

Improving access and engagement for rural and coastal communities





Agenda



Welcome and introduction

Facilitated by chair – Nigel Edwards – chair, National Centre for Rural Health and Care

Improving access to healthcare services + Q&A

Gillian Pearson – associate PCN director of prevention, partnerships and transformation, Taurus Healthcare Limited / Herefordshire General Practice

Jane Thomas – head of patient and public engagement, experience, and participation, Herefordshire and Worcestershire Health and Care NHS Trust

Improving community engagement with healthcare services + Q&A

Heather Catt – consultant in public health, Blackpool Teaching Hospitals NHS Trust

Improving NHS recruitment and retention + Q&A

Claire Flavell – strategic lead, NHS Lincolnshire Talent Academy and United Lincolnshire Hospitals NHS Trust

Final reflections

Facilitated by chair

Close of event



Housekeeping



- Please note, this event is being recorded
- Please keep your camera on wherever possible
- If you lose connection, please re-join using the link in your joining instructions or email health.inequalities@nhsproviders.org
- Please ensure your microphone is muted during presentations to minimise background noise
- We will come to questions after each session
- Please feel free to use the chat box to ask questions
- If you would like to ask a question audibly, please use the raise hand function during the Q&A sections and we will bring you in
- Any unanswered questions will be taken away and answered after the event
- You will receive a link to an evaluation form at the end of the day, please take the time to complete it, we really do appreciate your feedback.

Established in 2017

Mission: building a movement to address inequalities in the provision of rural health and care



4 Themes

Workforce Research Insight Technology



Key issues

- Urban bias in the stats
- Heavily loaded with older people and aging
- Housing stock has significant problems
- Higher service delivery costs
- Significantly fewer staff per head of population
- Major recruitment challenges
- Local authority funding is lower than urban areas
- NHS "place blind" with limited understanding of rural as a concept



What can trusts do?

- Staffing and service delivery
 - New models of staffing
 - New approaches to training and education
 - Technology
 - Mobile services
- Economic
 - Employment and skills
 - Procurement
 - Transport
- Partnership
 - Housing
 - Integration with primary care
 - Developing the health and care workforce





Tackling Rural Inequalities

Herefordshire and Worcestershire ICS

Gillian Pearson
Associate PCN Director for Prevention,
Partnerships & Transformation
Herefordshire General Practice

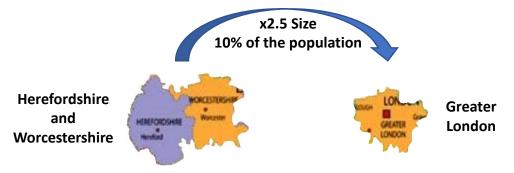
Jane Thomas
Head of Patient and Public Engagement,
Experience and Participation
Herefordshire & Worcestershire Health &
Care NHS Trust

Rurality in Herefordshire & Worcestershire



Some of our challenges and barriers due to rurality

- Loneliness & isolation
- Hidden deprivation due to rurality
- Digital divide literacy as well as lack of internet or high speed connection in areas
- Poor transport links
- Labour productivity per hours worked second lowest of all economic areas in Britain

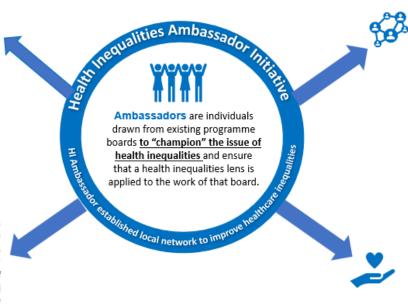


Area: 3,921 km² Population: 800,000 Area: 1,569 km² Population: 8,000,000

We want to create the environment where we ensure that tackling health inequalities is everyone's business. – Health Inequalities Ambassador Initiative



Support individuals working within each Programme Board who are committed to narrowing healthcare inequalities and ensuring equitable access, excellent experience, and optimal outcomes for all. Particularly Core20PLUS populations, who are more likely to experience healthcare inequalities.



Support Ambassadors to establish a local action –learning set, network to improve healthcare inequalities through the work of their respective Programme Boards and individual roles.

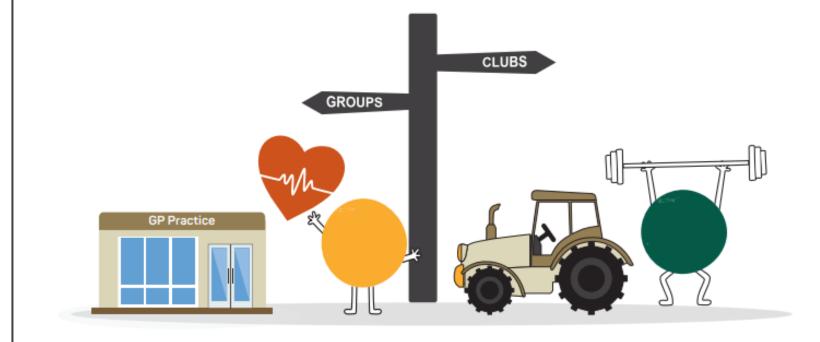


Offer opportunities such as regional meetings, face to face events to develop HI Ambassadors into healthcare inequality improvement leads and be part of an expert reference group for local bodies seeking to narrow healthcare inequalities.

