

Committee: Healthier Communities and Older People Overview and Scrutiny Panel

Date: 13th February 2018

Wards: All

Subject: Preventing Diabetes in the South Asian Community Task Group – update report.

Lead officer: Dr Dagmar Zeuner, Director of Public Health.

Lead member: Councillor Tobin Byers, Cabinet Member for Adult Social Care and Health

Contact officer: Amy Potter, Consultant in Public Health & Barry Causer, Head of Strategic Commissioning

Recommendations:

-
1. The panel notes the progress made on the six recommendations made by the Task Group in their September 2016 report.
 2. The panel agrees that the work of the Task Group will now feed in to the Strategic Framework for Diabetes, which is being led by the Health and Wellbeing Board as part of their Whole System Approach to Diabetes.
 3. The panel agrees to discuss and comment on the Diabetes Strategic Framework at a future meeting.
-

1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. To provide an update on progress against the recommendations from the Diabetes Task Group and the Health and Wellbeing Board's (HWB) approach for a Whole System Approach to Diabetes.

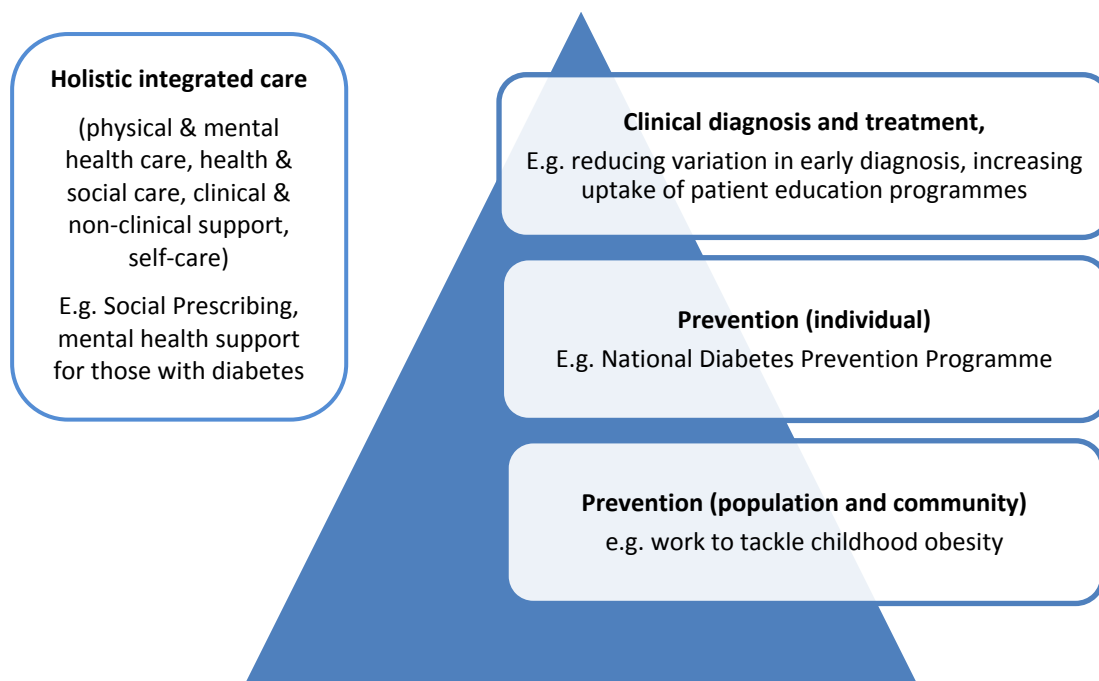
2 DETAILS

- 2.1. At their meeting on the 6th September 2016, the Healthier Communities and Older People Overview and Scrutiny Panel made six recommendations for 'Preventing Diabetes in the South Asian Community' and subsequently received an update on progress on the recommendations at their meeting on the 16th March 2017. Positively, since the original recommendations were made the Merton Health and Wellbeing Board have agreed to build upon the good work taking place across Merton on Diabetes and adopt a whole system approach (WSA) to diabetes across the life course, including the development of a Strategic Framework for tackling diabetes in Merton.

