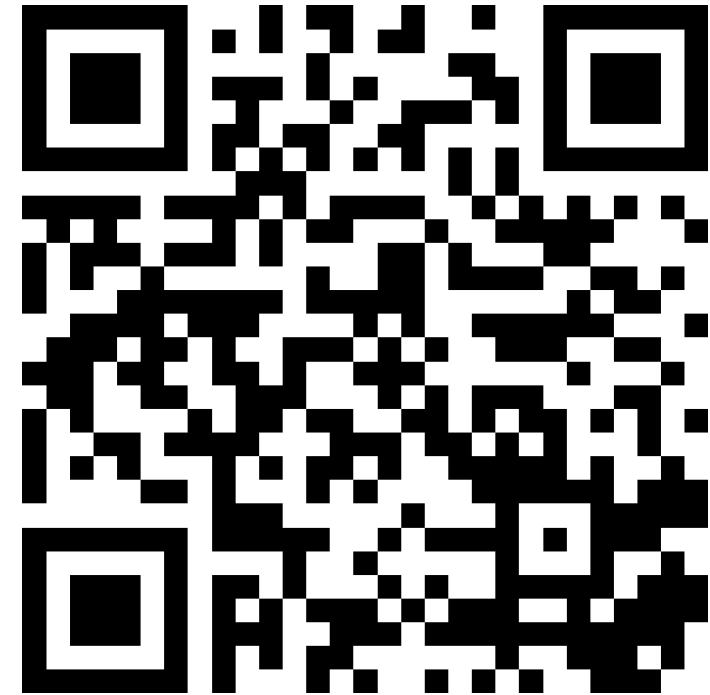


**Study Session: Manager
& Compliance Study
Session: Healthy
Lifestyles
Starting 09.30**

Please tell us where you are
from

Join at [slido.com](https://www.slido.com)

#3322733



Welcome

Study Day: Manager & Compliance Study Session: Healthy Lifestyles

Date: 16th October 2024

This Session will begin shortly





Housekeeping



Please keep your mobiles on silent during the presentations



Exits



Comfort Break



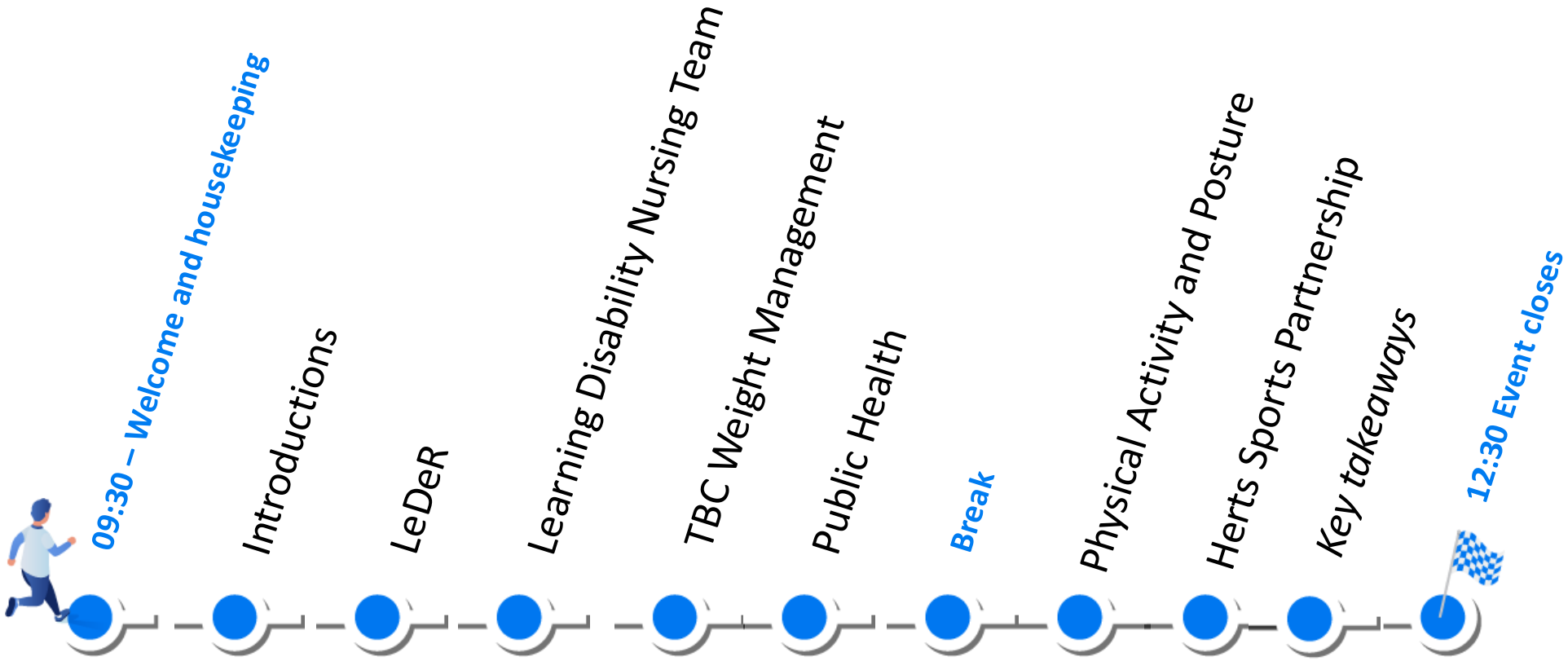
No planned fire drills

Michelle Airey

Head of Education, Quality and Integration



Agenda



What do you hope to get out of today?