Empower Ambassadors to understand how to apply to a health lens to their work and take action or empower others to take action against avoidable variation/inequity.



Talk Wellbeing Herefordshire Prevention Services







Our purpose and service

- Supporting priorities within Herefordshire Health & Wellbeing Strategy and Health Inequality Strategy to bring together a range of prevention services to support a more effective and accessible approach to providing healthcare interventions to our underserved communities.
- Removing barriers to accessing care through outreach approaches tailored to meet the needs of different populations.
- Providing an integrated approach to prevention

Target populations

- Unregistered populations
- Seasonal and Farming communities
- Those living in areas of high deprivation
- Those for whom English is not their first language
- Hesitant populations
- Migrant communities
- Rural communities
- Digitally excluded

The Core Service

- Anyone 18+ years
- Detection of atrial fibrillation
- Blood pressure checks
- Cholesterol checks
- HbA1c checks
- Generic health and wellbeing screening for our unregistered population
- Awareness and education across communities around health risks of CVD, AF, hypertension, smoking, obesity
- Support people to register at a practice
- Signposting social prescribing
- Covid vaccinations (in line with seasonal vaccination programme)
- NHS Health Checks







Our approach

- Team of HCA's, Nurses, Social Prescribers
- Hub and outreach model, including roving bus and community locations (including the occasional greenhouse)
- Social prescribers are trained to provide health checks
- Virtual GP support
- Pathways link back into 24/7 general practice
- Collaborative working with partner organisations and VCSE
- Volunteers working within the Talk Wellbeing hub to signpost to groups and services available
- Promote use of NHS app and support to complete an e-consultation where appropriate
- Providing the infrastructure to 'bolt on' additional prevention services through hubs and outreach
- Working with PCNs to target outreach based on local inequalities and population needs









Talk Wellbeing Hub and Outreach

- Currently collaborating with:
 - Healthy Lifestyle Training Service
 - Mind
 - Turning Point
 - Carers Links
 - Dementia Matters Here
 - Healthwatch
 - Age UK
 - Diabetic Eye Screening Service
 - PCNs
- Engagement with:
 - Schools in areas of deprivation
 - Afghan groups
 - Farming communities
 - Working with those who are homeless
 - Hereford FA walking groups for Ukrainians, forces, blind college
 - Veterans
 - Community farms

• Warm hubs

Herefordshire General Practice

Taurus Healthcare

I am the project manager and run Warm Welcome Ross On Wye, I have been running Warm Welcome for the past 2 years and have found the services from Tauraus Healthcare to be absolutely amazing for our service users.

We deal with both rough sleepers and sofa surfers in the Ross On Wye area, and also people with sometimes extremely chaotic lifestyles. A lot of our service users do not have a general practitioner and have slipped through the gap when it comes to their medical care. Sometimes they are to the point of being self neglectful over their physical health.

What having Taurus Healthcare has brought to Warm Welcome is a safe environment where our service users can actually access services that they cannot reach if they do not have a GP. Gemma and Sharon are absolutely amazing with our service users, they make them feel calm and relaxed. It is extremely important with some of our service users that they tread very gingerly, and both Gemma and Sharon take the time to get to know everyone on an individual basis to build up that all important trust in order to assess the individual needs.

I truly believe that this has brought another dimension to Warm Welcome, and helps support people furthest away from support within our community, I honestly cannot thank you enough.

Milly Boylan, Warm Welcome Ross on Wye



Our impact so far.....

Since our launch in June 2023

- 713 patients seen by Talk Wellbeing
- 539 Health checks completed
- 225 Contacts with a social prescriber
- 15 contacts escalated to our supervisory GP
- 195 patients identified with high cholesterol
- 110 patients identified with moderate/high Qrisk status
- 82 patients identified with high blood pressure
- 8 patients registered at a GP practice
- 6 irregular pules detected

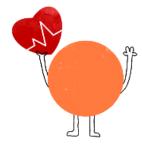
Key themes of contacts

- Homelessness
- Access to food
- Advice on housing
- Signposting to Benefit support and reviews
- Too busy to go to practice
- Support for mental health
- Wellbeing check
- Education advice for managing hypertension or cholesterol

"The drop in's sessions have helped many of our customers get access to health care, advice and guidance they need around a range of issues. This service is providing a lifeline to people struggling to access general doctor surgeries.

Mel Groves, The Living Room @Ethos.





