan sets out a vision in which care is delivered much closer to communities, and health and care organisations shift towards preventing poor physical and mental health in the populations they serve.

The shift from treatment to prevention is ambitious, but in many respects, it is already informing our way of working. This is illustrated in our 2025 population health report. For example, through the employment support that is integrated in our care services, ways we are working with local authority and voluntary and community sector partners to provide service

users with welfare and economic support, and our ongoing focus on preventing and reducing some of the biggest drivers of ill health facing our populations today, such as smoking and diabetes.

Seeing the connections between our population health approach, the government’s Fit for the Future: 10 Year Health Plan for England, alongside feedback from the Big Conversation, gives us energy to keep travelling in this direction. As part of our journey, we need to support colleagues with clarity of purpose and access to support tools, such as population data, that help bring us closer to our preventative care ambitions.

Thank you to colleagues, partners and communities for continuing to engage and work with us as we take these next steps.

Lorraine Sunduza OBE
Chief Executive Officer





Foreword

This is the last population health report for our 2021-2026 organisational strategy. It marks a trilogy of progress, from our first population health report in 2023 to this report in 2025.

Each one celebrates examples of activities against our trust population health objectives, informed by the evidence-based principles of Professor Sir Michael Marmot and colleagues at the Institute of Health Equity. In

addition, they share data and stories of lived experience on how we are making a difference to our service users and carers.



Our 2025 report shows how our population health approach is expanding. For example, Healthier Wealthier Families that started as a pilot in 2023 is now in its third year in Newham and first year in Luton. In 2023 we reported on a partnership with HSBC to enable homeless people to access bank accounts. In 2025 we are continuing to test ways to prevent and support the health of people who are homeless, including through specialist immigration advice, routine inquiry of domestic abuse and working with Natwest to support young people's financial awareness. In 2021, the proportion of the Trust's suppliers paying the Real Living Wage was 22% - we are now at 93%.

Alongside successes are challenges. Many of our communities are still disproportionately impacted by poverty, making it more challenging to live in good mental and physical health. Across the country we are seeing an increase in the number of people living with long term health conditions, and this is affecting people in some

of our service areas earlier than the national average. And we are seeing more demand for health and care support, particularly in terms of mental health, with no increase in health care resource.

The continued commitment of our staff working alongside service users, carers and partners show what is possible even in difficult times. Our strengths of People Participation and Quality Improvement are also critical to testing the boundaries of what we can do as a Trust to improve the lives of our service users and the communities where we work.

As ever, congratulations to all involved. A particular thanks to our population health advisory group of service users and carers that help guide the work over the year and who oversee this report.

Eileen Taylor
Chair East London
NHS Foundation Trust





Population health advisory group (PHAG)



It is important to fight against sexual violence and data that shows that disproportionately neurodivergent people and LGBTQ persons have bad access to healthcare, bad health outcomes and are faced with support barriers too.

Through understanding, high quality and accurate data with an effective system that works; services can be supported, inequalities can be tackled and thwarted and the correct counter-acting strategies can be formulated to combat the negativity and turn the tide in favour of ELFT.

Everyone deserves a fair chance of having a decent life and standards of living and if the above is achieved, then it can happen for all.

I would like to say that it's been an honour to be a part of the PHAG with Laura, Rachel, Ash, Eleanor and Jane with everyone else so far and it feels right to continue.

- Andrew Powell



Population Health is important because it brings into consideration factors other than healthcare that affect health e.g. social and economic factors. One of this year's priorities for the Trust's Population Health is Employment Support an area which influences us socially and economically. I am personally benefitting from the Trust's Employment Support service. My confidence and self-belief has increased significantly and I am looking forward to gaining full-time employment. I am grateful to the Employment Support Team for all of the help they have given me.

- Ash Taylor



Tower Hamlets is an incredibly diverse and vibrant borough, but it is also one of the most deprived in the country. This report, proudly co-produced with ELFT service users from the Population Health Advisory Group, addresses factors such as housing insecurity, physical health care, unemployment and how they have an impact on health outcomes. The work that has been done here to challenge inequalities is an incredible start, but it is clear there is more work to be done, but ELFT is definitely up for the challenge!

- Eleanor Addo



About this report

This is the last population health report of our current organisational strategy. It marks a journey of ongoing innovation and progress following our Trust commitment to integrate the evidence-based principles of Professor Sir Michael Marmot into our work at the East London NHS Foundation Trust (ELFT). It also looks to the future as we consider the new NHS 10-year health plan for England, Fit for the Future, and how it supports an ongoing focus on our population health priorities.

Our 2025 report highlights four areas of activity:

- Early years and family support
- Local employment
- Homelessness prevention
- Prevention and early support for physical ill health

This is alongside the population health strategic objectives:

- 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.

We've also been prioritising building population health leadership and understanding.

This report is designed with a Population Health Advisory Group of service users and carers. It shares examples of population health work and progress over the year and can be read alongside other recent reports including:

- [ELFT strategy – our progress since 2021 | East London NHS Foundation Trust](#)
- [ELFT Population health reports for 2023 and 2024.](#)

There are many other examples of population health activity across the Trust. If you would like to share your work, get in touch at [elft.pophealth@nhs.net](mailto:pophealth@nhs.net).

Laura Austin Croft
Director of Population Health





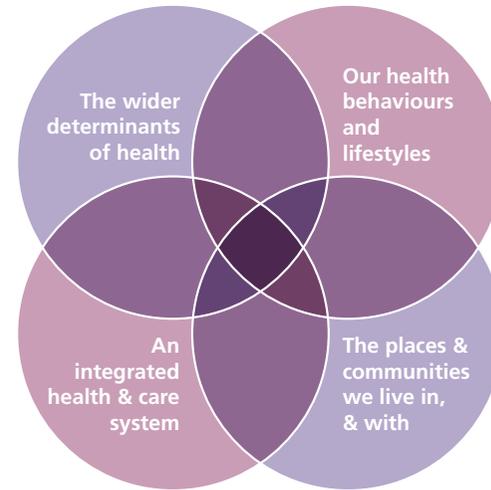
ELFT population health approach

Population health is about improving the physical and mental health outcomes and wellbeing of population groups. This includes reducing unfair differences in health outcomes between populations (reducing health inequities).

At ELFT we seek to support the health and well-being of our service users, carers and our wider communities through population health activities. A population health framework developed by the King's Fund helps illustrate the interconnected domains of this approach, that include a focus on:

a) The **wider determinants of health** – Working to positively influence the environments where we live, work and connect with others (e.g. employment, income, housing, the natural environment).

Figure 1: Population health framework based on the King's Fund approach



b) Our **health behaviours and lifestyles** – Ways of living that support long-term good health and well-being, such as stopping smoking, eating well and looking after our mental health.

d) An **integrated health and care system** - Identifying areas where we can join up with other organisations to better meet the needs of our populations.

c) The **places and communities we live in and with** – Designing our services to be accessible, where they are needed, using local assets and culturally respectful.

These actions take place through partnership working across the Trust and using our organisational strengths in People Participation and Quality Improvement alongside support from the ELFT Charity and Compass Well-being.





Being a Marmot Trust



As the work of Professor Sir Michael Marmot among others has long shown, it is these social determinants that explain this country's wide and widening health inequalities. The injustice is that the social determinants of ill health cluster in more deprived parts of the country.

*- Fit for the Future:
10 Year Health Plan for England*

Professor Sir Michael Marmot is a world leader on the causes of avoidable unfairness in health outcomes and leads the Institute of Health Equity at University College London. In 2022, ELFT partnered with the Institute of Health Equity to become the first NHS 'Marmot Trust' and test the boundaries of what an NHS Trust can do to tackle some of the drivers of poor health, such as poverty and unemployment.

Being a Marmot Trust means embedding action across the Marmot eight principles. These principles are brought together in our six population health [strategy](#) objectives and are referred to in each section of this report.

Working as a Marmot Trust connects ELFT to a movement of action, with more than 60 areas in the UK now referring to themselves as Marmot places covering 43% of the population. A Marmot Implementation and Advisory Group meets twice a year that brings together local Directors of Public Health, ELFT leadership and the Institute of Health Equity to share and discuss progress and work against Marmot ambitions.



What do we mean by eight Marmot principles?

These are policy objectives designed to reduce health inequalities. They focus on improving early childhood development, empowering people, ensuring fair employment and a healthy standard of living, creating healthy communities, strengthening ill-health prevention, tackling discrimination and racism and environmental sustainability. More information: <https://www.instituteofhealthequity.org/taking-action/marmot-places>

Glossary

Health Equity: When everyone has a fair and just opportunity to be as healthy as possible.

Social Value: The positive impact an organisation can have on people and communities beyond the financial cost of a contract.



Being an Anchor organisation



We...expect hospitals to do more as anchor institutions...Through their procurement, supply chains and role as an employer, they have significant influence over social and economic development in their communities.

*- Fit for the Future:
10 Year Health Plan for England*



ELFT began its work as an Anchor organisation in 2021, including identifying social value priorities to be adopted to help tackle the wider determinants of health. In 2023, ELFT published an Anchor Plan focused on four key areas called 'pillars': Employment, Procurement, Sustainability, Lands and Estates. This year we reviewed our work against our Anchor Plan commitments with service user and carer input and noted that of 22 targets, 14 had been achieved or partly achieved.

These include:

- From 22% of suppliers paying the Real Living Wage in 2021 to 93% in November 2025.
- Our Social value partnership with OCS partnership supporting local employment and training opportunities and helping various community initiatives
- Since 2023, the trust has improved six green spaces, with further upgrades underway.

Recommendations from the review include to keep a focus on all four pillars and refresh the targets to improve measurability and specificity.





Our ELFT population and changes over time



We cannot continue to accept a Britain where health is determined by wealth, where your postcode matters more than your potential and where deprivation dictates your diagnosis. Together, we can be the generation that closes the gap in healthy life expectancy so that everyone can live well for longer.

- Fit for the Future: 10 Year Health Plan for England

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

As noted in our 2024 Annual Population health report, all ELFT areas grew in population size since the 2021 Census data, with this highest in Central Bedfordshire at just over 2%. We are also seeing changes in the age structure of our local area populations, with an increase in the percentage of the population over 65 years old (10.9% in 2023 compared to 10% in 2011) and a small decrease in our younger age population (23.2% in 2023 compared to 24.5% in 2011).

Age changes are different by area. Bedfordshire and Luton are likely to see an ongoing increase in their younger population and older population, whilst ELFT London areas are predicted to see an increase in their older and working age populations and a decrease in the younger population. In Bedfordshire and Luton, forecasts suggest the proportion of populations from ethnicity groups other than White British will increase.

Population forecasts by age structure using Office for National Statistics (ONS) Mid 2023 population estimates

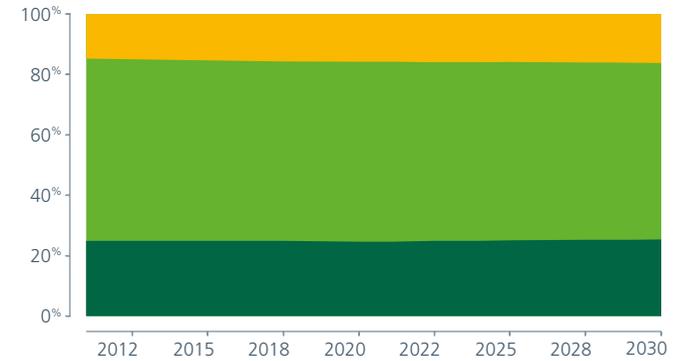


Figure 2: Population Age Structure Over Time, Bedfordshire and Luton

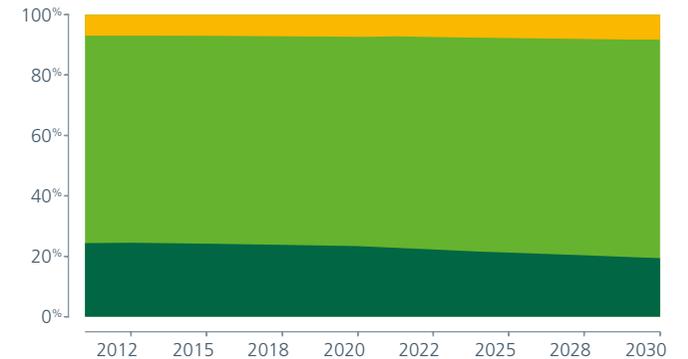


Figure 3: Population Age Structure Over Time, ELFT London areas (Tower Hamlets, Newham and City and Hackney)

Key ● 0-18 ● 19-64 ● 65+



Population ageing creates more need for health and care services. Unfair and avoidable differences in health outcomes between population groups, often described as health inequities, also creates increased need for health and care support earlier in life.