Join at
slido.com
#3322733





All Staff Approach

Consistency

Continual Flexibility

Monitoring

Reflection

HCC Connected Lives Principles

Independence and citizenship

Every contact is strength based and risk positive

Think Community

Safeguarding

Clear Understanding of the legal framework for adult social care

Timely and Defensible Decision making and recording

Embed Connected Lives at every step

Working with partners and providers to deliver good outcomes

Support for our staff

Equity, Equality and Culture



Hertfordshire and
West Essex Integrated
Care System



Hertfordshire and
West Essex
Integrated Care Board

LeDeR and Health Inequalities

Healthy Lifestyles Adult Disability Services,

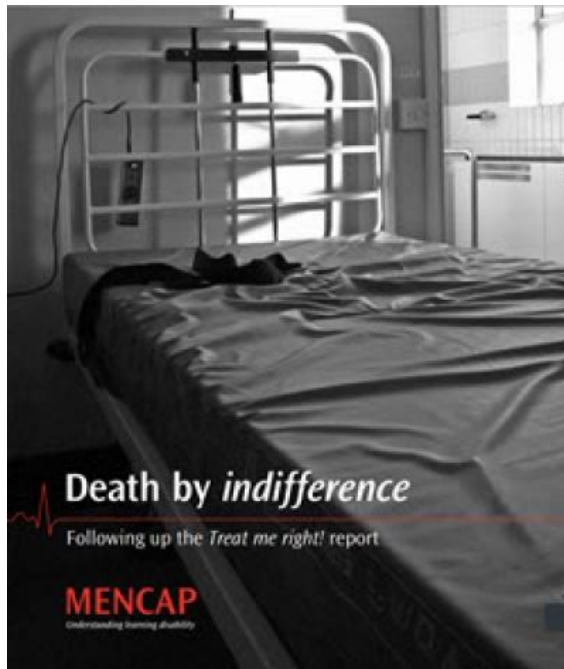
Study Session

Nicola Conlin, Commissioning Manager, Integrated health and
care commissioning team, Hertfordshire County Council

Working together
for a healthier future



LeDeR and health inequalities



- Health inequalities are unfair and avoidable differences in health across the population, and between different groups within society. These include how long people are likely to live, the health conditions they may experience and the care that is available to them.
- The conditions in which we are born, grow, live, work and age can impact our health and wellbeing. These are sometimes referred to as wider determinants of health.

Confidential Inquiry into premature deaths of people with learning disabilities (CIPOLD)

Final report



Pauline Hooper
Peter Blair
Peter Fleming
Matt Houghton
Anna Marshall
Lesley Russ

Department of Health

Six Lives

Progress Report on Healthcare for People with Learning Disabilities



Health Inequalities: National and Local Data

| | National 2022 | Herts 2022-23 |
|--|--|--|
| Median age of death | 62.9 | 61 |
| Male/Female, ethnicity | M 55%/F 45% 94% White British | M 55.4%/F 44.6% 87% White British |
| Avoidable deaths (All deaths in GB 22.8%) | 42% | 43.2% |
| Most common underlying causes ICD-10 Chapter for adults with a learning disability | 1) Diseases of the circulatory system 2) Cancers 3) Diseases of the respiratory system | 1) Diseases of the respiratory system 2) Cancers 3) Diseases of the circulatory system |

Global Majority Communities

- The 'We deserve better: Ethnic minorities with a learning disability and access to healthcare' report revealed people with learning disabilities from Black, Asian, and minoritised ethnic backgrounds face an increased risk of earlier death, at an average age of 34 years.
- The LeDeR 2022 report found that in comparison with those from White ethnic backgrounds, those from Black, Black British, Black Caribbean, or Black African backgrounds faced a 190% increased risk of dying earlier while those from Asian or Asian British backgrounds faced a 150% increased risk.

Autistic Individuals

- Reviewing the deaths of autistic adults was added to the LeDeR programme as part of the LeDeR policy 2021 and implemented 2022.
- Since then, there has been a low number of notifications of deaths, limiting our learning and understanding about health inequalities and key themes for this population. The following data is from the LeDeR National report 2022, but may not be representative due to the limited data size.
- The median age at death for autistic adults with a learning disability was 55 years.
- 91% of autistic adults without a learning disability were denoted as white; 81% were male and 19% female; and suicide, misadventure or accidental death was the most frequent underlying cause of death.



Health Inequalities: Some key barriers

Diagnostic Overshadowing: Health issues can be wrongly attributed to an individual's learning disability, leading to delayed diagnosis.

Communication: Lack of accessible information and communication.

Professionals Knowledge and Understanding: Lack of understanding about the needs of people with learning disabilities and autistic people.

Accessibility Issues: A lack of reasonable adjustments to accommodate the needs of people with learning disabilities and autistic people, (including physical barriers in healthcare settings).

Lack of support/care coordination: Insufficient support for individuals and those closest to them to navigate the healthcare system.

Socioeconomic Factors: Higher levels of poverty and social exclusion among people with learning disabilities, impacting their overall health and access to care.



Examples of local learning into action

- Ensuring Children and Young People are identified and added to Learning Disability GP register and Improving quality of Annual Health Checks. Developing and sharing resources for this population.
- Support provided by specialist teams: Learning Disability Nursing Service, speech and language therapy, physiotherapy, key health messages by Purple All Stars.
- Health Equality Nurses: supporting increased uptake of cancer screening and Annual Health Checks and supporting STOMP (Stopping Over Medication of People with a Learning Disability, Autism, or both).
- Promoting every contact counts: Promotion of Purple Folders and use of these across different settings, vaccinations, AHCs etc.
- Ask, Listen, Do: NHS principles based on listening to people themselves and those closest to them.
- System wide compliance with Reasonable Adjustment Digital Flag Standard and Accessible Communication Standard.
- Health and Social Care Learning Disability and Autism Awareness Mandatory Training: Oliver McGowan.
- Care Coordination and Multi-Disciplinary Team Working.



Hertfordshire and
West Essex Integrated
Care System



Healthy Lives and Health Inequalities

- **General population issue:** PHE 2020 to 2025 strategy highlights poor diets and excess body weight deprive people in England of more than 2.4 million life years through premature mortality, illness and disability each year.
- **People with learning disabilities are at increased risk** compared to the general population: While a smaller proportion are classified as 'overweight' compared to the general population, a significantly higher proportion fall into the 'obese' category. Specifically, 37% of people with learning disabilities are obese, compared to 30.1% of people without learning disabilities.
- **The broader social determinants of health** play a significant role in the well-being of people with learning disabilities. Factors such as poverty, poor housing, and social isolation are disproportionately experienced by this group, exacerbating health inequalities. Poorly balanced diets and low levels of physical activity, can further impact on health.
- **Greater risk of many health problems:** heart disease, high blood pressure, strokes, diabetes, several types of cancer, mobility difficulties.