Collaboration

TALK WELLBEING

Worcester University Ross Warm Welcome

he Car

Age UK

Caring for Communities & People

Public Health

Dementia Matters Here

Living Room

Herefordshire General Practice

TALK WELLBEING

Herefordshire & Worcestershire Health & Care Trust

Ross

NHS Herefordshire & Worcestershire

Herefordshire Council

Sexual Health Team

Proud to be a part of Herefordshire and Worcestershire Integrated Care System

St Michaels Hospice

Carers Links

NFU

Healthwatch

Community Garden

Farming Minds We are

Herefordshire



Turning Point

ifestyle

leam

Hea



Talk Wellbeing Outreach

Breakdown by PCN of current engagement and outreach

Digitally isolated

Farming Community

Homelessness

N&W PCN

- Tenbury Civic Hall
- Pembridge Village Hall
- · The Cart Shed
- Kington

S&W PCN

- Garway Village Hall
- Ross Warm Welcome
- Ross Community Garden
- Clehonger Village Hall
- **Eaton Bishop**
- Ross Livestock Market

City PCNs (WBC & HMG)

- Pomona place
- Living room
- Tescos
- Rural business days

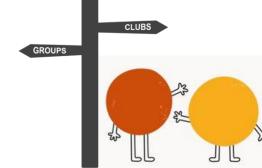
- **Hinton Community Centre**

East PCN

- **Bromyard Methodist Church**
- Ledbury Foodbank
- **Bromyard Centre**
- **Ledbury Methodist Church**

- Union café
- Asda
- Livestock Market
- City of Sanctuary
- Hereford Racecourse

- Hope Centre





Our work with farming communities

TALK WELLBEING

- Attending livestock markets across Herefordshire to provide health checks and signposting
- Positive engagement with NFU Hereford and Herefordshire rural Hub representatives to collaborate at future events
- Established pilot collaboratively with Talk Wellbeing and mental health teams to include mental health screening in the Talk Wellbeing CVD approach to ensure we can make every contact count. Pathways to include We Are Farming Minds and Talking Therapies.

Feedback

- Fantastic service, are you here all day? I'll text my mother
- Wish our Health service would do something like this, what a great idea
- My Blood Pressure won't be good, I'm about to pay for a pen of ewes
- I might be a Builth patient but if I have a heart attack, they will bring me to Hereford Hospital
- Are you doing skin cancer checks as were all outside so much, It's a worry
- This is really exciting it was on the TV last month and you're here this month
- I've not seen my GP for over 15 years

Mental Health Pathway for Farming community Anxiety GAD-2 Scoring System More than half the days = +2Nearly every day = +3

Action Card 7

"Talk Wellbeing has already been a fantastic free service for Herefordshire's farming community, particularly the conveniently placed monthly market health checks at Hereford market. There are few things more important than physical health, so having the opportunity to have a quick 10 minute check from a nurse covering things such as blood pressure and cholesterol is so valuable. I'm delighted many farmers have already taken up the opportunity to have free checks, which have also helped to identify a number of previously undiagnosed health concerns which could then be escalated to GP's for treatment." Ali Parker, NFU







Health inequalities Where are we now?





Herefordshire and Worcestershire Health and Care

About The Trust

- Lead provider of mental health and learning disability services across Herefordshire and Worcestershire supporting children, adults and older people.
- Main provider of Integrated Community Services in Worcestershire, working alongside GPs, social care teams and the voluntary sector to deliver nursing and therapy services which keep people at home for as long as possible.
- Work with a range of partners to support children, young people and families across Worcestershire. We provide health visiting, school health nursing, early years support, respite care for families of children with life-limiting learning and/or physical disabilities, and are responsible for community based paediatric services.
- Worcestershire's main provider of sexual health services, and also run community dental clinics for people who are unable to access a mainstream services.



Herefordshire and Worcestershire Health and Care

What is the Trust's role?

A number of ways the Trust can address health inequity:

- 1. As a provider of health and care services strong examples of targeted approaches
 - Sexual Health
 - Early Intervention in Psychosis
 - Public Health Nursing
- 2. As an advocate for our patient groups who experience poorer health outcomes (e.g. people with severe and enduring mental illness, people with a learning disability)
- 3. Our current and future workforce as an anchor organisation



Some early reflections

Herefordshire and Worcestershire Health and Care

- Good practice captured inconsistently but there are pockets where this is outstanding - but we have no mechanism for spread. Data is not available in a way that enables people to think differently
- Advocacy examples are a great way to tell a story about increasing equity to healthcare (the adjustments made to the environment and care delivery to enable an individual with profound autism to enable critical planned surgery). Capture these and share through communication channels – there is probably much more happening around this than we are aware of.
- Anchor organisation we need to scale up our work with specific communities to promote roles in the Trust more proactively and being more agile/flexible in our approach to recruitment and development (NHS Cadets and Volunteering campaign)

What are we doing?