One way to measure health inequities is by **Healthy Life Expectancy (HLE)** which is the average number of years that somebody can expect to live in good self-reported health. **Years lived in poor health make it more difficult to enjoy life, work and/ or study and also increases demand on healthcare services.**

Across our ELFT areas, there is a **substantial difference in the number of years people can expect to live in good health.** For example, there is a difference of five years for men and nearly five and a half years for women when comparing Bedford to Hackney. There are also big **differences within ELFT service areas.** For example, in Bedford data shows male healthy life expectancy differs by 14.6 years, with the lowest healthy life expectancy in Harpur and the highest in Oakley. This reflects differences between the most and least deprived areas of the borough.

Healthy Life Expectancy at Birth (2021-23, ONS)

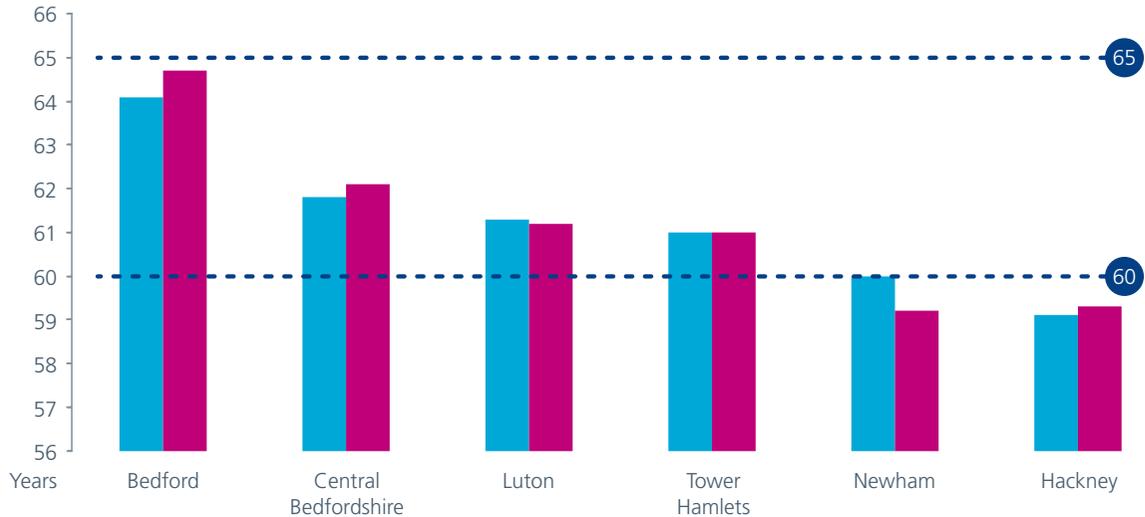


Figure 4: Comparing Healthy Life Expectancy at Birth in ELFT service areas

Key ● Male ● Female

Differences in HLE between places is linked to the number of people with long term health conditions, such as poor mental health, diabetes and musculoskeletal challenges. Ways to prevent and improve long term health conditions include supporting healthy behaviour change— such as reducing smoking, improving what we eat, and increasing physical activity. However, these health behaviours are influenced by the conditions in which we live called the wider determinants of health, for example housing, income and family support. The environment

is also an important contributor to ill health, for example air pollution is strongly linked to respiratory disease.

The relationship between the wider determinants of health and mental health and well-being is seen in the **Adult Psychiatric Morbidity Survey** published this year.



Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England 2023/24

[This survey series](#) provides data on the prevalence of both treated and untreated psychiatric disorder in the English adult population (aged 16 and over). Part 1 survey findings include:

- More people identifying themselves as being in poor mental health, with this higher for women and young adults.
- A strong relationship between poverty, debt, unemployment and diagnosed physical health and poor mental health.
- More adults accessing mental health treatment.



Recently published **Indices of Deprivation** (a figure that brings together a range of living conditions including income, employment, education, health and living environment) **helps compare levels of deprivation across the country**. This data is published at a neighbourhood and local authority level.

Two ELFT areas are in the top 10 most deprived local authority districts when **all measures of deprivation** are included: Newham 7th and Hackney 10th. If we focus on the **proportion of the population experiencing deprivation relating to low income**, four ELFT areas are in the top fifteen most deprived areas in the country (**see bars in orange in the charts below**). This picture becomes more acute if we focus on the proportion of **children aged 0 to 15 living in income deprived families** and **aged 60 or over who experience income deprivation**, with ELFT areas the highest affected for both indices sets.





Fifteen local authority areas with the highest proportion of income deprivation, Indices of Deprivation 2025

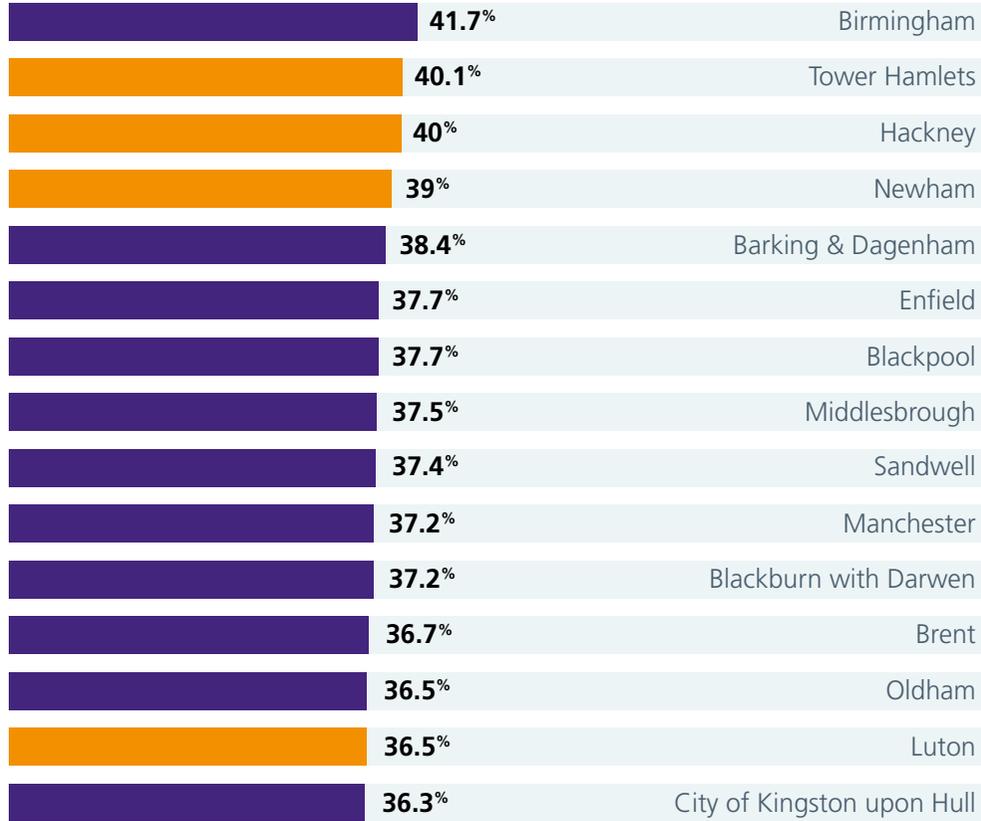


Figure 5: Proportion of the population experiencing deprivation relating to low income

Ten local authority areas with the highest proportion of children living in income deprived households, Indices of Deprivation 2025

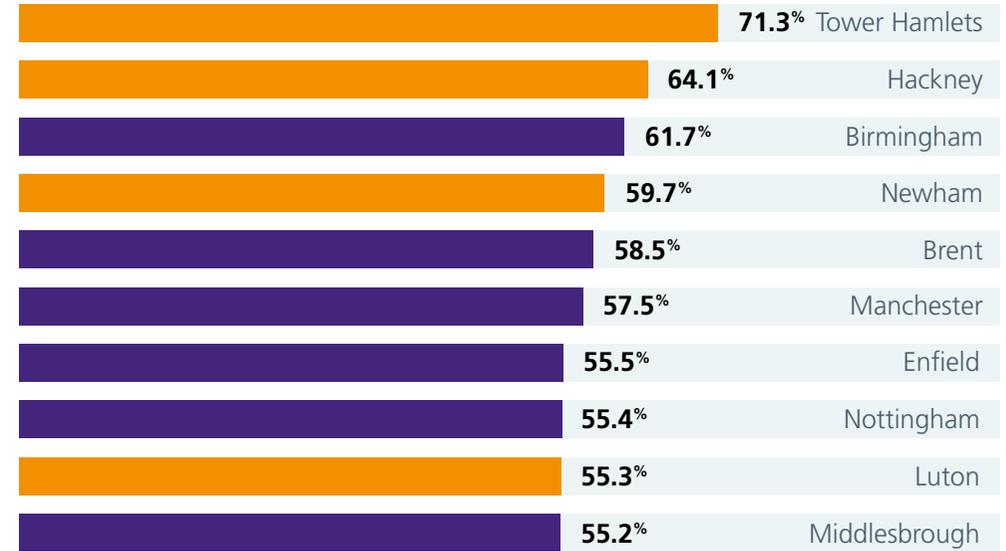


Figure 6: Proportion of children aged 0 to 15 living in income deprived families

Glossary

Income deprivation: Both people in work and out-of-work who have low earnings.



Ten local authority areas with the highest proportion of older people living in income deprived households, Indices of Deprivation 2025

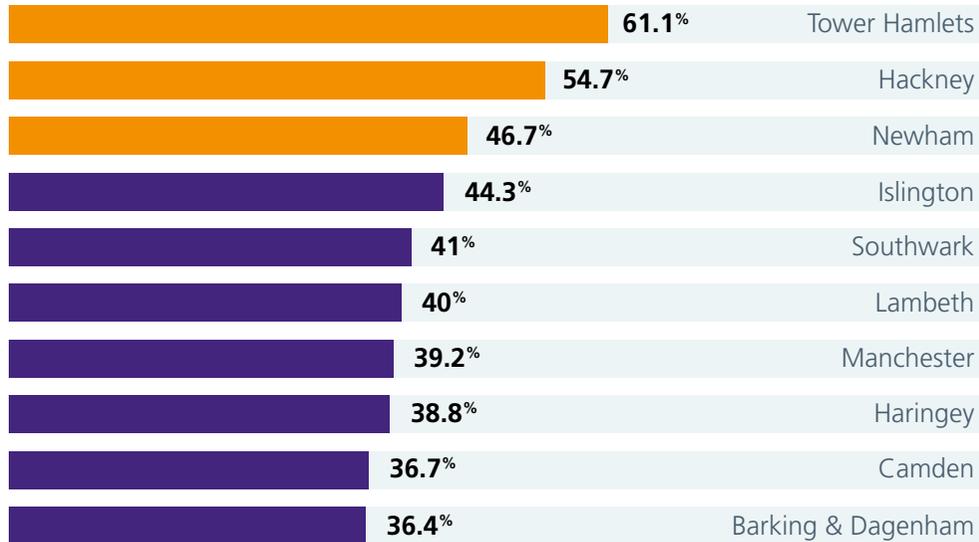


Figure 7: Proportion of people aged 60 or over who experience income deprivation

Why this matters to us:

ELFT service user and carers are more likely to be impacted by local area deprivation. Trust data from the last 12 months¹ shows 30% of referrals are from the 20% most deprived areas, varying by area (46.8% in City and Hackney to 12.3% in Bedfordshire).