Hertfordshire and
West Essex Integrated
Care System



Local Learning from LeDeR Reviews – Weight Management Support

- Identified as a priority area for the Hertfordshire LeDeR Leadership group after the prevalence of high BMI was noted in reviews.
- 5 focused reviews of individuals with high BMI were completed and themes identified.
- The reviews indicated a gap in successful approaches to achieving and managing a healthy weight.
 - Understanding and health literacy about the impact of weight on health
 - Referral to weight management support/dietetics
 - Reasonable adjustments to ensure effectiveness of support: discharge after DNA, lack of follow up support, ongoing oversight, tailored resources
 - Collaborative working: individual, family, social care, GP, specialist services
- Action: Learning shared with the Improving Health Outcomes Group (IHOG) and a working group established to analyse the learning and propose areas for service improvement.



Hertfordshire and
West Essex Integrated
Care System



Weight Management Support: Workstream Areas



Access to effective weight management approaches – healthy lifestyles support (diet and physical exercise).



Support for individuals, families and carers, and professionals – information and resources.



Specialist services support – Tier 2 and Tier 3, nutrition/dietetics, also impact of prescribing and proactive consideration of medication and weight gain.



Primary Care - Role of Annual Health Checks.



Hertfordshire and
West Essex Integrated
Care System





Community Learning Disability Nursing Service

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Elisa.farrell@hertfordshire.gov.uk

Minal.patel@hertfordshire.gov.uk



Group Discussion

**Each of you think of one
person you support and
discuss in your group WHY
you think they overeat?**



Group Discussion

What are your personal beliefs on what is a healthy diet and weight?

Consider things like:

- Cultural beliefs
 - Upbringing
 - Personal views on what is overweight
 - Personal views on what is healthy and not healthy to eat



Group Discussion

How can you help people make less unwise choices?

What are the barriers or issues you face when helping them make less unwise choices?

Carers Guide to Helping People With Learning Disabilities Tackle Obesity

This is a guide for Carers, family, friends and professionals on how they can help people with learning disabilities tackle obesity.

They may have been professionally advised to diet but are reluctant to follow that professional advice.

They may have shown that they have the mental capacity to make unwise choices, but we still have a duty of care to help them to make LESS unwise choices.

People with a learning disability die an average of 25 years younger than the rest of the population and obesity is one of the identified leading causes of death. Your help could be that difference.

Following a diet and losing weight is challenging for everyone. Even with an active and full life and with the support of our loved ones it can be impossibly challenging, and we often make unwise choices. This is especially when we are bored, feel down, have low self-esteem, have no sense of value or worth or if we have nobody or no future event to incentivise us.

People with learning disabilities that you support may have the capacity to make unwise decisions about their diet, so how can you help them feel incentivised to make less unwise choices?

Here are some examples of changes that have been tried and succeeded with people with learning disabilities.

Not all will work with everyone, we are all our own person, but all are worth considering.



Safety in numbers - tackling weight loss together is always a great incentive. Are there members of the care team or family who may also benefit from losing weight? Joining WW or Slimming World together can really help. You can share your achievement, talk Syns or Points together and even set in-house competitions on who will lose the most that week. You can put up a chart and name each week who lost the most? You can either go to the slimming clubs together or join on line and then have a weekly weigh in together at home.

Make it a reality - we can all look in the mirror and convince ourselves we haven't gained that much. Download the weight charts with the BMI guide from the LDMYHEALTH web page. And show them exactly where they are on that chart. If they are in the morbidly obese zone explain the morbid means death and that means their weight is putting them at risk of dying from it. Explain how the fat on their tummy, etc is also going to be around their heart, so is meaning they are at risk of heart attack, etc. Use this to explain how you CARE and are telling them because you want to find a way to help them get their weight down into a healthy place because you don't want to watch them keep gaining weight and not living a full life.



Bite size chunks - if someone has a large amount of weight to lose, break it down into portions. First work out what they need to lose to get from morbidly obese to obese and celebrate! Then set the next target. We all work best with achievable targets and rewards - you could even create your own certificates and do an in-house award ceremony.

Making food decisions visual - if you support someone with doing their food shop online or in person, learn how many WW points or Slimming World syns are in all of the food they like versus the better alternatives. Use sugar cubes or blocks of butter to show them visually how much sugar or fat is in their unwise food decision versus the amount in the healthier alternative option. You can also make it visual by showing them using marbles or beads exactly how many points / syns each one has so they can see just how unwise that choice is.



Healthy swaps - make a list of their preferences for naughty foods and help them create a list of healthy swaps. Make this visual by drawing the number of syns/points for each option but being positive about what they can have instead.

What does CQC say?

Regulation 14: Meeting nutritional and hydration needs

(4)(a) receipt by a service user of suitable and nutritious food and hydration which is adequate to sustain life and good health

Where a person is assessed as needing a specific diet, this must be provided in line with that assessment. Nutritional and hydration intake should be monitored and recorded to prevent unnecessary dehydration, weight loss or weight gain. Action must be taken without delay to address any concerns.

“It’s their choice”

What does the Mental Capacity Act (2005) say?

A person is unable to “make a decision” if they cannot understand, retain, use, and weigh up information and communicate their decision.

Additionally, although the law states we should assume a person has capacity, if they have a Learning Disability, we have a duty to check the level of their capacity and that they fully understand the risks.

Gavin Howcroft's Story

Expert by Experience

Think about the person you identified, what else will you do now?

- Education - use of apps, easy reads
- Shopping, preparing and making meals
- Snacking in between meals
- Eating out
- Portion size
- Keeping records
- Movement
- Social life
- Emotional wellbeing
- Annual Health Check & ongoing reviews
- Medication reviews



How to make referrals

0-25 CLDN:

0-25.ldnursing@hertfordshire.gov.uk

CLDN:

<https://hcsportal.hertfordshire.gov.uk/web/portal/pages/home>

Help with your health

Information for people with learning disabilities, their family and carers, and professionals.