- Board lead and new internal HI Oversight Group
- Strategy refresh Board see this a key priority
- Part of the Kind Life/culture work becoming a learning organisation that listens and responds to patient and carer voices (Care Opinion roll out to support this)
- Increasing engagement capacity and reach (working with partners, for example local VCS, District Councils, PCNs)
- Cross fertilisation of knowledge across the Trust and HI "champions" sharing "the art of the possible"
- Data flow detailed piece of work focusing on access to Talking Therapies
- Advancing mental health equalities pilot (farming communities)
- Q1 cut of data by service by geography (overlay onto census?) and then building in other HI data (more support from Public Health?)
- Work around Health Literacy

Going forward



- Embedding in Trust Strategy and annual plans
- Clinical Strategy roll out some teams supported re: Board HI priority
- Board risk appetite reset to drive improvements (e.g. MH support for all LAC)
- A symposium to create a network of "champions" and strengthen the influence from these individuals and the work undertaken by engagement leads in decision making
- Leadership essentials being rolled out includes this with practical tips to ignite curiosity
- All PMO processes/structures assess the HI impact (+ and -) with monitoring and evaluation including more robust completion of EIA for all policies and service changes
- Harness the collective voice/impact of system working (especially LG, VCSE and PCNs on the ground)

Anchoring on the coast



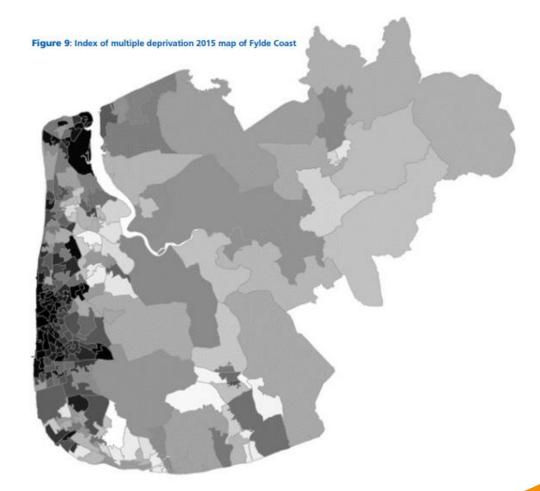


Co-designing an anchor framework for coastal communities

Heather Catt - Consultant in public health

Blackpool Teaching Hospitals NHS Foundation Trust (BTH)

- Provide services to the 350k population of Blackpool, Fylde and Wyre
- Very low ethnic diversity 95%, 96% and 98% of the Blackpool, Fylde and Wyre population, respectively, is white
- High levels of deprivation 33% of the Fylde Coast and 50% of the Blackpool population
- An ageing population who experience poor health at an early age
- Low life expectancy and high rates of preventable morbidity and mortality
- Low levels of educational attainment and literacy



What makes the NHS an anchor institution?

NHS organisations are rooted in their communities. Through its size and scale, the NHS can positively contribute to local areas in many ways beyond providing health care. The NHS can make a difference to local people by:



Purchasing more locally and for social benefit In England alone, the NHS spends £27bn every year on goods and services.



to support communities
The NHS occupies 8,253
sites across England on
6,500 hectares of land.



Working more closely with local partners The NHS can learn from others, spread good ideas and model civic responsibility.



Reducing its environmental impact The NHS is responsible for 40% of the public sector's carbon footprint.



Widening access to quality work The NHS is the UK's biggest employer, with 1.6 million staff.

As an anchor institution, the NHS influences the health and wellbeing of communities simply by being there. But by choosing to invest in and work with others locally and responsibly, the NHS can have an even greater impact on the wider factors that make us healthy.