Diabetes Whole System Approach

- 2.2. Diabetes is an area where the traditional 'medical model' centred on specialist and hospital based care has been unable to curb the rise in diabetes cases, serious complications and spiralling costs, and despite evidence-based guidelines there remains considerable variation in hospital, primary and community services, and patient outcomes.

- 2.3. Recognising this, in June 2017 the Merton HWB agreed diabetes a priority topic to address strategically across partners, building on the HWB's previous focus on work to tackle Childhood Obesity, and as an exemplar of how a whole systems preventative approach to other long term conditions might work.
- 2.4. Approaching diabetes is a complex problem that cannot be addressed by straightforward clinical solutions. This has led the HWB to frame diabetes as a systems leadership challenge for HWB members, with the need to engage the community rather than imposing solutions, a challenge which requires the iterative development of a strategic framework, rather than a more straightforward clinical strategy.
- 2.5. The Diabetes Strategic Framework will build on the work already undertaken in Merton to tackle diabetes. Building on the work of this task force, the work on childhood obesity and social prescribing, the framework will take a life course approach, span the whole health and care system, and focus on prevention and tackling health inequalities including those linked with poverty and ethnicity (including South Asian Communities) . It will aim to deliver behaviour change at scale, as well as improve early diagnosis and holistic integrated health and care in the community.
- 2.6. The strategic framework will look at where we are now, and where we want to be in terms of outcomes that matter to individuals at risk of or already with diabetes, to their families, and to the health and care system (from clinical measures such as HbA1c and reduced inequalities in uptake of services, through to outcomes that the community itself defines as success measures), and how we can get there. The diagram below (Figure 1) gives a suggested outline of the different facets of a whole system approach to diabetes, but will be developed and refined over time.



- 2.7. The process for the development of the framework will be an intervention in its own right, making explicit use of the different skills, experiences and roles of the member of the board as clinicians, community representatives, council officers and politicians, as well as a broader range of officers, clinicians and place shapers in the local area.
- 2.8. A key component of the development of the framework is the Diabetes Truth programme, which aims to develop the HWB's behaviour as systems leaders in addressing a complex problem. Initially funded by the Leadership Local Vision, the programme (which started in early 2018) will buddy HWB members with a resident who is living with or at risk of diabetes. The aim of this is for HWB members to get a deeper understanding of the lived experience of diabetes and therefore the vulnerabilities that others might feel, the link to poverty and also how HWB and senior professionals might work with people and communities differently; what it might mean to be community led around the prevention and treatment of diabetes and how the HWB, through its organisations and teams, might mobilise people with diabetes to take action around their own health.
- 2.9. On 30th January 2018, the HWB meeting was held at Vestry Hall and HWB members heard the experiences of over 10 Merton residents, including those from South Asian Communities and community leaders, who are living with or at risk of diabetes. The conversations between HWB members and residents and community leaders will continue on a one to one basis over the next two months and will feed valuable insight into the development of the strategic framework.
- 2.10. We would welcome the opportunity to present the findings of the Diabetes Truth programme and the Strategic Framework to the Task Group at a future date.

Update on recommendations from the Task Group.

2.10.1 ***Public Health and Merton CCG to consider ways to ensure equitable uptake of the National Diabetes Prevention Programme (NDPP) within the South Asian Community.***

(i) *The NDPP programme is an evidence based programme, commissioned and funded by NHS England (NHSE) to support residents who are borderline diabetic. The programme was launched in Merton in July 2017 but was paused in September 2017 due to concerns around information governance (IG), which have now been resolved.*

(ii) *The NDPP was successfully restarted in Merton in January 2018 and is being rolled out in a phased approach to delivery and focuses on GP practices in east Merton. Between July 2017 and September 2017 779 letters were sent out to Merton residents inviting them to take part in the programme with 329 residents accepting a place on the programme; 100 (29.5%) of these are from an Asian background. This compares to just over 18% of Merton's residents who are from an Asian ethnic group (Census 2011). As the South Asian community has a higher risk of diabetes this suggests equitable uptake according to need of the NDPP program.*

(iii) A further 370 invite letters have been sent out during January 2018 and it is expected that a high number of these are from a South Asian Community.