¹ As of October 2025

Throughout this report data helps show why we are focusing on specific projects and programmes. There is more detailed data to help analyse population health in our Trust geographical areas on our [ELFT population health web pages](#).

What is population health management?

Population Health Management (PHM) is about understanding the health needs of different groups of people in our communities. It helps provide information and data to identify who might need support early, and support work with partners to provide the right care at the right time.

North East London Integrated Care Board's developed a **Population Health Management Pathfinder Analytics tool** to help understand population health and care needs and identify opportunities, design and target interventions, and evaluate impact. A high level overview is available at [System | PHM Pathfinder Analytics | Optum](#) and you can join a learning community by emailing at nelondonicb.phm.nel@nhs.net.

In 2024, **Bedford, Central Bedfordshire and Luton published reports focused on population change to 2043** and the potential impacts on health and healthcare utilisation (analysis by the BLMK Population Health Intelligence Unit (PHIU)). Access [here](#).





Early years and family support

1





Priority Area 1

Early years and family support

Key Takeaway

We can reduce impacts of poverty by embedding benefit advice in healthcare settings, helping reduce financial stress and improve wellbeing.

Mental health support through community partnerships can help earlier and potentially more equitable access to healthcare support.

Co production with young people and parents helps better ideas and service design, alongside fostering a sense of ownership and inclusion over the support provided.

2025 Highlights:

Expanding Healthier Wealthier Families Newham: The Healthier Wealthier Families programme in Newham entered its third

year, now having supported 171 service user families at our Specialist Children and Young People Service (SCYPS) access over £1 million in entitled benefits. From January 2026 it expanded to three more SCYPS service sites and to perinatal mental health services.



My family were on the verge of homelessness, council tax arrears and rent arrears were in the thousands, I have two children with severe disabilities and was unable to cope due to my benefits being reduced...I was paid back missing elements of Universal Credit, carers benefits and a Discretionary Housing Payment was awarded to financially support me with the high private rent shortfall and paid off the majority of my arrears. My family can stay in our home, my children have stability, I am so thankful.

- Carer supported by Healthier Wealthier Families

Building on the success in Newham, ELFT is part of a new pilot bringing Healthier Wealthier Families to Luton, led by Luton Council's public health team in partnership with Citizens Advice **(see case study)**.

ELFT Perinatal Mental Health Equity programme:

Partnership with the Race Health Observatory and Institute of Healthcare Improvement to increase access to services and community support for Black African and Caribbean women. Work to date includes GP training, hosting a visit from the Health and Social Care Committee, community support in family hubs and the re-establishment of the ELFT Perinatal Equity Board. The Board oversaw an in-depth review of data and a refreshed action plan to improve equitable access and experience of services. In collaboration with the North Central East London Perinatal Provider Collaborative, the Mother and Baby Unit team will be undertaking anti-racism training in 2026 facilitated by Black Maternity Matters.



Review of ELFT's objective to support children and young people's (CYP) emotional, physical, social and learning development:

This included a workshop with the Institute of Healthcare Improvement (IHI) for ELFT teams alongside wider system partners from the voluntary sector, local authorities, NHS Integrated Care Boards, and academic researchers. In addition, two workshops took place with children and young people. This review is helping develop a theory of change to inform best ways to support social and emotional wellbeing at ELFT and through local partnerships.

Team Around the School (TAS) pilot: Bedford CAMHS team is working with schools, local authorities and health service partners to support earlier identification and follow up support for children and young people with additional needs. The first phase (October 2024 to July 2025) supported 12 primary and 7 secondary schools including a case coordinator to help plan, track and organise follow up actions.

N-Gage Summer Activities Programme: The East London CAMHS People Participation Team N-Gage Summer Activities Programme helps young people stay connected, learn new skills, and have fun during the school holidays. Co-produced with young people themselves, the programme is shaped around their ideas and

interests including CV writing, interview skills, a financial awareness workshop delivered with NatWest alongside trips to the Criminal Court of England and the Science Museum.

ELFT as a Marmot Trust

Our strategic objectives to "Prioritise children and young people's emotional, physical, social and learning development" and to "Support service users, carers and our communities to achieve a healthy standard of living" link to Professor Sir Michael Marmot's evidence-based recommendations to reduce inequities by giving every child the best start in life, enabling all children, young people and adults to maximise their capabilities and have control over their lives and ensure healthy standard of living for all.



Fit for the Future: 10 Year Health Plan for England

The Plan emphasises early intervention and integrated support for children and families. This includes Neighbourhood Health Services working in partnership with family hubs, schools, and nurseries to deliver timely support for children and families, including those with Special Educational Needs and Disabilities (SEND). It also recognises that frequent NHS service users often require support beyond healthcare, including housing, financial advice, and employment opportunities.

The Plan pledges national coverage of mental health support teams in schools and colleges by 2029/30, alongside embedded support through Young Futures Hubs with 'no wrong front door' for young people seeking help.

Why is this important?

Childhood is a critical stage of development and targeted help for children and families during this time can reduce health inequities.



Poverty and child health

The UNICEF report [Held Back From The Start: The Impact of Deprivation on Early Childhood](#) emphasises how important the early years are in providing the building blocks for good health. The analysis shows that the effects of poverty are visible across a range of important milestones for children - including dental decay, obesity and whether a child reaches a 'good level of development' at the end of their first year of school.

Maternal Mental Health

Government analysis carried out by the Office of Health Improvement and Disparities (OHID), shows that just over one in four women experience a perinatal mental health condition (2019 data, the most recent data reported on). The perinatal period covers three years; 3 months before a baby is conceived until 2 years after birth. During this time, common mental disorders affect 25.3% of women in England and serious mental illness, personality disorder and eating disorders 1.2%.

A [2025 report by MBRRACE-UK](#) found **suicide as the leading cause of death for women between six months and a year after pregnancy, with highest rates of maternal mortality in the most deprived areas**. Black women remain more than twice as likely to die

as white women. The report highlights gaps in perinatal mental health support, with those not meeting thresholds falling through the cracks. It calls for the role of specialist perinatal mental health teams to be extended to address these gaps in the system.

Children and Young People's Mental health

Mental health problems are growing among children and young people in the UK, with inequalities widening. In England, 1 in 5 children and young people are estimated to have a probable mental disorder.

Research by the Health Foundation found that **40% of socio-emotional problems in adolescence could be tied to poverty and poor parental mental health**. Emotional support within families is identified as a powerful protective factor - this means having someone to talk to openly, confide in, or turn to for advice. Emotional support is negatively correlated with lower household income and parental education; meaning is it not always available to those most in need.





Case Studies

New WAY – support for young people affected by youth violence

Newham Wellbeing Action for Youth (New WAY) is a specialist, community psychology-led service in Newham providing wellbeing support to young people aged 25 and under, along with their families and carers, who have been affected by youth and community violence. Part of the London Vanguard – a multi-system violence reduction programme – New WAY delivers accessible, flexible, and psychologically informed care for vulnerable young people.

The service recognises the structural and systemic factors that can draw young people into offending and violence, including insecure housing, school exclusion, racism, deprivation, and difficult experiences of services. These experiences profoundly affect mental health and wellbeing, and New WAY works to redress these impacts through holistic, community-rooted approaches.

Grounded in community psychology and social justice principles, the service is committed to anti-racism, anti-oppression, and dismantling ‘whiteness’. Co-production is central to this approach, ensuring that young people are empowered and included in shaping both their support and the wider service.



The stuff I’ve done with New WAY has been great, it’s allowed me to come out of my shell and explore different experiences and activities. It’s allowed me to thrive in different areas of my life

- New WAY young person



You’ve been such a blessing to X. Thank you for everything. He sure is going to miss you. Have never seen him open up or even talk to anyone like he has with you

- New WAY parent

Impact findings show:

- The service reaches marginalised young people experiencing life-long inequalities, especially those at risk of exclusion or in contact with the justice system.
- Flexible, community-based delivery increases engagement and equitable access to mental health support.
- Health-led, community interventions can drive systemic change beyond healthcare, helping to redress the longer-term impacts of health inequity.



Launch of Healthier Wealthier Families Luton

We know that financial stress is one of the biggest factors affecting family wellbeing. Healthier Wealthier Families (HWF) aims to support an easy referral pathway for families to access welfare benefits and money advice in the same building as routine health and other appointments.



...we have seen a significant increase in referrals for service users with financial, housing and immigration worries. The economic deprivation in Luton plays a huge part in poor mental health amongst our service users, particularly as they are trying to factor in the cost of a new baby and often cannot source their own baby equipment, clothing or food

- Georgia Betts, Bedfordshire and Luton Perinatal Mental Health Service

ELFT is part of a new pilot that brings Healthier Wealthier Families to Luton, led by Luton Council's public health team in partnership with Citizens Advice. CAMHS and Perinatal Mental

Health are referral partners. In the first nine months the project has supported 159 families access over £1.1million.

The project also combines HWF with an Advice First Aid approach, being delivered by Citizens Advice Luton to give staff the tools to find basic information on the National Citizens Advice website and respond confidently to common queries. This helps staff identify families who may benefit from financial wellbeing support and to connect them with advisers.

All About Me: One year on

Together with North East London (NEL) partners, young people who use ELFT CAMHS were involved in an All About Me project, to create a booklet clearly explaining young people's rights in relation to consent and confidentiality in healthcare. Young people and parents have been involved throughout the process.

The parts of the project the young people found most valuable were; working with other young people, developing content that will help others, having their voice heard by healthcare services, and learning about consent and confidentiality.

The booklet is now approved with a plan for dissemination across North East London.



Definitely a safe space! In the first session, we didn't have to give all our ideas verbally which was really helpful to share all our ideas. It also felt more like a discussion rather than an interview, which made it a more comfortable setting

- C, CAMHS young person representative



I hope it helps highlight the value of co-production especially between young people because it can provide A LOT of insight

- S, CAMHS young person representative





Next steps include

Continue the roll out of Healthier Wealthier Families in Newham and Luton and identify ways to bring similar models of practice to other areas of the Trust.

Support implementation of the refreshed Perinatal Mental Health Equity action plan to improve access and experience for Black African and Black Caribbean women.

Use the findings from the Children and Young People review to support Trust activity, including mental health in schools and strengthening social and economic support as an Anchor organisation.

Glossary

CAMHS: Child and adolescent mental health services.

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.

MBRRACE-UK: Stands for Mothers and Babies: Reducing Risk through Audits and Confidential Enquiries across the UK. Carries out surveillance and investigations into the deaths of women and babies who die during or shortly after pregnancy.

SCYPS: Specialist Children and Young People Services are ELFT services for children and young people with a Newham GP and cover a wide range including Speech and Language Therapy and Community Paediatric services.





Employment support for service users, carers and local residents



2



Priority Area 2

Employment support for service users, carers and local residents



Key Takeaway

Through integrated employment support and local partnerships we can help ELFT service users stay in, return to or find new job opportunities, training and/or volunteering.

As an employer we can help people access and learn about jobs at the Trust, including through our social value contracts, volunteering, apprenticeships and work experience.