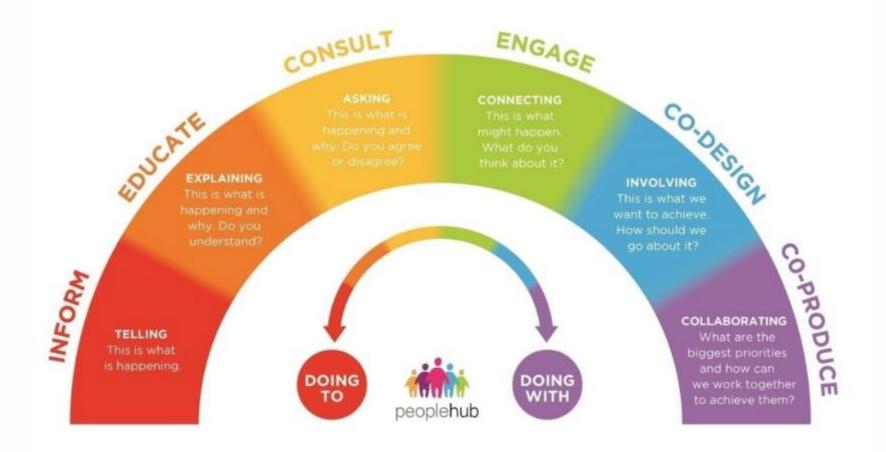
Why we wanted to do this

Challenges in coastal communities

Anchor role not embedded in the Trust

To locate anchor approach in the community

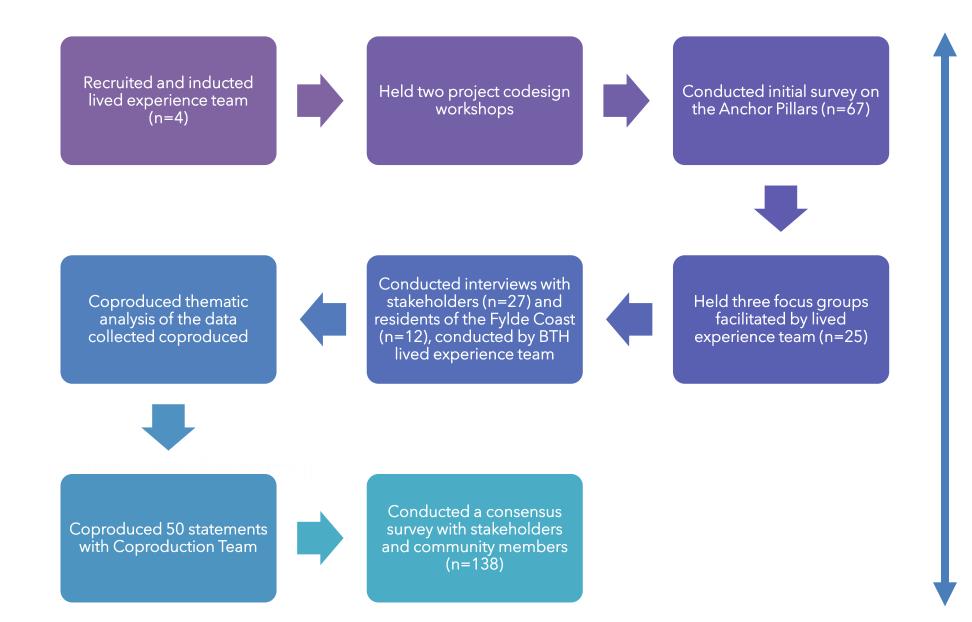
Spectrum of Participation



What we aimed to do

- Embed people with lived experience in a BTH project team to test a coproduction approach.
- Work with communities in the Fylde Coast particularly those facing multiple disadvantage, through the VCFSE, to identify the important barriers to and opportunities for local wealth creation.
- Engage with staff to understand their perspective on challenges and opportunities for BTH to discharge its anchor responsibilities.
- Engage with partners to understand their perspectives on how BTH can deliver its anchor role and learn from their experience on social value and corporate responsibility work.
- Co-produce a framework to guide BTH and other coastal community anchors.

How we did it



Weekly project team meetings and monthly steering group meetings



Our Anchor Framework

Employment:

Make recruitment more local and inclusive through supportive schemes

Increase apprenticeship offer for local people to help keep them in the Fylde Coast

Reach out across our communities to share information on roles and overcome barriers

Support fair pay and conditions of employment for direct and contracted employees

Make the physical & mental health of staff a priority

Procurement:

Think creatively about funding to shift spend to prevention, circular economy and spending for social value

Engage local suppliers and provide support to join the list of suppliers.

Commit to learning about the local business base, shift spend locally and generate local wealth.

Environment:

Reduce waste: paper, single use items and food

Ensure **recycling of waste** including furniture and equipment

Encourage and support active travel and use of public transport by staff and patients

Include the whole environmental cost in purchasing decisions

Buildings and assets:

Allow local groups and organisations to use estates at little or no cost

Co-locate services in community buildings to create flexible and connected services

Develop good quality, accessible green spaces, for all to use, particularly disadvantaged communities

Partnership Working:

Deliver all services in partnership and in local communities

Work with other anchors to identify groups who need more support and test and scale ways to provide it

Funding and opportunity for lived experience roles to enable coproduction and peer support