Your Purple Folder



How to stay healthy



Information for professionals



The Purple All Stars



Learning Disability Nursing Service



Purple Star health services for people with learning disabilities



Annual health checks and help from your GP



Help for people aged 11-18

www.hertfordshire.gov.uk/LDmyhealth





Weight Checking

[Easy read: Obesity health risks guide \(PDF 592Kb\)](#)

Being overweight or obese can cause lots of health problems, this is why it is very important to stay a healthy weight. - [here is some information about those health problems.](#)

Keeping a record of your weight is very important because weight changes can be because of a health problem. Tell the doctor if your weight changes.

[Here is a recording chart to keep a check on your weight and see if you are a healthy weight.](#)

[Here is some information for carers about how to weigh people who are in wheelchairs.](#)

[Here is link to an NHS site which tells you whether you are a healthy weight](#)

[Carer's Guide: Tackle Obesity](#)

Information for carers to help you take some small steps to become a healthier weight.

www.hertfordshire.gov.uk/LDweightcheck

Ben – DoLS and Prader-Willi Syndrome



Ben has learning disabilities and Prader-Willi syndrome. There are concerns about his health because his weight has been increasing steadily and now stands at 120kg.

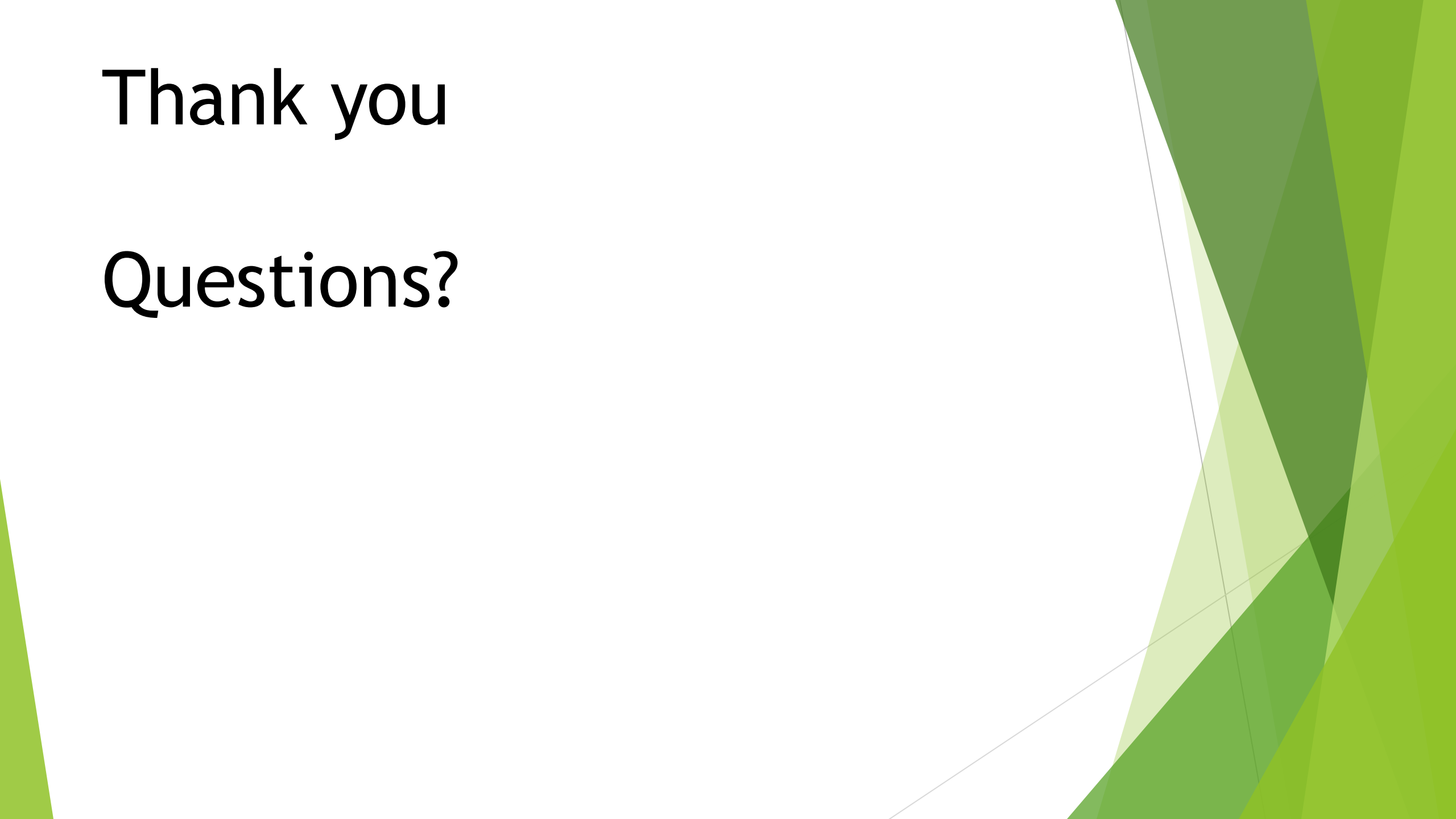
Staff in his residential home have tried to support Ben to limit what he eats and to make healthy choices but with little effect.

Ben has been assessed as lacking capacity to make decisions about the amount and type of food he eats (this is common among people with Prader-Willi syndrome). It has been proposed that it is in Ben's best interests to stop him going into the kitchen, and always supervising him when out, to prevent him spending all his money on, or stealing, food. An application is made by the home manager for standard authorisation because they believe that the restrictions would deprive Ben of his liberty.

<https://www.scie.org.uk/mca/dols/practice/examples/>

Thank you

Questions?





Hertfordshire's New Integrated Tier 2 and Tier 3 Adult Weight Management Service

Funded by Public Health and the NHS. Commissioned by Hertfordshire County Council and the Hertfordshire and West Essex ICB.

Delivered by



WEBSITE:

www.tbchealthcare.co.uk



- Providers of specialist weight management services since 2009.
- Evidence based NICE compliant interventions.
- Multi-disciplinary pathways including psychological led behaviour change, dietetics, activity.
- CQC registered, DTAC compliant, Safeguarding framework to ensure safe delivery.



Focus on Prevention



- Each service user will have the opportunity to be signposted to the most appropriate part of the overall weight management pathway.
- They will be supported in creating a care plan that embraces every opportunity within the wider community to develop a long term support package that fits in with their lifestyle and specific needs.
- Focus on identified priority groups taking into account levels of adversity, religious/cultural preferences and additional needs.
- The goal is to reduce health inequalities across the county by putting inclusivity at the heart of our service.