2025 Highlights:

Supporting service users to stay in and find good employment and develop skills:

- 1,018 people with long term mental health conditions accessed Individual Placement Support, supporting 207 (20%) people enter employment. In addition, new staff were recruited this year into specialist employment support roles in Bedfordshire and Luton, Tower Hamlets and Newham.
- 2,790 people accessed employment advice as part of Talking Therapies support in Bedfordshire, Tower Hamlets and Newham. This includes help with returning to and staying in work, interview preparation and negotiating workplace adjustments.
- Two lived experience work placements developed to support the North East London mental health learning disabilities and autism (MHLDA) Provider Collaborative team.



You have made a significant difference on my mental health and the way I view employment now...I took all of your advice on board, and I am continuing to apply it every day. After receiving my [graduation] results, I started putting a lot more effort into job searching and have already applied to a few vacancies

- Bedfordshire Talking Therapies service user

Digital Life Coach Training Programme: Co designed with service users to address digital exclusion and now with 19 trained coaches (17 service users). Feedback from learners include: 50% improved career prospects and demonstrating new skills, 79% seeing improvements in mental health and confidence and 86% feel they can make a positive difference by helping others.



Employment support events: Compass Wellbeing employment support fairs held for ELFT service users in November 2025 and early 2026. The Greenhouse Practice Jobs and Volunteer Fair in May 2025 brought together support organisations, including Hackney Works and the DWP, offering service users a gateway into training, volunteering and employment.

Making Work Work for people with learning disabilities learning space: Co designed with service users to help share and influence practice across ELFT areas. Recommendations from the network will inform actions by the Trust and partners.

Partnership with Redemption Roasters: ELFT charity is funding eight service users from its Forensics service to receive barista training (art of making and serving coffee) to support skills and employment.

First summer work experience week: Held for 21 young people living in our East London boroughs. This doubled the recorded number of placements held over a year and provided a supportive and structured experience, including a careers fair and tips on CV writing.



This placement has not only strengthened my passion for pursuing psychology as a career but has also given me a clearer understanding of the diverse paths within this field

- *Work experience student feedback*

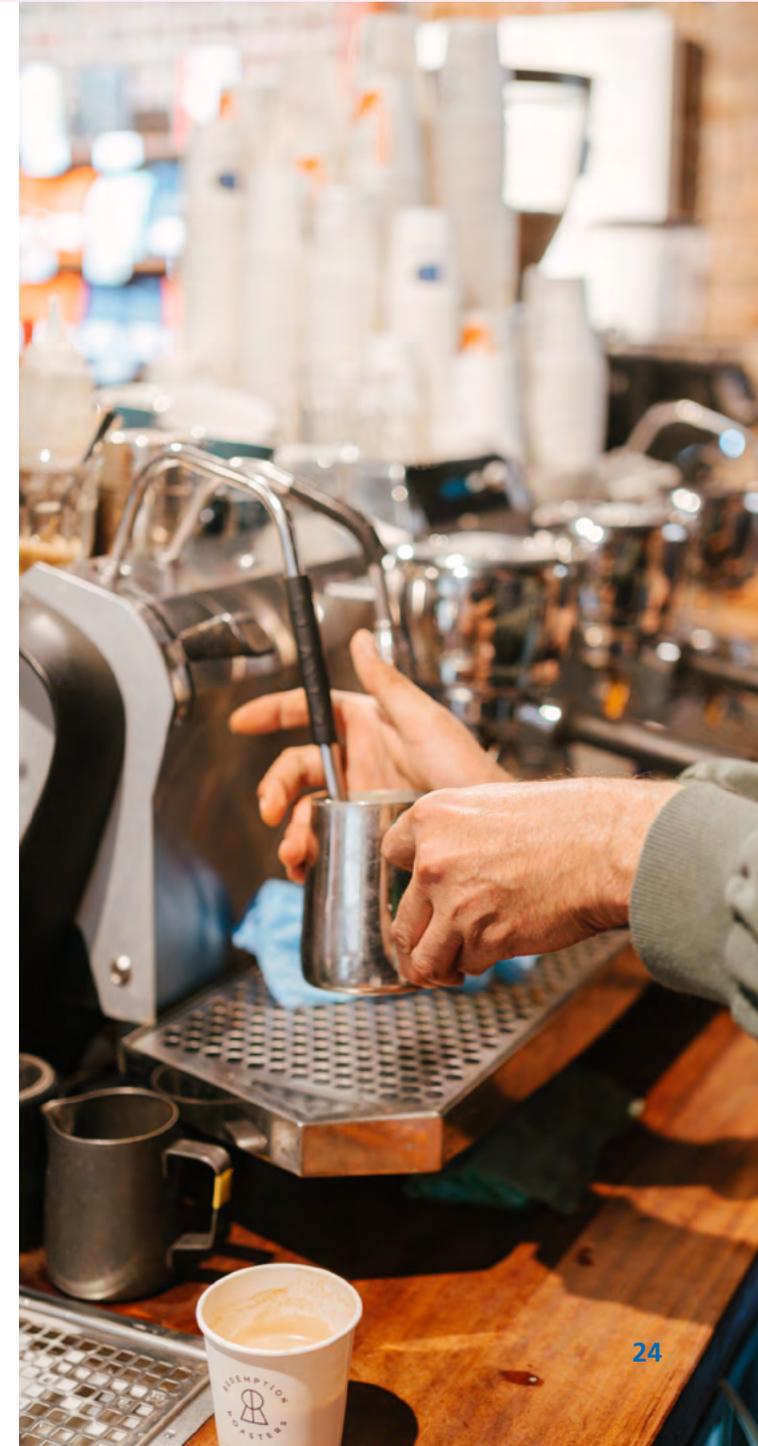
Apprenticeships: Around 160 in place at the Trust, with 50% recruited from ELFT footprint areas and 30% of recruits under 25 years old.

Volunteer placements: 147 placements over the past year.



As a medical graduate volunteer, it means a lot to be there for patients when they need support most. Even small gestures — a chat, a smile — can make a big difference, and that's really humbling

- *Student Volunteer Zelal*





Bedfordshire Luton and Milton Keynes (BLMK) Integrated Care Partnerships (ICPs) Work and Health Stewardship group:

Shared lived experience to support the development of pathways into employment. This helps employers to be better equipped to welcome people recovering from or with long term health conditions into their workforce.

Ongoing social value impact from our facilities partnership with OCS: Over £5.7million in impact across Trust service areas in the past year focused on employment and community support.

ELFT as a Marmot Trust

Our strategic objective “Support service users, carers and the communities we serve to develop skills and to access meaningful activity and good quality employment” links to Professor Sir Michael Marmot’s evidence-based recommendation to reduce inequities by “Creating fair employment and good work for all”. Not all population groups have equal access to employment opportunities, with disadvantage seen particularly in people with disabilities and mental ill-health, those with caring responsibilities, lone parents, some ethnic minority groups, older workers and young people.

Fit for the Future: 10 Year Health Plan for England

Employment support is part of the neighbourhood health model, including expanding provision of Individual Placement Support schemes and employment advice in Talking Therapies. The role of the NHS as an Anchor organisation is encouraged, supporting people from all backgrounds access an NHS career.

The plan encourages co design of digital tools and partnering with libraries and community organisations to support engagement with digital health services.

Why is this important?

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

In the UK, 1 in 5 people have a health condition that limits their ability to work (a 25% increase in twenty years). Common mental health problems such as anxiety and/ or depression are twice as high for people unemployed compared to those in work. While 80% of people with a

severe mental illness want to work, only 6-8% do (compared to 75% in the general population). For people with disabilities, the risk of being unemployed is twice as high as people without disabilities.

Actions employers can take to support people return to and stay well in the workplace include mental health support at work, flexible work arrangements, better job security and phased return to work after time off sick.

For younger people access to work experience and employment opportunities is not equal across population groups. A young person’s socioeconomic background - including the income level of their family, their parents’ educational qualifications, and their family’s wealth – all play a critical role in shaping the options available to them. Students from more disadvantaged backgrounds can be less confident talking about skills and engaging independently with future employers.

Digital skills can be a barrier to employment alongside access to digital devices that support job searches and applications. Digital equity is particularly an issue in mental health care with 35% of service users who access secondary care not daily internet users.



Case Studies

Supporting local businesses with apprenticeship levy transfer

Large employers often have unspent Apprenticeship Levy funds, while smaller businesses struggle to afford training. In 2025, we worked with local Training Hub, Community Matters, to identify GP surgeries needing support. ELFT committed unused levy funds to cover apprenticeship training for health and social care staff, leading to:

- » 18 GP surgeries supported
- » £169,000 levy transferred
- » 21 apprenticeships created.

This led to:

- » Small and Medium Enterprises (SMEs) accessing training opportunities
- » Strengthening local healthcare supply chains and employment prospects for local residents.

We will continue working with Community Matters to transfer additional levy funds to SMEs and plan to replicate this approach across Luton and Bedfordshire.



Levy transfers make it possible for GP practices and voluntary sector organisations to grow their own workforce and support staff... As well as upskilling the existing workforce, apprenticeships also help us engage local residents and help them gain meaningful employment

- Community Matters



Lived experience story of Luton and Bedfordshire Individual Placement Support



I was able to, from very onset of starting the service, build a wonderful rapport with my Employment Specialist. Initially, I was in a very distressed state trying to find employment in the fields I had, in what I believe, experience in...Sadly, this was not the case as the positions I was applying for were highly sought after. It was during this tumultuous period, Employment Specialist was most supportive. He did in no way push for me to get just any other form of employment but respected my wishes for trying to find employment in the fields I had chosen.

During this period he offered invaluable support, such as reading through applications and my resumes. Meeting with him in a public setting also helped bolster my confidence...Throughout the tenure of employment support, Employment Specialist has helped me gain a more broad outlook in what types of employment I could undertake, fields in which I never would have considered and take into consideration of my personal circumstances. Now, with Employment Specialist's support, I have taken another trajectory by way of employment; in a field I initially would not have considered, and in which I find rewarding

Find out more about Luton and Beds Individual Placement Employment support [here](#).

Working together to help residents into employment, Newham

Newham has the highest unemployment rate of any London borough at 7.9%.

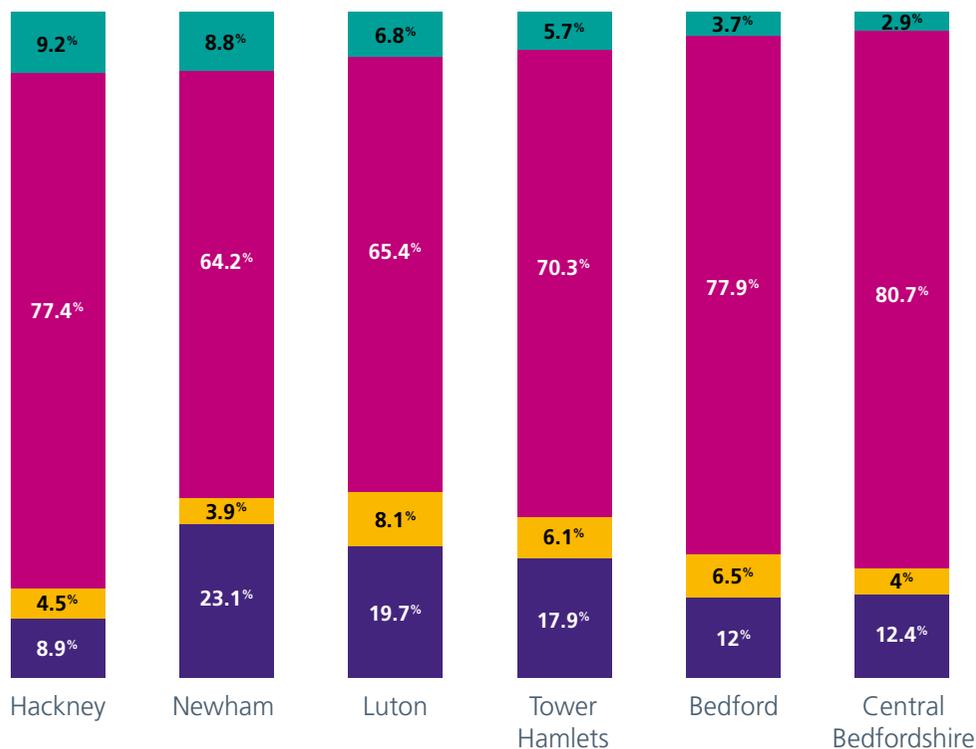
Through a joint employment forum, six Newham employment support services are working together on strategic challenges such as outreach, integration of services, referral redirection, educating employers and sharing knowledge and resources. A [new website](#) was co-produced with residents which outlines the employment services available and answers the most frequently asked questions. Additionally, a poster campaign is being developed with stories from Newham residents who gained employment.