(iv) Positively, due to the good results of the programme, NHSE are initially extending the programme for another 24 months during which time the programme will be evaluated at a national scale. The detail of this extension is in negotiation at a national and sub-regional level, but it is our understanding that it will include options for the delivery and publicity materials for NDPP to be in different languages including those from the South Asian community.

2.10.2 Public Health and MCCG to ensure that the new lifestyle Service is culturally appropriate and effectively engages South Asian Communities.

(i) The new lifestyle service, delivering under the One You Merton banner, started delivery in April 2017 and has a key objective to engage and support residents from east Merton and from key community groups e.g. South Asian Communities. This is inline with the council's overarching objective to bridge the gap between the east and the west of the borough.

(ii) The service includes digital information, advice and tools to support behaviour change and the website has been developed with Google Translate functionality; which translates the text into Arabic, Gujarati, Hindi, Polish, Punjabi, Tamil and Urdu.

(iii) One You Merton have developed an approach that identifies and trains health champions from within communities, to support them from within. Five health champions have been trained to date from South Asian Communities including representatives of Muslim Women Merton, Muslim Women's Club and the Ethnic Minority Centre.

(iv) One You Merton have delivered workshops, interventions and supported health days at a number of community groups that work with the South Asian Community including the Ethnic Minority Centre, The British Muslim Association, The Tamil group (Vestry Hall), a Health and Wellbeing Seminar with British Muslim Association, EMC-Exhibition of Ephemeral Arts, Joint Committee with EM and the Social Anxiety Group.

2.10.3 Public Health to review projects within the East Merton Model and consider if they are culturally appropriate.

(i) MCCG is leading the work on the Wilson Health and Wellbeing Board Campus and working closely with the Council and the HWB. As part of the development 'Community Conversations in East Merton' work took place between Jul-Dec 2016, between Health and Wellbeing Board members and well connected local community members in East Merton ('Community Connectors'). Conversations were had with more than 450 people from as many different backgrounds, age groups and interests as possible about what its like to live in the east of the borough, their experience of health needs and how the Wilson might act as a catalyst to improve health and at develop an even greater sense of community and belonging – and ultimately how the Wilson might become a health and community wellbeing campus. This included members of the South Asian community.

(ii) Significant clinical and partner engagement has been undertaken by Merton Clinical Commissioning Group (CCG), Merton Council, MVSC and partners on the proposed shape of the healthcare and wellbeing model for the Wilson site during 2016 and 2017, through the Wilson Programme Board. This will continue throughout 2018 and beyond as plans for East Merton Model of Health and Wellbeing based around the Wilson site continue to develop, and will include discussions around equalities and access to services delivered from the Wilson by all members of the community, especially those facing worse health outcomes.

(iii) A Communication and Engagement Strategy for the Wilson has now been developed by Merton CCG and was signed off at the Wilson Programme Board on 23rd Nov 2017. MCCG are also assigning dedicated staff resource to support Wilson communications and engagement with the local community around the proposals for the Wilson site. Now there is a Wilson Communications & Engagement strategy, there will begin to be a regular flow of information to and feedback from the public in 2018, including through VCS forum such as INVOLVE. The first public workshop outlining proposed options for the site is planned for Spring/Summer 2018; workshop content development will be supported by the Wellbeing Workstream Group.

(iv) In addition, a Wellbeing Workstream group has been set up by the Wilson Health and Wellbeing Campus Development Manager (seconded from, and still working part time for, Healthwatch), under the Wilson Programme Board, looking specifically at the Wellbeing aspects planned for the Wilson site (e.g. Information Advice and Guidance services, Enterprise Hub, green spaces for community gardening etc, rather than the clinical services which will also be delivered from the site). It is made up of Voluntary and Community Sector (VCS) organisations which relate to the proposed 'Wellbeing' service options, plus those with a key local interest. Members therefore include: Healthwatch Merton, Sustainable Merton, BAME, Merton Community Transport, Age UK, MVSC, Mitcham Cricket Green Heritage, MCil, Citizens Advice, Mental Health Forum, Commonsense Trust.