Work with other anchors to support long-term stable VCFSE funding

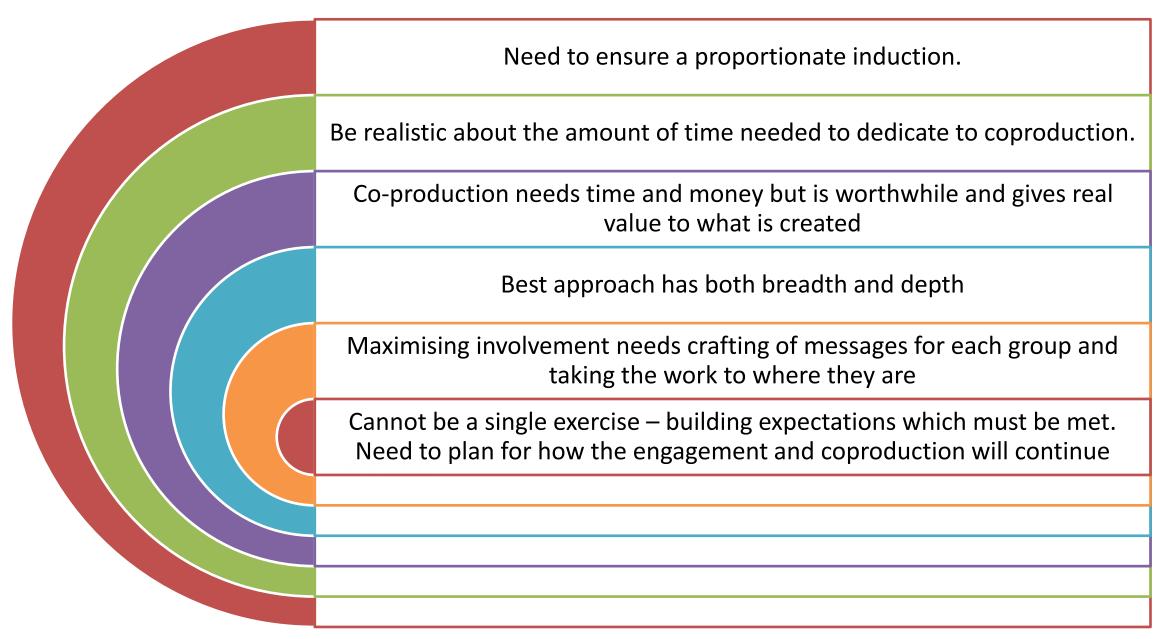
What went well

Paying community researchers and embedding them in the Trust team Engagement of some sections of the community Partner engagement led to a step change in how the Trust is viewed All partners participated throughout in Steering Group, highlighting commitment. Strong branding of the work – Anchoring on the Coast

What didn't go well

Embedding community researchers was not straightforward Community researcher role was not well defined and some struggled to understand their role Failure to engage with some stakeholders – particular community groups and private sector

Lessons learned for coproduction and engagement









Recruiting and Retaining a Rural and Coastal Workforce

Claire Flavell
Strategic Lead - NHS Lincolnshire Talent Academy

Tel: 07773 168908 Email: Claire.Flavell2@ulh.nhs.uk

Welcome to Lincolnshire



Lincolnshire Demographics

- 4th most sparsely and largest populated county in England.
- Population of 783,080 GP-registered patients, dispersed across an area of 5,921 sq.km.
- Predominantly rural with 80km of North Sea coastline.
- Seaside destination with aging population on the East Coast.
- Large agri-food manufacturer, growing 30% of the nations vegetables.
- Seasonal employment and fluctuating population.
- No motorways, little dual carriageway and poor public transport connectivity.