Eligibility Criteria

- Adults aged 18 years and above
- Live in Hertfordshire and/or registered with a Hertfordshire GP
- Have a BMI ≥ 30 OR BMI ≥ 27.5 for ethnic minority communities and those with associated co-morbidities
- Have not attended and completed a free 12-week course in the past 12 months (incl. Shape Up, Oviva or Slimming World, National Diabetes Prevention Programme or Digital Weight Management Programme)



My Healthy Weight (Tier 2) is a 14-week healthy lifestyle programme that combines diet and nutrition with activity and cognitive behaviour therapy (CBT) behaviour change. It is delivered to groups of up to 15 participants either face-to-face in a community setting or via MS Teams by a team of Health Advisors with weight check-ins. Participants will receive weekly handouts and worksheets they can use to map their progress and set goals. They will also have access to an e-learning programme and digital portal with a follow-ups for up to a year.



It is a multi-disciplinary specialist delivered by a clinical team of psychologists, dietetics and exercise specialists for those with a higher BMI and associated co-morbidities. The initial intensive 12-week phase includes psychological-led behaviour change to understand the relationship with food, underlying triggers to emotional eating and how to manage change. There are regular sessions with a specialist dietician, bespoke exercise planning and a maintenance plan for 9-months with follow-ups for up to 24-months.



It is a tailored programme, working alongside midwifery teams to meet the needs of pregnant women both pre-conception, and pre/post-natal to ensure they maintain a healthy weight. The programme will support women for up to 1 year and will include input from a specialist maternity dietician and weekly healthy lifestyle sessions with a dedicated health advisor.

Priority Group Engagement

We welcome referrals from priority groups.

- Ethnic minority populations
- Special Educational Needs and Disabilities (SEND)
- Men
- Serious Mental Illness (SMI)
- Those from identified areas of deprivation
- Women either pre or post natal and those living with overweight seeking to become pregnant.

The service has been designed to offer inclusive interventions tailored to meet the needs of the individual.

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Tailored Interventions

- Cultural and religious considerations in Dietetic component.
- Culturally appropriate images and language.
- Single-sex behaviour change groups.
- Activity tailored to meet cultural needs.
- Material is available in various languages, visual and verbal.
- The workforce reflects the community.



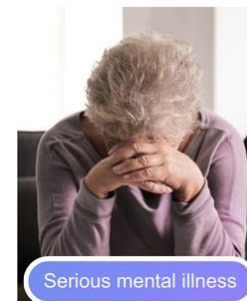
Tailored Interventions

- Work with each individual to tailor the pathway to the type of disability.
- Have a dedicated SEND phone line and care coordinator.
- Involve the service user and support team in the care plan.
- Provide accessible content images/format.
- Domiciliary visits are available if required.



Tailored Interventions

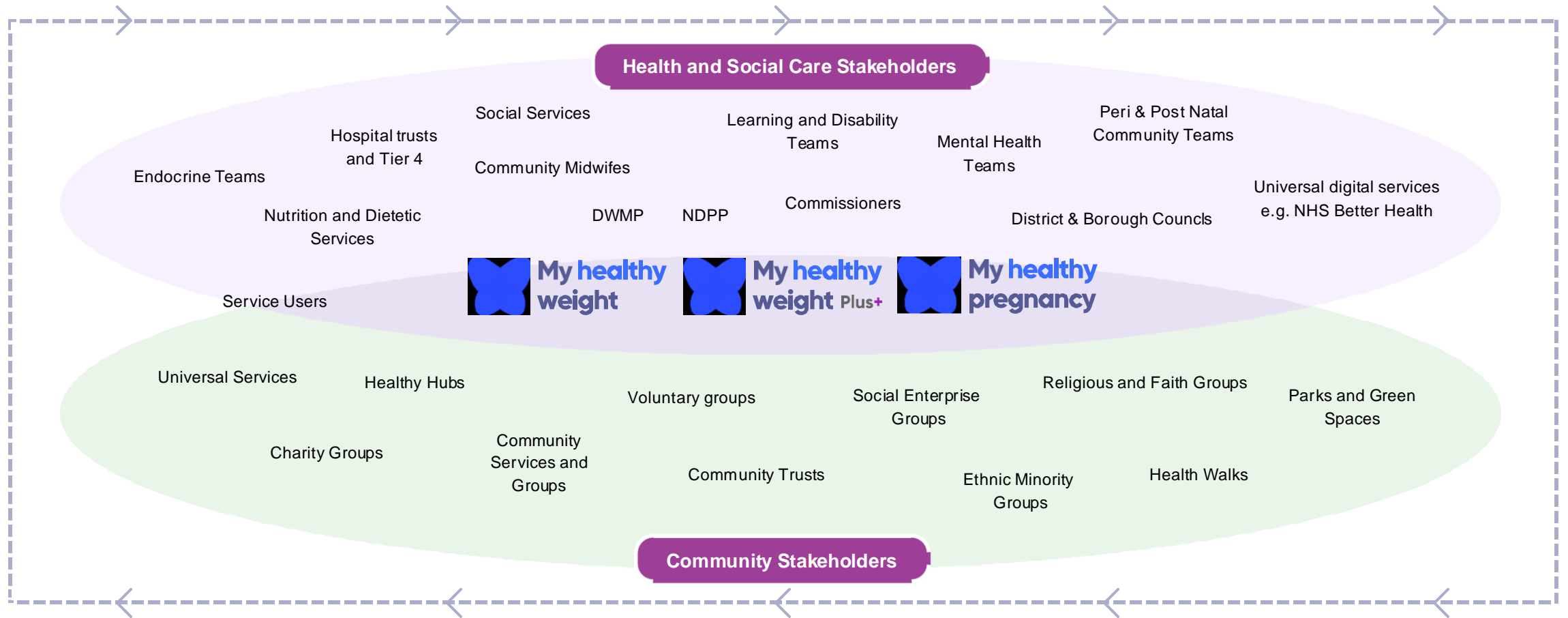
- Male-only groups for behaviour change.
- Male representation in all content both images and language.
- The overall message is improved health rather than just weight loss.
- Work to increase involvement with community groups like Watford FC Community Trust.
- Emphasise a good health message.