(v) The first meeting of the Wellbeing Workstream Group was held on 27 Oct 2017, and the second on 14 December 2017, and will meet at regular intervals throughout 2018. Draft Terms of Reference for this group have been developed – this group is a vehicle for accountability for decision making on development of the Wellbeing aspects of the site, and will take forward the Wellbeing service design/engagement. It will also be able to collate feedback on the development of the Healthcare (clinical) part of the site, and the feel and accessibility of the whole Campus, and feed this back into the Wilson Programme. Progress to date was presented to members at the 27 Oct meeting, who fed back that they were impressed with the amount of work done behind the scenes, felt that it made sense and wanted to support the project going forward.

2.10.4 Public Health and MCCG to find sensitive and appropriate ways to ensure South Asian expectant mothers are aware of the increased risk of type 2 diabetes.

(i) At South West London (SWL) level, the SWL maternity transformation programme acknowledges the high rates of diabetes in Merton, and has

identified actions to improve partnership working with pre-conception care colleagues/ GPs to improve the care and outcomes for women with pre-existing conditions such as diabetes, as well as to explore a SWL approach to develop an assessment and referral protocol to support women and families who are overweight/obese to lead healthier lifestyles during pregnancy and postnatally. South Asian and other high risk BAME communities will be a key target group for this work, including those who do not already have diabetes but who are at increased risk of gestational diabetes.

(ii) Meanwhile locally, all expectant mothers from a South Asian background should be offered a Glucose Tolerance Test to check for signs of gestational diabetes, due to the increased risk. Merton CCG's transformation plans for diabetes (which will form a strand of the overarching Whole System Approach) will look at all aspects of the diabetes pathways, including for those at increased risk of diabetes during pregnancy.

2.10.5 *Public Health and MCCG to consider ways to ensure the equitable uptake of the NHS Health Check programme amongst the South Asian Community.*

(i) The NHS Health Check programme is now being delivered by Merton Health (the GP Federation) and the contract clearly sets out a targeted approach to delivery of the programme. This prioritisation sets out that the following key priority groups, who have increased risk of cardiovascular disease, are of specific interest and should be prioritised; to increase the reach and also uptake by patients in these key groups

- a) South Asians, who have increased risks of heart disease compared to Europeans*
- b) Males, who if other factors are equal, are at higher risk of cardiovascular disease compared to females*
- c) People with a family history of clinically proven cardiovascular disease before the age of 60 years*
- d) People with a history of smoking*
- e) People residing in areas of higher deprivation by postcode*

(ii) From April 2017 to September 2017 324 South Asian patients were invited for a Health Check and 17% of those invited have since received a completed Health Check. It is expected that the uptake of the health checks will increase now that Merton Health have mobilised and their performance will be closely monitored through effective contract and performance management. More specific work is underway, building on previous consultation with the community, to actively follow up with high priority groups including South Asian patients to increase the uptake rate of the Health Check programme.

2.10.6 *MVSC, MCCG and Public Health to review services provided to South Asian Communities by the existing voluntary and community organisations (for example faith groups) and consider how these can work together, pool resources, and provide consistent messages on diabetes care and raise awareness.*

(i) In 2017, the VCS Health and Social Care Forum, with MVSC's support, developed a consortium of voluntary sector providers for health, social

care and wellbeing services. Their aim is to improve collaboration and formal partnership working by sharing expertise, pooling resources and joining up services for Merton residents. Their services are aligned to the borough's priorities including diabetes. The Consortium was launched in January 2018.

(ii) During 2016 and 2017, MVSC has worked closely with the Ethnic Minority Centre (EMC) to develop services and gain funding e.g. Get Set & Get Active, Healthier Lives for U and Feeling Good Group for Mums (health discussions and fitness activities).

(iii) The BAME Voice comprises a range of BAME organisations (including those directly serving south east Asian communities) working collaboratively on health and social care information, advice and support services.

3 ALTERNATIVE OPTIONS

3.1. NA

4 CONSULTATION UNDERTAKEN OR PROPOSED

4.1. The Wilson Health and Wellbeing Campus and Diabetes Whole System Approach have significant components of community engagement and consultation.

5 TIMETABLE

5.1. NA

6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

6.1. NA

7 LEGAL AND STATUTORY IMPLICATIONS

7.1. NA

8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

8.1. NA

9 CRIME AND DISORDER IMPLICATIONS

9.1. NA

10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

10.1. NA

11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

- NA

12 BACKGROUND PAPERS

12.1. NA

This page is intentionally left blank