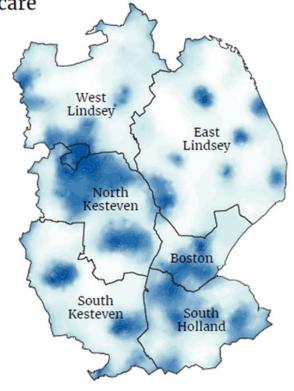
Community Challenge

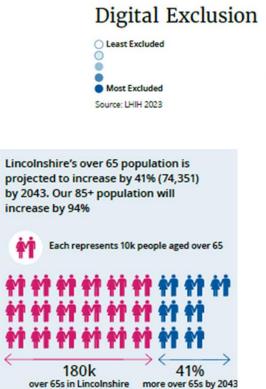


Access to any Healthcare

in Lincolnshire

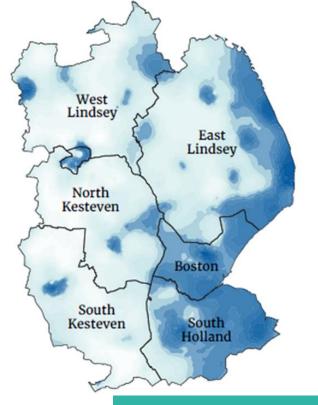
Poor Access
Good Access





(75k people) Source: ONS, 2018

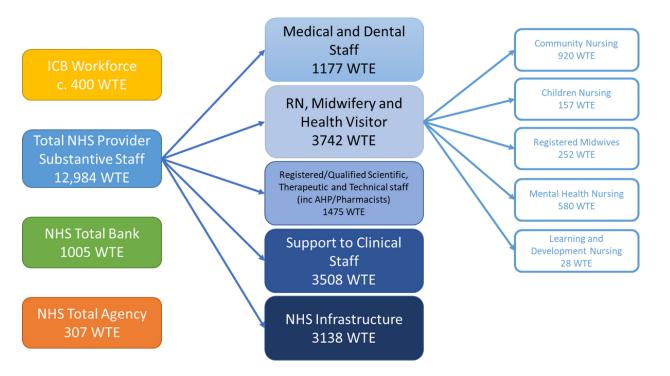
in 2023



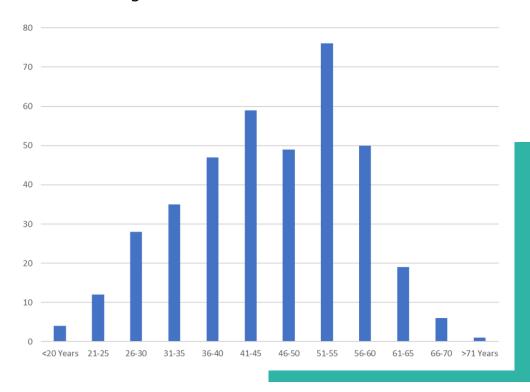
Staffing Challenge



The Lincolnshire NHS Workforce



Workforce - Age Profile





Our Approach Nurturing Talent

Since 2015, our approach across Lincolnshire has been to "Grow our own" talent through the creation and development of our talent pipelines.

During that time, our approach has evolved in alignment with the needs of the sector WHILST continuously ensuring its services address the requirements of its target audience: our future workforce.



Talent Academy Focus

- Intensive engagement with our local schools, colleges and universities
 - Harnessing opportunities for attraction, engagement and onward recruitment
- Partnership working with our local DWP Job Centres and Community Groups
 - Development of new career and employability support opportunities
 - Focussed programme for Care Leavers (NHS Universal Family Programme)
- Creation and implementation of new entry points into the sector, along with clear career development pathways



Purpose:

- Long-term strategy for talent creation - utilising apprenticeships as the vehicle for delivery
- To simplify future workforce engagement through a single conduit for the sector
- To inspire and support young people into careers within the sector through tailored careers advice and guidance, and delivery of tailored employability support activities
- Implementation of apprenticeship career pathways

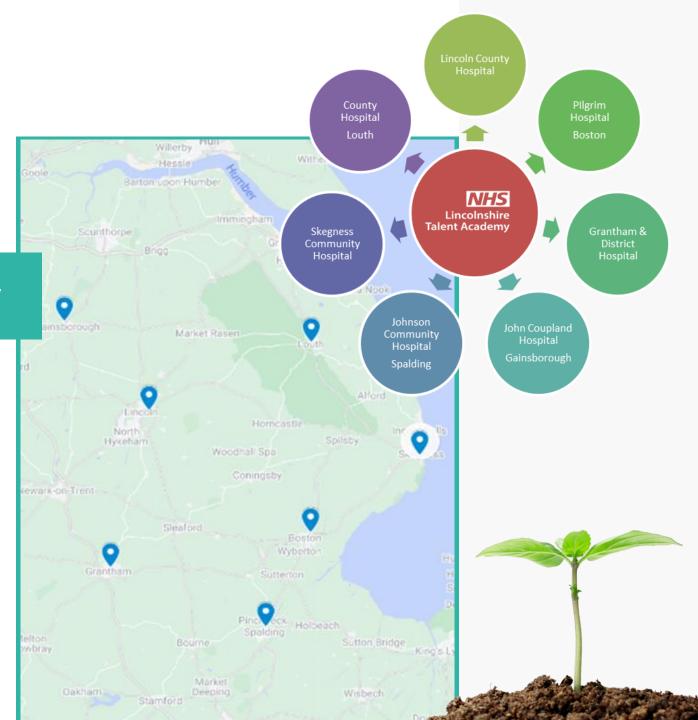
Place Strategy

Delivering Hospital Hubs, Local Engagement, and Community Expansion

Creating a strong sense of community, by integrating schools, colleges, healthcare professionals, and local organisations.

We are currently in the process of implementing our "Emerging Talent Strategy" which includes the following:

- Creation of local "Hospital Hubs", aligned to the local community, amplifies the natural connection with their local healthcare institutions.
- Strategic positioning of our hospitals as central hubs for engagement, education and recruitment. The alignment with local schools, colleges and other partners makes healthcare careers more tangible, local and accessible.
- Partnering schools, colleges and other community partnerships with a local hub, fosters a localised strategy and a deeper understanding of the local opportunities available.



Enhancing local student connections

to retain local talent

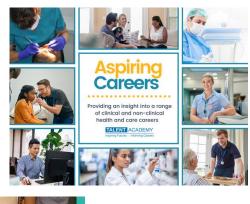
Removal of barriers to engagement through the delivery of a comprehensive one-stop-shop for service users and potential healthcare professionals.