Tailored Interventions

- Maintaining mental health stability is critical.
- Work closely with GP and MH Teams for joined-up care.
- one-2-one behaviour change intervention recommended.
- Diet plan to consider psychotropic medication.
- Provide realistic appt times (avoid bust times)
- Target increased activity to improve mood.

Pathway Stakeholders Map



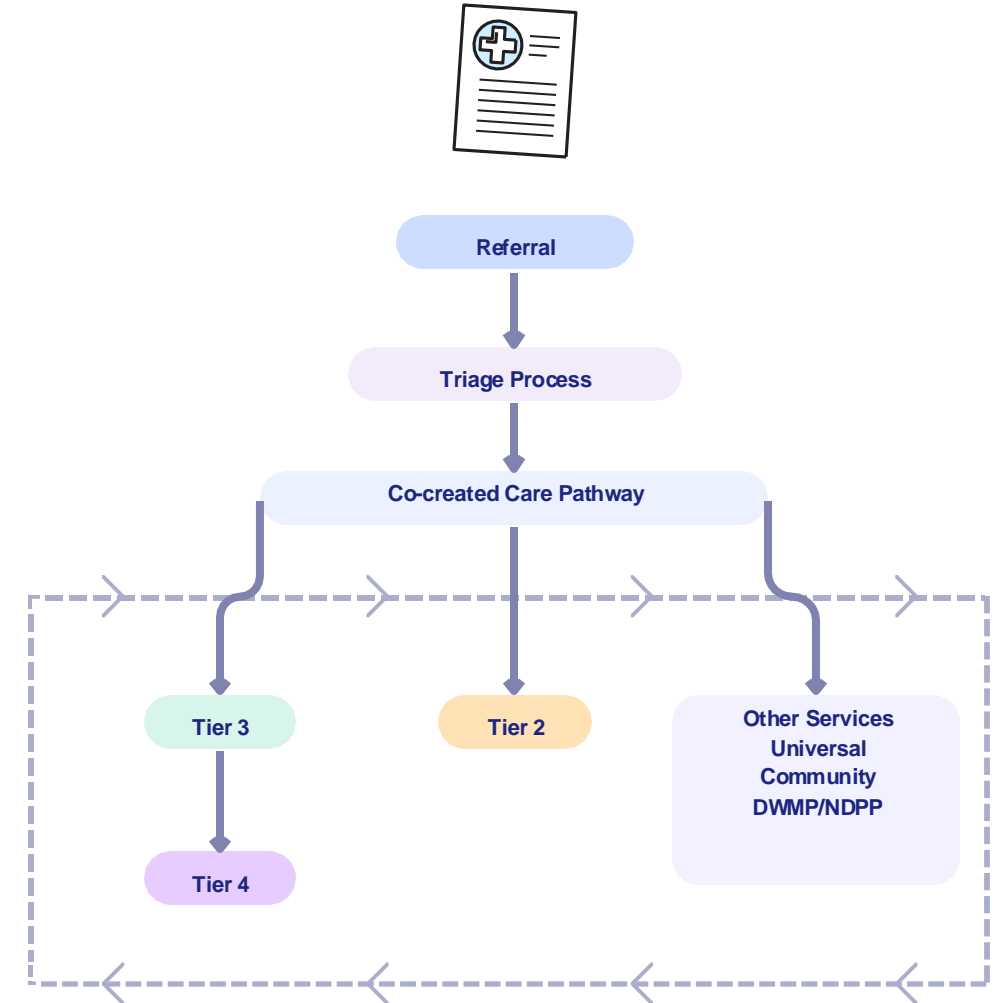
Fully Integrated Service

The service will have a single point of entry.
An initial triage will determine the pathway (detailed opposite).

The triage process:

- Referral received from GP, other stakeholders, or self-referrals. Contact will be made within one week.
- Referrals will undergo an initial triage by the care team.
- Tier 2 referrals will each be allocated to a dedicated Health Advisor who will work with the individual to co-create a treatment plan.
- Tier 3 patients will continue through an in-depth assessment process.
- Goals will be agreed and set with each individual.

We operate a “no wrong door” policy and individuals who are unable to engage will be signposted to more appropriate interventions and the referrer informed.



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Integrated Tier 2 and Tier 3 Adult Weight Management Service for Hertfordshire

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Tier 2 Pathway

Healthy lifestyle programme that combines diet and nutrition with activity and CBT behaviour change.