This year **Community Health Services (CHS) Newham** started a programme of staff education sessions to assist patients and carers with social and financial issues. These were led by the London Borough of Newham and Department of Work and Pensions covering Disability Support (access to work, health adjustments passport, fit notes), Universal Credit Benefit Awareness Session (Personal Independence Payment application) and Private Sector Housing Standards. In addition, a new Carer Lead is in place, working with the Newham Carers Community (NCC). This includes training to help identify and support informal carers, understand Carers Assessments and access local support.





Economic Activity Status



- Key**
- Economically inactive: Other
 - Economically inactive: Sickness & Disability
 - Economically active: In Employment
 - Economically active: Unemployed

Figure 8: Differences in economic activity across our ELFT service areas



Next steps include

Continuing to maximise the employment support available to service users, including through clinical and service user awareness and supporting local partnerships.

Strengthening ways people can learn about and access jobs at the Trust.

Glossary

Digital Equity: This refers to when every person and community has the necessary information technology resources to participate in activities that affect their lives. The term includes not only access to devices and the Internet, but also the ability to use and benefit from them effectively.





Homelessness prevention and support



3





Priority Area 3

Homelessness prevention and support

Key Takeaway

We can help reduce homelessness by identifying risk factors for our service user population, including domestic abuse and/or uncertain immigration status, and providing specialist support as needed. This includes partnerships with voluntary and community sector organisations and street outreach.

Analysing service user data and identifying trends can help strengthen prevention activities to improve quality and length of life. This is alongside providing financial advice, help with food, hygiene and health protection.



2025 Highlights:

Specialist support to East London mental health service users with uncertain immigration status to help improve healthcare outcomes: Working with the charity Praxis to support over 90 service users with advice and 50 with specific case work. Early outcomes include preventing homelessness, identifying support for domestic abuse and improved delivery of healthcare (see case study).

Data analysis across ELFT's three specialist inclusion health Primary Care Practices: This is helping better understand population characteristics, health needs, use of health services and learning from factors contributing to deaths. The analysis also looks at housing status, migration status and substance use. Findings are supporting the development of preventative work to help reduce health inequities. Lived experience expertise supported the project design and recommendations.

Helping staff identify people affected by domestic abuse through routine enquiry:

Routine Enquiry (RE) is a way for clinicians to ask direct questions in relation to abuse/sexual violence. A service user who is a survivor of domestic abuse is part of the Quality Improvement project group to increase use of RE. Training started in October 2025, aiming to reach all adult mental health directorate teams by April 2026. Next steps will focus on embedding RE in clinical practice.

Homeless health webinar: This provided an overview of homelessness data trends in ELFT areas and how we can prevent and learn from homeless deaths. Representatives from Crisis, the Museum of Homelessness, Pathway, NHS North East London (NEL), Groundswell and ELFT presented, and over 80 people attended.

Images provided by the [Centre for Homelessness Impact](#) free library.



North East London homeless health strategy 2025-2030:

Approved in May 2025, this strategy helps convene partners around the most important areas of joint focus for affected populations (with a wide definition of homelessness). Work underway includes developing a future model for primary care services, increasing the uptake of the Safe Surgeries initiative and evaluating the impact of personal health budgets for people who are rough sleeping.

Health and wellbeing fairs at our primary care practices:

Health E1 supported 75 service users through free hot meals, hygiene kits, long-life food and complimentary haircuts. Department for Work and Pensions provided support with housing and benefits. The Greenhouse Practice held a health and wellbeing fair in October to mark World Homeless Day. Attendees accessed support for substance misuse, smoking cessation and sexual health screens in addition flu vaccinations, benefit advice and a free lunch.

ELFT as a Marmot Trust

Homelessness prevention and support aligns with several Marmot Trust principles including championing social justice, prioritising prevention and early detection of illness in disadvantaged groups plus supporting a healthy standard of living. Supporting people at risk of or experiencing homelessness targets populations experiencing high levels of social disadvantage.

Fit for the Future: 10 Year Health Plan for England

The NHS's new ten-year plan acknowledges homelessness as a major driver of health inequity, recognising that people experiencing homelessness face significantly worse access to care, poorer health outcomes and shorter life expectancy.

Neighbourhood health services can help identify and support individuals at risk of or experiencing homelessness earlier by bringing services closer to people most in need. The proposal in the plan of a Single Patient Record can help make social risk factors such as housing status more visible in care settings.

Why is this important?

People experiencing homelessness often have poorer physical and mental health than the general population. In 2021 the average age of death was 43 years for women and 45 years for men rough sleeping or using emergency accommodation in England and Wales, nearly 40 years lower than the average age of death in the general population.

Domestic abuse is one of the leading causes of homelessness amongst women.

It is also a significant cause of mental ill health. Nationally an estimated 4.8% of people aged 16 years and over (6.6% of women and 3% of men) experienced domestic abuse in the last year. In London higher rates of domestic abuse are seen in deprived areas and among some ethnic minorities. Bedfordshire police data also shows similar differences across population groups.

The NHS has more contact with victims and perpetrators of domestic abuse than any other public service so knowing how to ask about it and respond provides earlier intervention and support.

People with uncertain immigration status are at high risk of homelessness and destitution alongside poor mental health. Increasing access to specialist advice at intervention points, such as in healthcare settings, is a recommended approach to help reduce rough sleeping.



Case Studies

Luton Smiling Together

Luton Smiling Together is a new programme that links council and health data to identify people living in Luton with severe and enduring mental health issues who may be at risk of having a crisis. Potential triggers for crisis could be bereavement, relationship breakdown, domestic abuse, financial difficulties and housing difficulties. Support is then provided by experienced and compassionate case coordinators.

The website can be accessed [here](#).

Rough Sleepers Mental Health Project (RAMHP)

The RAMHP team work to improve the mental health of people who sleep rough and work directly with local Street Outreach Teams (SORT) to improve their mental health awareness and response.

Over the last year ELFT RAMHP has received 1,080 referrals for people who sleep rough and needed mental health assessment and liaison between services.

RAMHP works closely with colleagues from voluntary and community sector organisations including street outreach teams and drug and alcohol services. In the past twelve months the team joined street outreach teams for over 90 shifts. It also set up three new mental health clinics at day centres for people who sleep rough, promoting health inclusion and reducing barriers to statutory services.



The person who assessed me felt very real and comprehensive, didn't feel like usually when it feels like I'm talking to a machine. I also could talk about myself without being misunderstood

- RAMHP service user





Specialist immigration advice: An example of a service user journey

Praxis provides specialist immigration advice including partnership work in health and care settings. This is the first time it is providing commissioned support in ELFT East London mental health services, with the story below an example of how service users are being supported.

TN was referred by the City and Hackney EQUIP (Early and Quick Intervention in Psychosis) Team. At referral TN was street homeless and sleeping in shop doorways.

Her mental health issues were linked to being a victim of domestic abuse and further affected by insecure immigration status as her visa was dependent on her husband.

Action taken by Praxis included:

- Bringing together evidence to secure emergency housing – gathered via an IDVA (Independent Domestic Violence Advisor) and primary and secondary care to evidence abuse.
- Providing a food voucher, temporary housing support and securing a housing solicitor to help request emergency housing.
- Submitting an indefinite leave to remain application as a victim of domestic abuse, resulting in TN being granted leave to remain with recourse to public funds on a concessionary basis while the application is under consideration.

Praxis maintains contact with TN’s mental health team and TN. TN states that knowing she has legal representation during her immigration journey assists with her stability and well-being.

Number of people seen rough sleeping in ELFT East London areas (2023/24 to 2024/25)

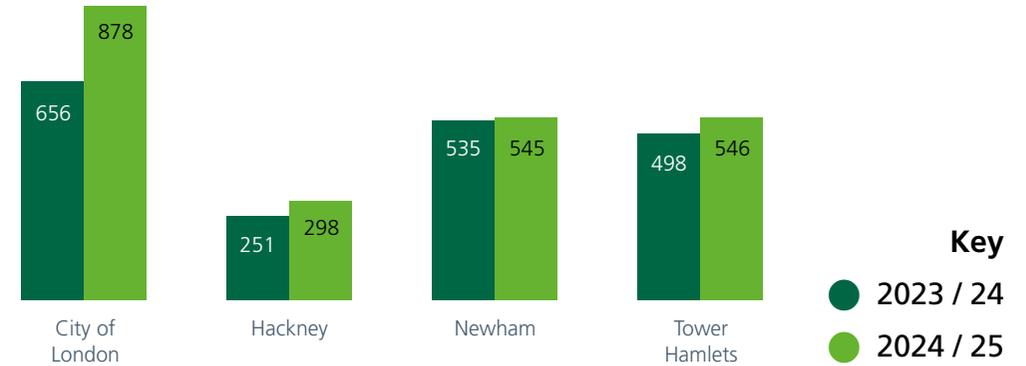


Figure 9: Number of people seen rough sleeping in ELFT London areas in past two years, source CHAIN

Annual Rough Sleeping snapshot Bedfordshire and Luton (2023/24 to 2024/25)

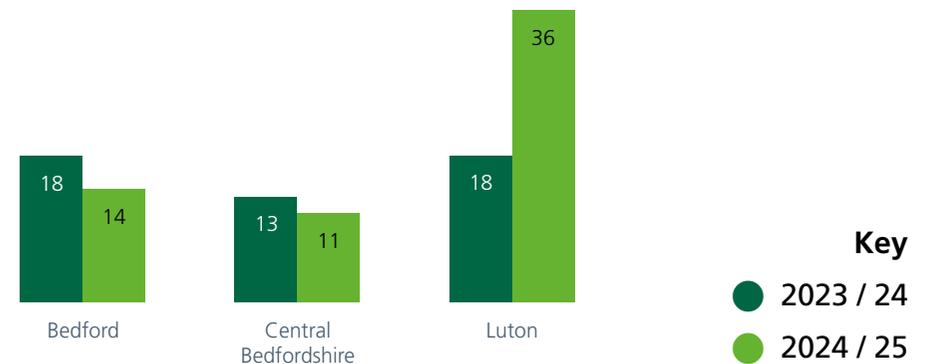


Figure 10: Number of people seen rough sleeping in Bedfordshire and Luton in past two years, Source gov.uk



Next steps include

Taking forward priority recommendations from the data analysis and mortality review of ELFT's three primary care practices.

Evaluating the impact of integrating specialist immigration advice in mental health service settings and working with partners on how recommendations from the pilot can inform models of care.

Glossary

Safe Surgeries: Primary care practices committed to improving access for migrant populations. This includes declaring the service as a "Safe Surgery" for all and making sure that no one is refused registration based on immigration status, inability to provide identification or proof of address, or language barriers.





Promoting the physical health of people with long term mental health conditions and learning disabilities

4





Priority Area 4

Promoting the physical health of people with long term mental health conditions and learning disabilities

Key Takeaway

Providing effective physical health support for people with mental health conditions and/ or learning disabilities can reduce unacceptable differences in health outcomes.

Good recording of physical health needs will help provide targeted interventions and follow up. Training such as Making Every Contact Counts assists positive change conversations and helps build local knowledge about support.