- Remove system fragmentation through a streamlined engagement process, ensuring fair and equitable access to career support services at a local level.
- Prioritisation of engagement with school leavers aged 14 to 25, emphasising the pivotal role of our relationships with schools and colleges in shaping our future workforce.
- Delivery of local activities, tailored workshops aligned with each hospital hub's specialised roles and apprenticeship employment opportunities











Showcasing a diverse range of professions and progression routes in clinical and non-clinical roles delivered by a wide range of health and care specialists



Long Term Workforce Plan: Train...

Collaborative Synergies through existing partnerships

Leveraging existing partnerships for mutual benefit: Utilising shared expertise to generate interest, create local pipeline solutions and feeder programmes that elevate healthcare recruitment and career development.

- Strategic partnerships with local schools, colleges, and other organisations (i.e. DWP)
- Shared common purpose: to support individuals into employment
- Development of a local recruitment initiatives that address local needs, whilst supporting recruitment into the sector
- Continuous connections, adaptable career pathways and creation of employment entry points that support recruitment into the sector



Emerging Talent

Structured development through collaborative delivery

Harnessing local expertise for mutual benefit: Supporting student transition and onward progression through a collaborative delivery model, fostering local engagement.

- Apprenticeship development pathways created for a wide range of occupations by Talent Academy
- Strategic College Collaborative Group created, supporting entry level apprenticeship recruitment and delivery
- Allocation of each college to individual Hospital Hub, removing previous provider competition
- Agreement across all colleges to work in partnership, includes standardisation and alignment of delivery model, and sharing of resource where appropriate



Long Term Workforce Plan: Train, Retain...

Reservists Supporting Workforce

Providing vital support during periods of extreme pressure

Enabling transitional route into health and care careers

- Seek to maintain an average of 100 Reservists
- Total of 16,730 hours deployed since their introduction in October 2022
- · Play a key part of our strike workforce planning
- A number have since moved from Reservist into established positions within the system as a result
- Currently developing a "Care Leaver" pathway in conjunction with Barnardo's Leaving Care service under NHSE contract

Do something of significance that makes a real difference

Join the Lincolnshire NHS Reservists with the flexibility to fit around your work and family life.

Commit just 32 days a year to be part of something amazing.

Join now. www.lincstalentacademy.org.uk/ programmes/lincsreservist



TALENT ACADEMY

Could you be an NHS Reservist?

What ever your background.... #WeAreTheNHS

We're not looking for angels with wings...

Just ordinary people who do extraordinary things...





Purpose:

- Long-term strategy for talent creation - utilising apprenticeships as the vehicle for delivery
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Reaping the Benefits Of Collaboration



Talent Academy Outputs

- Average engagement of circa 21.5k students per year
- Emerging Talent Entry Level Apprenticeship Offer across key occupations
- Dedicated pathways for school and college leavers Over 80 under 18's recruited in last 5 years
- Partnership work across the wider health and care system Clinical staff supporting delivery of T-Levels to bring curriculum "to life"
- Embedded careers & employability service across all schools and colleges within Lincolnshire
- Centralised work experience service Approx. 580 students supported in Lincolnshire each year
- Comprehensive schools education programme in place aligned to Gatsby Benchmark
- T-Level support programme delivery providing direct feeder into apprenticeship offer
- Oversight of our Apprenticeship offer across the county levy and delivery
- Delivery of active Lincolnshire NHS Reservist Programme
- Joint cohort recruitment activity across sector providers
 - Nursing Associate, Registered Nurse and Allied Health Apprenticeships
 - "New to Care" Health Care Support Worker Campaigns

Conclusion

We don't have all the answers.

The permission to "Try" and on occasion "Fail", has supported a high level of innovation.

Our ability to recruit is dependent upon our ability to attract and engage with our local communities.

By reforming our approach and harnessing the local talent that exists locally, we have the ability to attract, train and retain our future workforce.

Our Talent Academy Approach

- Addressing the needs of our local communities
- Strategic alignment within the sector and across the wider community
- Creating a collaborative ecosystem with local colleges and community partners
- Enhancing our community reach
- Improving social mobility





Building a Rural and Coastal Workforce that meets the needs of our Communities



Book now

Is NHS England's EDI improvement plan an effective lever for trusts working as anchor institutions?

Friday 10 May 2024

Our upcoming peer learning event will explore trusts' role as anchor institutions and solutions to address health inequalities within their workforce.



Scan here to access our upcoming events



TIMEQUALITIES

Tell us what you think

Your feedback helps us shape future events.

Please take five minutes to complete our evaluation.



Scan here to access our evaluation





Visit our website

Discover further topics on how to address health inequalities including:

- Anchor institutions
- Partnership and system working
- Approaches for reducing health inequalities
- Embedding prevention









Thank you for attending

Your feedback helps us shape future events.



Scan here to access our evaluation