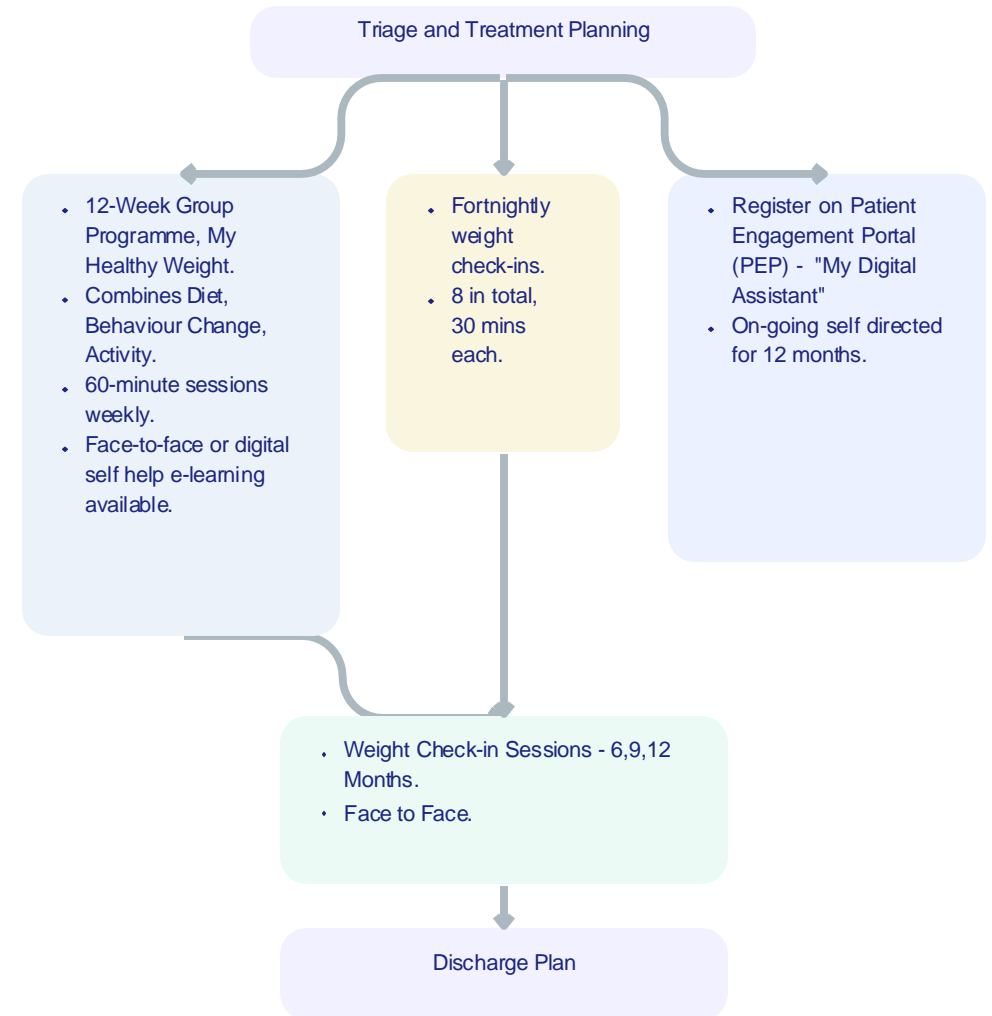
- Delivered to groups of up to 15 participants.
- Delivered by a team of Health Advisors.
- Service will be face-to-face in community settings, or by Teams.
- Regular weight check-ins will be run in community locations.

Participants will be provided with group material in the form of weekly handouts and worksheets they can use to map progress and set goals.

They will also have access to our e-learning programme and digital portal.

Follow-up will be for up to one-year.

Overview of Tier 2 Pathway 14 weeks with follow-up 6,9,12 months.

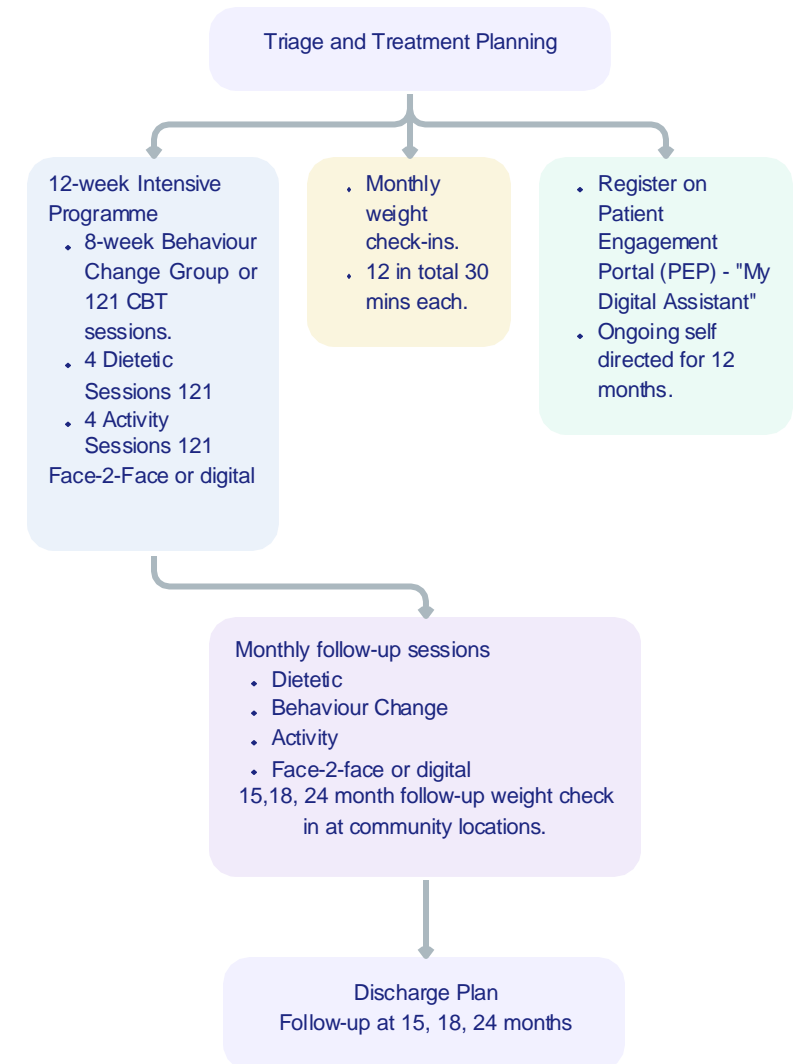


Tier 3 Pathway

A specialist multi-disciplinary pathway delivered by the Clinical team for individuals with higher BMIs.

- Treatment starts with an intensive phase of 12-weeks that includes a psychologically led behaviour change intervention to help individuals understand their relationship to food, and underlying triggers to emotional eating and how to manage change.
- Regular sessions with a dedicated specialist dietician.
- Bespoke exercise/activity plan co created with our activity specialist.
- Maintenance plan for nine-months.
- Follow-up for up to 24 months.

Overview of Tier 3 Pathway 12-months with follow-up 15,18 and 24 months



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Tier 3-4 Transition

Individuals wishing to seek a referral for bariatric surgery must complete Tier 3 and achieve the agreed goals set at the start of treatment. Prior to onward referral to Tier 4 all patients will be fully prepared for surgery by attending a “Weight Loss Surgery Wellness Seminar” and completing the surgery preparation workbook or e- learning course.

TBC will handle the preparation of all handover documentation and their GP kept fully informed.