Healthcare prevention and promotion, such as cancer screening and stop smoking support, needs to be accessible to people with learning disabilities and long-term mental health conditions.

2025 Highlights:

A physical health strategy developed with service users and staff to provide a Trust wide framework for action. This is alongside:

- An updated physical healthcare policy for mental health service users to support healthier and longer lives.
- A new physical health lifestyle form to strengthen recording and management of physical health for service users in inpatient settings.
- Development of a learning disability physical health strategy to work across Bedfordshire and Luton, developed with local system partners.

Stop smoking support for service users in inpatient and community settings: A total of 2,505 service users were supported to quit over a year (October 2024 to end of September 2025), leading to a successful quit outcome for 30% (n=982) receiving inpatient support and 32% (137) community support.

Continuing to grow stop smoking support in the community: This includes funding from City and Hackney local authority to provide targeted smoking and vaping cessation support for CAMHS service users (12 to 18 years) and for people experiencing homelessness.





Diabetes awareness month: Held in November 2025 including inpatient staff roadshows, two webinars, health checks for ELFT staff and published blogs sharing lived experience and helping to ‘myth bust’ misconceptions about diabetes.

Piloting use of Continuous Glucose Monitors (CGM) in Newham to support eligible service users with Type 1 and Type 2 diabetes, with positive feedback from service users and staff. This is now supporting CGM access across the Trust.

Supporting cancer screening uptake for people with learning disabilities, including a cancer screening resource pack for Bedfordshire, Luton and Milton Keynes and staff questionnaires and service-user focus groups to understand confidence on talking about screening.



ELFT as a Marmot Trust

Prioritising prevention and early detection of illness in disadvantaged groups recognises the need to help reduce health behaviours, such as smoking and poor diets, as they contribute to health conditions that lead to unfair differences between population groups. These interventions need to be targeted in proportion to where there is most need for support.

Fit for the Future: 10 Year Health Plan for England

The plan includes:

- » Development of **neighbourhood teams** to deliver **ongoing, holistic support**, shifting care from hospitals to communities to improve life outcomes.
- » Emphasis of **prevention over treatment**, including breaking cycles of tobacco-related poverty and illness, which disproportionately affect those with mental ill-health.
- » Encouragement of **technology driven health management** such as glucose monitors to improve diabetes care.
- » A **Modern Service Framework for mental health** using the best evidenced interventions to support improved health outcomes.

Why is this important?

There is an unacceptable difference in health outcomes between people with long term mental health conditions and/or learning disabilities and the general population. This includes longer periods in poor health as well as dying earlier. Much of this gap can be reduced by early preventative action and health promotion support.

Individuals with learning disabilities face significantly reduced life expectancy—about 20 years shorter on average. Latest data shows that the most common avoidable deaths (deaths that could have been prevented through earlier support) are flu and pneumonia, cancers that are part of the digestive system (throat, stomach, bowel) and heart disease.



Smoking is the leading cause of preventable ill health and death and contributes to half the difference in healthy life expectancy between rich and poor populations. It significantly impacts people with long-standing mental health conditions, with ELFT screening data showing 60% of inpatient service users as smokers (data from October 2024 to September 2025).

Diabetes is a health condition where the body does not produce enough insulin to regulate glucose in our blood. It can lead to a number of health conditions including heart, kidney disease and problems with eyesight and mobility. The number of people at risk or managing diabetes is important

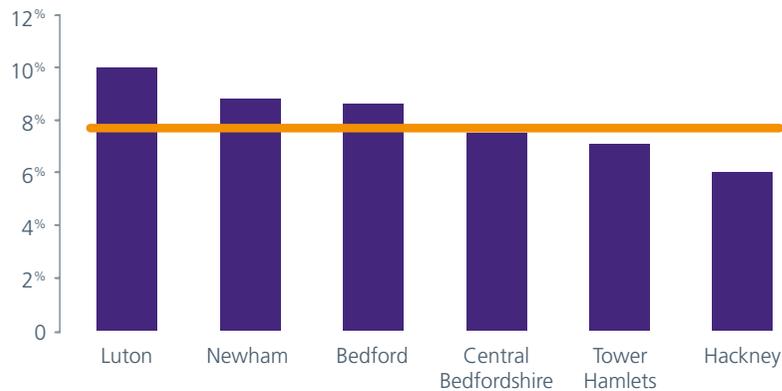
for inpatient and community settings, with risk factors including age, deprivation, weight, some types of medication, family history and ethnicity.

Our local area data shows three of our Trust areas (Luton, Newham and Bedford) with a greater percentage of the population diagnosed with diabetes compared to the national average.

When looking at deaths with diabetes as a cause or contributing factor, Newham, Tower Hamlets, Hackney and Luton are the top four areas nationally.



Diagnosed diabetes prevalence across ELFT areas (2023-2024)



Key ● ELFT service areas ● England percentage

Figure 11: Proportion of people with diabetes recorded in primary care data in ELFT areas

ELFT areas: Smoking prevalence in adults and people with long term mental health conditions (2022-2023)



Key ● Smoking prevalence in adults (2023) ● Smoking prevalence for people with long term mental health condition (2022 /23)

Figure 12: Comparison of percentage of adults who smoke in the general population compared to people with a long-term mental health condition



Case Studies

Reducing hospital admissions for people with learning disabilities in Bedfordshire and Luton

Local data in Bedfordshire and Luton indicated that people with learning disabilities were often admitted to acute hospitals for longer durations compared to the general population. This trend is costly in financial terms and impacts on emotional and mental health.

Change ideas tested as part of a quality improvement project to reduce where possible hospital admission included:

- Supporting primary care practices to increase the number of annual health checks carried out, for example training primary care colleagues
- Developing checklists and screening tools and including physical health discussions in multi-disciplinary team spaces
- Development of an admission avoidance policy and pathway
- Development of a digital care home resource.

This work resulted in a 40% drop in admissions to an acute hospital, with a weekly cost saving of £11,550 (potentially over £600,000 per year).

Experience of Making Every Contact Count (MECC) training

Interview with Eleanor Gabayo, Weight Management Coordinator with Community Learning Disability Service in Tower Hamlets

Making Every Contact Count is about using the conversations we already have with our service users to help support them with their health and wellbeing. It's a way of maximising small but meaningful moments into everyday work, where we can encourage someone to make choices that feel right for them.

Why did you sign up? I signed up for the training to strengthen the way I talk about health, particularly with adults who have learning disabilities. Many of the people I support need information explained in a clear and accessible way. I wanted to make sure my approach helps them feel included and understood. I also wanted to learn new ways to motivate people.

How did the training support you? It helped me look at how I have health conversations and how to make them feel more natural. It reinforced focus on what matters to the person,

rather than what I think should come next. I also discovered many local services I didn't know about before, which has made it easier to signpost people to the right support.

Describe an example of how it's made a difference. One person who joined the Shape Up Programme had a learning disability and a high Body Mass Index (BMI). They were very unsure about places they could feel comfortable exercising, often saying it wasn't for them. Using what I learned from MECC, I was able to focus on what they felt was manageable. After building on motivations and confidence, the service user was enthusiastic about being referred for support with exercise. **It was a big reminder that small conversations can build confidence and lead to real change.**

Find out how to access MECC training in your local area [here](#).





Bowel Cancer Screening for People with Learning Disabilities in Newham

Statistics show that bowel cancer is a significant cause of cancer death for people with Learning Disabilities, and lower bowel cancer screening rates contribute to poorer outcomes.

In January 2025 the Newham Health Learning Disabilities team and the North East London Cancer Alliance took steps to improve bowel cancer screening uptake. This included: arranging for the home test kit to be sent to eligible people aged 50-74, identifying service users who may need reasonable adjustments to complete the test, providing easier-to-understand information, staff training and awareness events.

Examples of reasonable adjustments include:

- Going to a person's home to explain what bowel screening is and providing support to take the sample
- A reminder call to service users and carers every two weeks to complete the kit
- Asking day centres who support service users if they can support the service user with the screening.

Data shows a steady increase in the number of people in Newham with a diagnosed learning disability who have an up-to-date bowel screen. This includes service users who received a positive test with follow up referral to see a colorectal specialist.



Next steps include

Strengthening tobacco cessation community support for people with Severe Mental Illness in Bedfordshire and Luton.

Use the roll out of the new lifestyle form to better understand physical health needs across the Trust.

Work with People Participation to help improve access for service users to physical activity opportunities.

Glossary

Life expectancy: The average time someone is expected to live based on the year of their birth, current age and other factors including their sex.

Healthy life expectancy: The average number of years a person would expect to live in good health based on current mortality (death) rates and the level of self-reported good health.

Continuous Glucose

Monitors: A device for people with diabetes that lets you check your glucose (sugar) levels at any time.





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





Commitment 1

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

Key Takeaway

The Patient Carer Race Equality Framework and the Quality Improvement Health Equity programme provide Trust wide approaches to championing social justice alongside other examples of innovative work.

Good data recording, data analysis and involvement of people with lived experience are key principles of practice.

2025 Highlights:

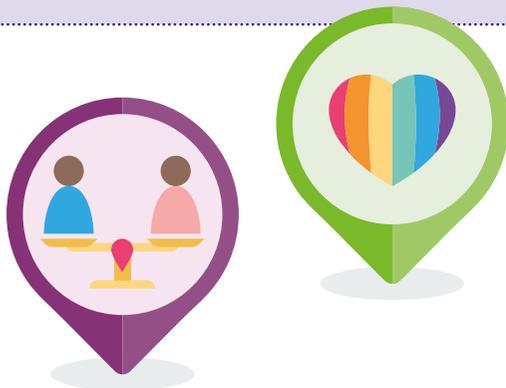
Developing a [Poverty Proofing Toolkit](#) with the charity Children North East. This provides practical examples to tackle barriers to accessing healthcare including: tips on reducing the costs of transport, promoting health literacy and offering flexible appointment options. It supported the Pursuing Equity Phase 3 programme (see Case Study).

Patient Carer Race Equality Framework (PCREF):

Ongoing implementation across the Trust, co produced with service users. Each ELFT borough has areas of focus based on data looking at 'access, experience and outcomes' of racialized service users in respective localities. Using this data, local PCREF steering groups are developing action plans to address identified inequities. For example, in City and Hackney Black service users aged between 30-49 are disproportionately represented in restraint data. Teams are developing targeted de-escalation

strategies and trauma-informed training to address this. The City and Hackney Mental Health Directorate is working with the local authority Population Health Hub team to improve the accuracy and completeness of equality data.

Launch of 'Unshame Newham': A collective of NHS staff and people with lived experience of sexual violence. Unshame Newham is developing a public health campaign so that people feel seen, heard and empowered by normalising the sharing of sexual violence experiences. The working group includes charity and voluntary sector partners, ELFT and the Metropolitan police.

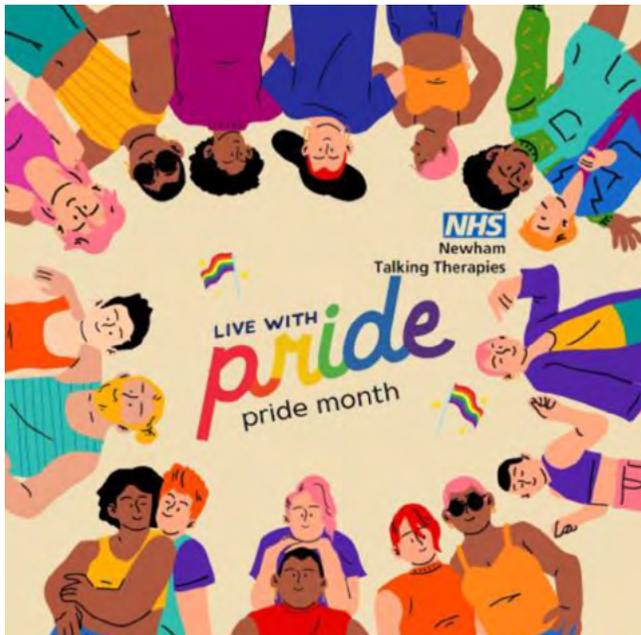




Why is this important?

At ELFT, we take immense pride in the diversity of our staff, service users, and the communities we serve. We deeply value the contributions of everyone. This commitment enhances our ability to deliver culturally respectful care and treatment.

Our service areas—such as Newham, Tower Hamlets, City and Hackney and Luton—are among the most ethnically diverse in England and Wales, with a wide range of languages



spoken and faiths practised. Around 10.3% of Central Bedfordshire’s population are from different ethnicities to White British. There are increasing number of older people in our service areas and many people living with disabilities.

We recognise that many people—particularly those from ethnic minority backgrounds, people with disabilities, neurodivergent people, and LGBTQ+ communities—continue to face significant health inequities. These groups often experience poorer access to healthcare, worse health outcomes, and barriers to inclusion and support. The causes are complex, rooted in factors such as deprivation, discrimination, racism and structural inequities. The new NHS 10-year plan acknowledges that social determinants—like housing, education, and income—are key drivers of these disparities, and that they cluster in more deprived areas, compounding the injustice.

One way to address these challenges is through high-quality data and analysis to understand the specific needs of different communities. This evidence-based approach enables us to develop tailored strategies that tackle inequities head-on. Our Quality Improvement framework provides a systematic way to use data to help tackle complex issues through testing, learning, and measuring progress. Active involvement

and leadership of service users and carers across ELFT work programmes, facilitated by the People Participation directorate, supports more equitable and person-centred care.





Case Studies

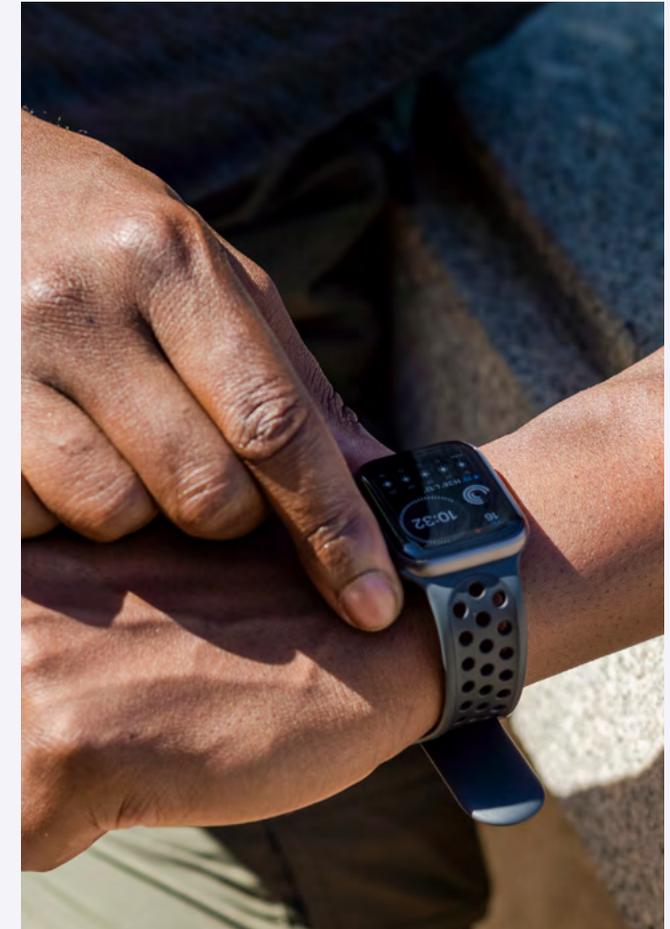
Pursuing Equity Phase 3 – Tackling Missed Appointments

Since 2021, ELFT has used Quality Improvement (QI) to advance equity at scale. In September 2024, Phase 3 of the Pursuing Equity Programme began, bringing together 16 teams from across the Trust to tackle missed appointments. The focus was on improving access for people living in the Trust’s most deprived areas.

Across the programme, 13 out of the 16 teams saw an improvement in the percentage of missed face to face appointments. The proportion of missed face-to-face appointments across all teams on the programme reduced from 21.4% to 19.8%, a 7.5% overall reduction. A similar improvement was seen for those living in the most deprived areas, with missed appointments reducing from 21.5% to 19.9%. This means that service users from the least deprived areas are now no more likely to attend than those from the most deprived areas—a key equity milestone.

A **Change Package** is supporting spread and sustainability:

Change Concept	Change Idea	Why it Worked
Scheduling in conjunction with service users	Admin or clinicians book the next appointment directly with the service user	Enables real-time scheduling and avoids offering inconvenient times that lead to non-attendance
Clear processes and policies	Standardised “Did Not Attend” policy with staff training	Ensures consistent handling of missed appointments and follow-up
Reminding service users	Automated or clinician-sent text reminders at the point of booking	Personalised reminders sent in advance support service users to plan ahead and reduce DNAs



A Power BI dashboard now enables teams to monitor missed appointments in real time, ensuring that improvement is sustained.



Implementing faith-adapted psychological therapy, Newham

Newham's Talking Therapy team in partnership with Newham Council, voluntary sector partners and Leeds University commenced a new project of faith adapted psychological therapy tailored to Muslim communities.

Data analysis carried out across North East London in 2024 showed lower access rates to Taking Therapies services for certain population groups including Bangladeshi and Pakistani ethnicities. The Muslim population is the second largest faith group after Christianity in Newham. Muslim clients are more likely to use religious coping techniques than individuals from most other religious groups in the UK.

The team adapted **Behavioural Activation therapy**, an evidence-based treatment that helps people overcome depression and low mood by gradually increasing engagement in meaningful and enjoyable activities. It can be adapted in culturally and spiritually sensitive ways, with the team aligning it with Islamic values and practice.

Since launching, over 70 staff are trained and 11 patients completed treatment with good results. Service-users and Newham Talking Therapies have co-produced promotional posters and group materials to ensure the service is relevant

and trusted.

Other ways developed to provide inclusive care includes Christianity and LGBTQI+ mental health online workshops and service leaflets in six main languages of refugees and asylum seekers in the borough.



Using Islamic principles for counselling and I felt they understand the value of religion plays in my life

- *Newham Talking Therapies service user*



Health Equity approach to dementia diagnosis, Tower Hamlets

People who live in more deprived areas are more likely to develop dementia. However, they face barriers to accessing timely and accurate diagnosis compared to those from more affluent areas. People from minoritised ethnic groups also typically have lower rates of diagnosis and longer intervals from symptom onset to diagnosis.

The Tower Hamlets Diagnostic Memory Clinic set out to make diagnostic processes available in the Community Memory Clinic that would typically only be available in neuroscience centres. This includes multidisciplinary neuroradiology meetings, a multidisciplinary clinic, referral pathway to Barts Health neurology and training of nurse specialists.

Tower Hamlets Memory Clinic now supports direct access to gold-standard tests in a local community setting without needing to seek referral to a tertiary neuroscience centre. As a result, the dementia diagnosis rate in Tower Hamlets is now 75%, as compared to the averages of 61% in North East London ICB and 65% nationally.



Next steps include

Ongoing roll out of PCREF including a PCREF training resource for all staff.

Analysis of data to understand how service users with learning disabilities access Trust services.

Developing a Trust-wide Access Policy to set out a consistent “ELFT Way” of managing appointments using the Pursuing Equity programme 3 learning.





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

2





Commitment 2

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

Key Takeaway

ELFT's new Green Plan (2025–2028) strengthens our commitment to creating healthier, low-carbon environments that support both physical and mental wellbeing.

Initiatives such as Twinwoods Rewilding, the Gardening Forum, increased recycling and solar installations show how improving green spaces and reducing environmental harm benefits recovery and staff wellbeing.

By expanding access to nature and building climate-resilient places, we are helping communities to feel safer, healthier and more connected.

2025 Highlights:

ELFT publishes new Green Plan (2025–2028):

The next three-year phase of ELFT's Green Plan sets out actions to accelerate progress toward net zero.

Rewilding Twinwoods through the NHS

Forest scheme: ELFT staff, service users and contractors planted over 150 trees at Twinwoods Resource Centre as part of the NHS Forest programme. This helps create biodiverse, therapeutic green spaces.

Expanding green spaces through the ELFT

Gardening Group: The gardening group gives staff the opportunity to start projects, seek support, share ideas and learn from experts. This includes support to secure funding, choose suitable plants and involve green-space activities in Service User care.

Oakly Court increase recycling: Oakley Court, an inpatient ward in Bedford and Luton, worked

with service users to improve sustainability by increasing the percentage of items recycled from 11% to 22.5%. The team streamlined recycling bins, increased recycling signage and trialled education on recycling for staff and service users.





Trust Awarded £1m Solar Panels Funding:

ELFT successfully bid for funding to install solar panels at the Newham Centre for Mental Health and at the John Howard Centre for Mental Health in Hackney, with potential 20 year saving of between £1.75-82 million.

Fit for the Future: 10 Year Health Plan for England

The 10-Year Health Plan for England reaffirms the goal of a net-zero health service by 2040/2045 and the need to strengthen preparedness for climate-related risks. The Plan also promotes a shift toward community-based, preventative care, reducing waste and embedding environmental considerations within regulation and clinical guidance. Further priorities include cleaner transport, improved air quality, and addressing hazards in the built environment, such as damp and mould.

ELFT as a Marmot Trust

Our climate and sustainability work embodies Marmot's principle that environmental action and health equity must go hand in hand. Environmental hazards such as heat, pollution and poor-quality urban spaces disproportionately affect those already facing disadvantage. By creating healthier, greener and more resilient environments, we not only reduce these inequities but also help communities to thrive.



Why is this important?

Climate change is described as the greatest global health threat of the 21st century. Its impacts are felt locally and fall hardest on people who are already vulnerable. For the NHS, this means rising demand and greater pressure on essential services.

Across the UK, more frequent heatwaves, poor air quality and flooding are already affecting physical and mental health. NHS England estimates heat-related mortality costs of £6.8 billion a year, projected to rise sharply without action.

In East London, Luton and Bedfordshire, dense neighbourhoods experience the urban heat-island effect, making heat episodes more dangerous and worsening air quality. Heavy rainfall increases the likelihood of surface-water flooding and disruption to homes, transport and services. These impacts are most significant for older adults, people with long-term conditions or disabilities, children and those experiencing deprivation or homelessness.

Access to green space can help protect health by reducing heat, improving air quality and supporting mental wellbeing, social connection and recovery. Cleaner air policies show measurable health benefits, including fewer respiratory illnesses.



Case Studies

Interview with Craig Donohoe, ELFT Climate Change Champion

There are lots of reasons I got involved. I did my master's degree in climate change. Climate is where my real expertise and passion are. Being part of the Trust's sustainability work lets me bring that passion back into my life and help co-produce solutions.

Being a climate champion gives you purpose. For people who've had mental health challenges, feeling that you can make a difference gives your life meaning. It makes you want to get out of bed, get out of the house and engage with the world.

It's good to connect to nature. It's really important that we set a vision of what a healthier, low-carbon society looks like. I co-lead a walking group in Luton which is an example of that future society—people walking on green paths, connecting socially and exercising within their limits. Through regenerating the green spaces at ELFT, they can be places where we walk, garden, create art, and reconnect with nature.

These projects really change people's lives.

On the walks, people who are isolated make friends. You talk for two hours and really get to know each other. It even helped me appreciate my own town more... Gardening projects do the same: people take ownership of a space, create things, and it becomes therapeutic.

What more could the Trust do? Travel together more, revitalise every green space, hold more community events outdoors, and help staff use their passions for the environment in their work.

One idea that could make a big difference. A big walking challenge along the River Lea—from Bedfordshire to East London. Staff and service users together, connecting our directorates, re-energising people, raising funds for more gardening projects, and showing what population health can look like: people in nature, exercising and connecting.





Environmental and Financial Sustainability in the Forensics Directorate

The Forensics Directorate launched the “Net Zero Waste” QI project, known as Utensils R Us, to reduce single-use plastics and improve the sustainability of kitchen practices across all wards. The project aimed for a 90% reduction in disposable use by 2025.

Using QI methods, the team introduced changes including reusable cutlery, installing dishwashers on every ward, improved stock-checking, dedicated ordering systems, and regular reviews with service users. These interventions also addressed longstanding challenges such as over-ordering, unmanaged stock and lack of awareness about the financial and environmental impact of disposables.

Impact

Monthly dry-goods costs fell from £40,735 to £16,273 — a 60% reduction, saving around £290,000 a year. Cutting disposable use also reduced emissions by 84,000 kg CO₂ annually, equivalent to 53 London–New York round trips

Fountains Court reducing unnecessary prescribing

Fountains Court, an inpatient unit for older adults in Bedfordshire, used Quality Improvement (QI) to reduce unnecessary medication ordering. The team strengthened collaboration with pharmacy, provided regular education for new doctors on overprescribing, and introduced the STOP FRAIL tool—a checklist that helps clinicians review medications for people living with frailty and safely reduce treatments that offer limited benefit.

Impact

Weekly medication orders fell by 30% (from 56 to 39), reducing waste, improving safety and supporting a more person-centred, sustainable approach to prescribing.



Next steps include

Supporting ELFT’s new Green Plan, recognising its importance for population health.

Explore ways to increase green space and how it can support therapeutic alongside environmental benefit.

Continue to develop initiatives looking at increasing the proportion of plant-based nutrition in inpatient settings.

Glossary

Urban Heat-Island (UHI): Built-up areas becoming hotter than surrounding places because buildings and roads trap heat.

Green Social Prescribing: Connecting people with nature-based activities—like gardening or walking—to support mental and physical health.



Population health capability and capacity

The new Ten-Year plan encourages NHS provider trusts to focus on population health outcomes including through partnership working. As part of this, and to deliver our strategy commitments, it's important we support population health knowledge and understanding at ELFT and make sure it connects with everything we do.

2025 Highlights:

Population health induction sessions

supporting over 800 new staff members in the past year. Population health is also part of ELFT lead and clinical leadership training.

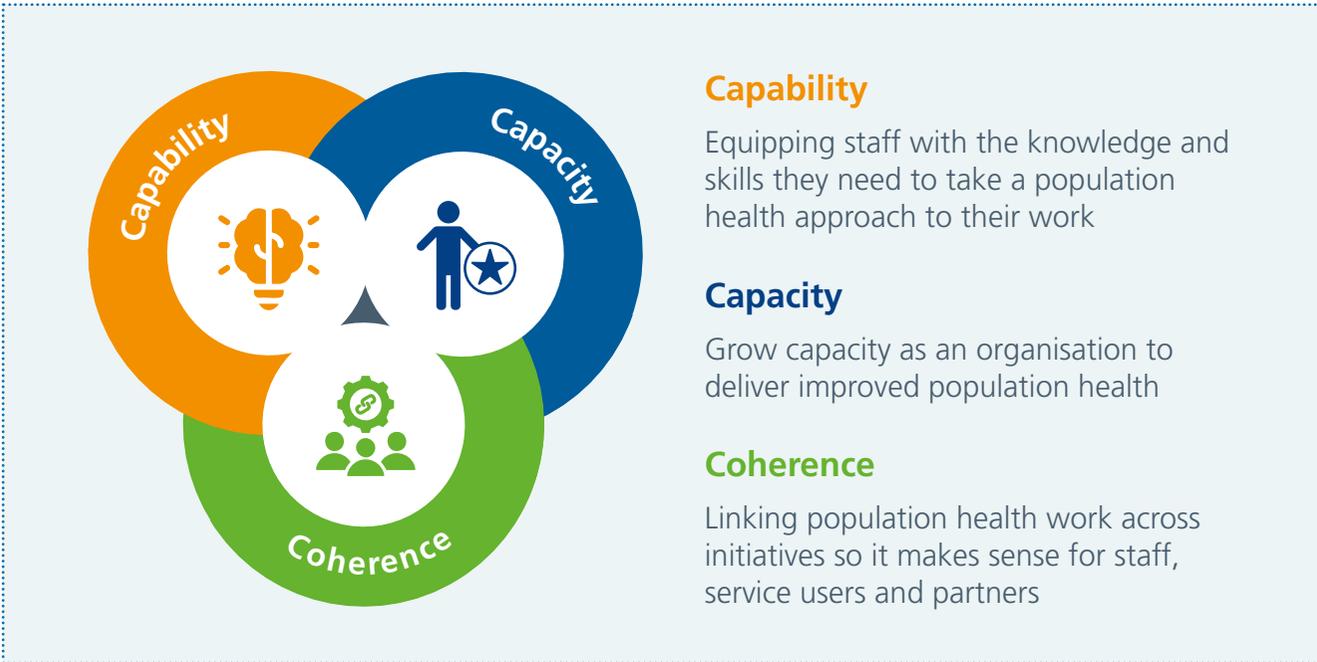
Population health newsletters and webinars:

Sharing work taking place across the Trust and providing learning spaces for internal and external colleagues.

Living Well community of practice: Co designed with ELFT staff to share learning on ways to support service users live well through a greater focus on prevention.

Population health dashboard: Community Mental Health and Community Health teams are now able to access population census data and population forecasts, through Power BI. The dashboard also helps look at referrals to understand how representative the service is in terms of ethnicity, gender, age and deprivation.

ELFT as a population health training site for public health speciality trainees, population health fellows and other specialty trainees. This is alongside delivery of public mental health training to ELFT psychiatry trainees.





Commissioner's Award - Improving

Population Health: Recognises population health leadership at our annual awards, with 83 nominations since 2021. This year, **Newham Transitional Practice** received the award for its commitment to supporting vulnerable members of the community who face barriers to accessing traditional primary care services. Judges highlighted that the practice goes “above and beyond standard healthcare delivery” to address the social determinants of health, provide trauma-informed care and build trust.

Find out more

Population health dashboard: This can be accessed on ELFT PowerBi under Community Mental Health and the Quality tab.

Living Well Network
elft.livingwell@nhs.net

Population health webinars Catch up on our webinar series [here](#)

Following a review of borough data packs for Bedford and Central Bedfordshire, the group is scoping out a number of workstreams including on Core20PLUS5 disease areas, dementia, preventing emergency admission, supporting better navigation of the NHS and access to services and cultural competence. Through creating a peer-to-peer learning space with opportunities of coaching and mentoring support it hopes to provide a blueprint for similar ways of working across the Trust.

Bedfordshire Community Health Services Health Equity Group

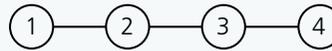
Bedfordshire Community Health Services (CHS) set up a voluntary leadership group this year to support the delivery of equitable services to service users and ensure an inclusive, respectful working environment for all staff. This brings together clinical and non-clinical staff, managers and operational leads and People Participation to identify and address health inequalities in service delivery across Bedfordshire communities.



I'm hugely grateful to our fantastic project group of volunteer staff. There's momentum and collaborative energy already, which I think will make a real difference to the lives of underserved patients in Bedfordshire. I hope also that the experience of leading and managing a large-scale change project and the associated peer learning, will be valuable for colleagues' professional development

- Dr Raj Shah, Clinical Director, Community Health Services for Bedfordshire & Newham





Research capacity development in Luton and Bedfordshire

The ELFT and University of Cambridge Implementation Research Hub launched in September 2024. Since developing a shared vision and strategy, several collaborative research projects are in place focusing on the social determinants of health and wellbeing, working in partnership with the Integrated Care Board (ICB) and local voluntary sector organisations. This includes obtaining funding for: advancing research capacity for Children and Young Peoples' (CYP) mental health, risk stratification of health inequalities within primary care across Bedfordshire and building a community of practice for primary care research.

In June 2025, the team hosted its first face-to-face Implementation Research Hub Day. Bringing together researchers, GPs, nurses and allied health professionals from Luton, Bedfordshire, Milton Keynes and Cambridge, the event featured presentations on health inequalities research.



It has been an amazing start to the collaboration between ELFT and the University of Cambridge and we are really excited by the enthusiasm and support of colleagues in Bedfordshire to engage with research that has potential to transform population health.

- Dr Shobhana Nagraj, Lead for ELFT-UCAM Implementation Research Hub

East London Business Alliance and Partners Placing Health Back on the Agenda

A Health Inequalities East London forum took place in May 2025, bringing together ELFT, Barts Health NHS Trust and local business partners.

The East London Business Alliance (ELBA) is a charity that connects businesses with local communities to support social regeneration in east London. Its mission is to create positive change by using the resources and influence of the private sector.

Follow up conversations with business partners are helping us identify ways to collaborate to support the health and well-being of our local communities.



Next steps include

Strengthening population health understanding as part of the Trust's Quality Improvement approach.

Support understanding and translation of population health management dashboards to help inform Trust plans and programmes.

Continue to provide learning spaces for the Trust including through the Living Well network, induction, training and webinars.

Glossary

Core20PLUS5: An initiative to reduce healthcare inequalities by targeting the 20% of the population who experience the most definition and five key clinical areas.



Reflections on 2025 population health activity

This report shares examples of maturity and scaling of projects and programmes since our first population health report in 2023. Notable examples include Healthier Wealthier Families, the Quality Improvement Pursuing Equity programme and taking a Trust wide approach to employment and physical health support.



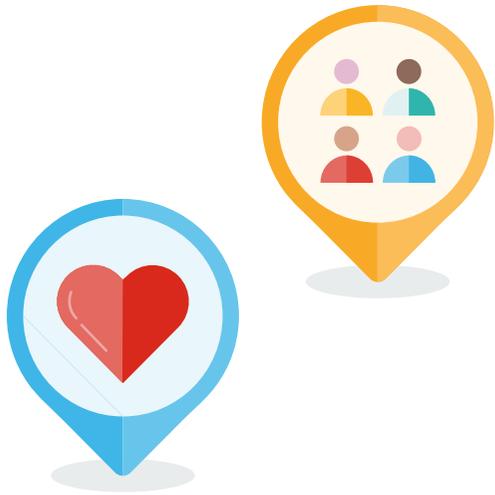
This shows what becomes possible through a strategic commitment to population health delivered in collaboration with colleagues and partners.

As in previous years, the breadth of population health activity is attributable to a Trust wide commitment to Quality Improvement and People Participation in addition to teams that despite capacity challenges continue to find new ways to support populations. For example, Unshame Newham that encourages conversations about sexual violence and a health equity group in Bedfordshire creating a peer-to-peer learning environment to support positive change.

Data helps us see the high need for action, particularly in terms of the impact of poverty on local communities and the differences in life expectancy and healthy life expectancy across places and population groups. There is increasing potential to use data to strengthen prevention focused care – such as the analysis carried out in our homeless primary care practices and data platforms and dashboards brought together by our Integrated Care Boards.

Opportunities going forward include

- Using ELFT's new organisational strategy 2026-2031 to set out high level population health ambitions that we can track progress against, noting as well that many root causes of ill health, such as poverty, require partnership work across national and local systems.
- Build on the opportunities offered by the new ten-year plan to integrate care that reduces health inequities, with a strong emphasis on prevention and improved access to employment and income support—particularly for populations with the greatest need.
- Capture how we are working together as a system to deliver value through taking a population health approach informed by the principles of being a Marmot Trust.



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