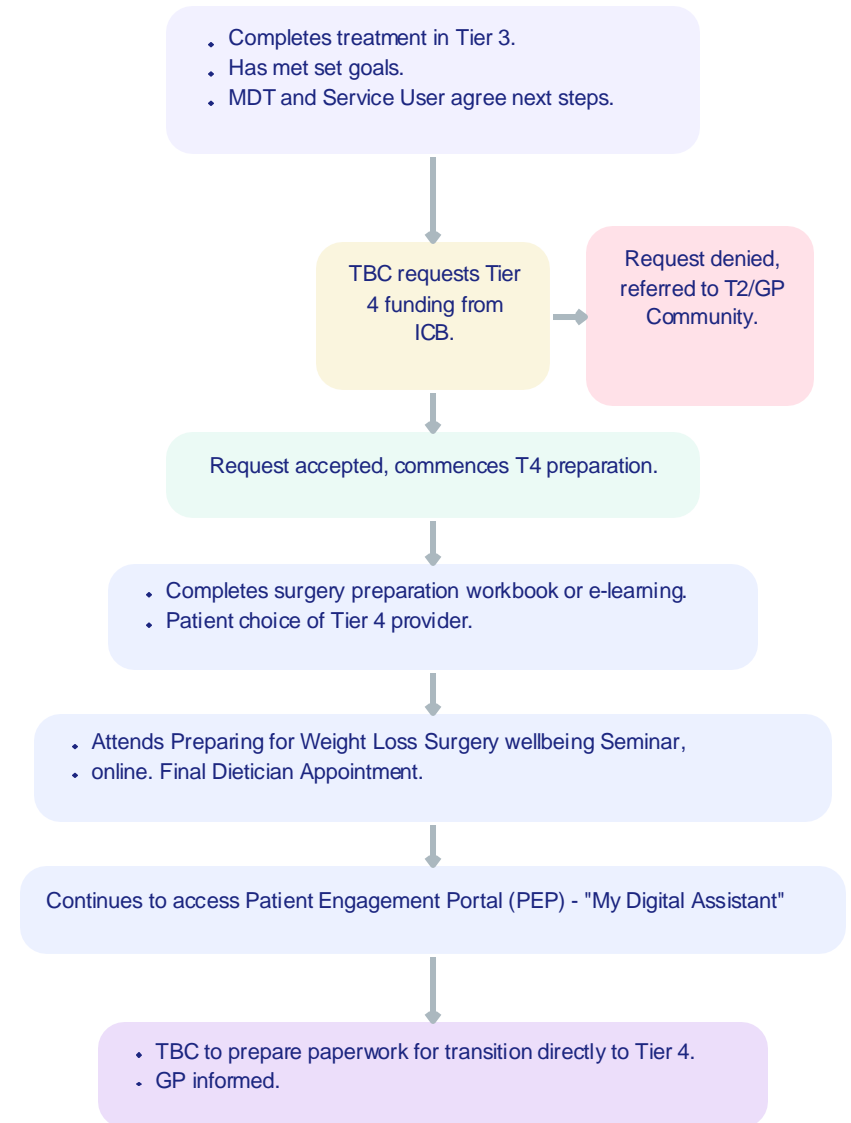
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Overview of Tier 3-4 Transition Pathway



Pre and Post Natal Pathway

New service for women looking to achieve a healthy weight pre and post-natal and for those planning a pregnancy who are wanting to manage their weight.

Eligibility criteria:

Women with a BMI greater than or equal to 40 kg/m²

• BMI of $\geq 37.5 \text{ kg/m}^2$ for individuals of Black African, African-

Planning a pregnancy

• BMI $\geq 30 \text{ kg/m}^2$

• BMI of $\geq 27.5 \text{ kg/m}^2$ for individuals of Black African, Black Caribbean, and Asian descent. is permissible due to their heightened vulnerability to conditions like type 2 diabetes at a lower BMI.

Tailored Treatment Plan Including

- Consultation with Maternity Dietitian and Activity Specialist
- Dedicated Health Advisor
- Healthy Lifestyle sessions
- Weight drop-in in community locations

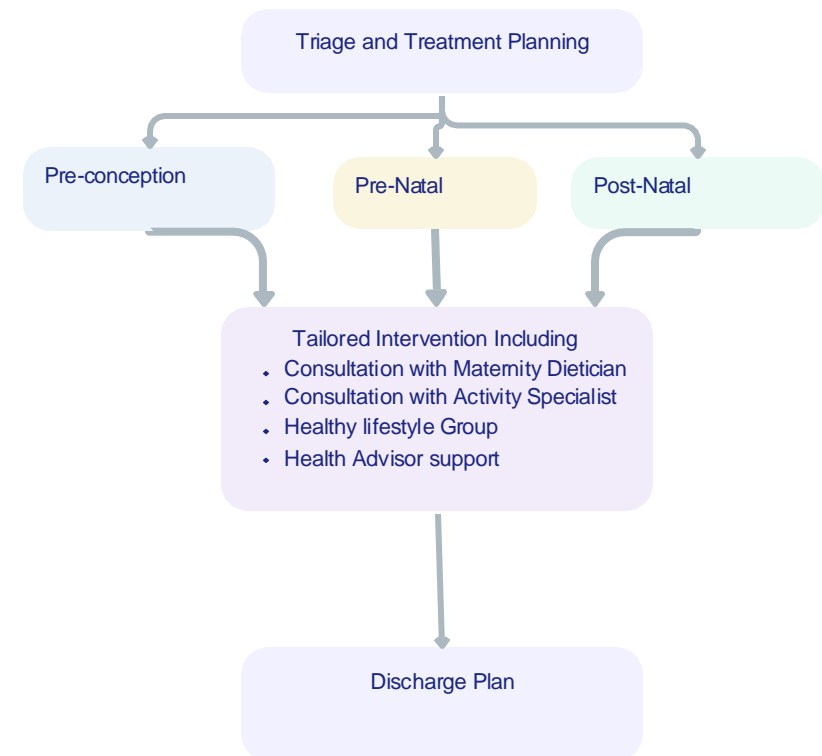
Ongoing support by TBC and close liaison with Community Midwife Teams

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Overview of Pre and Post Natal Pathway



My Digital Assistant Portal

All patients both Tier 2-3 will have access to the My Digital Assistant TBC dedicated online portal.

Tier 2 will have access for 24 weeks
Tier 3 will have access for one-year.

The portal offers a library of information and worksheets, educational short films and 'digital' drop in Q&A sessions with the team.

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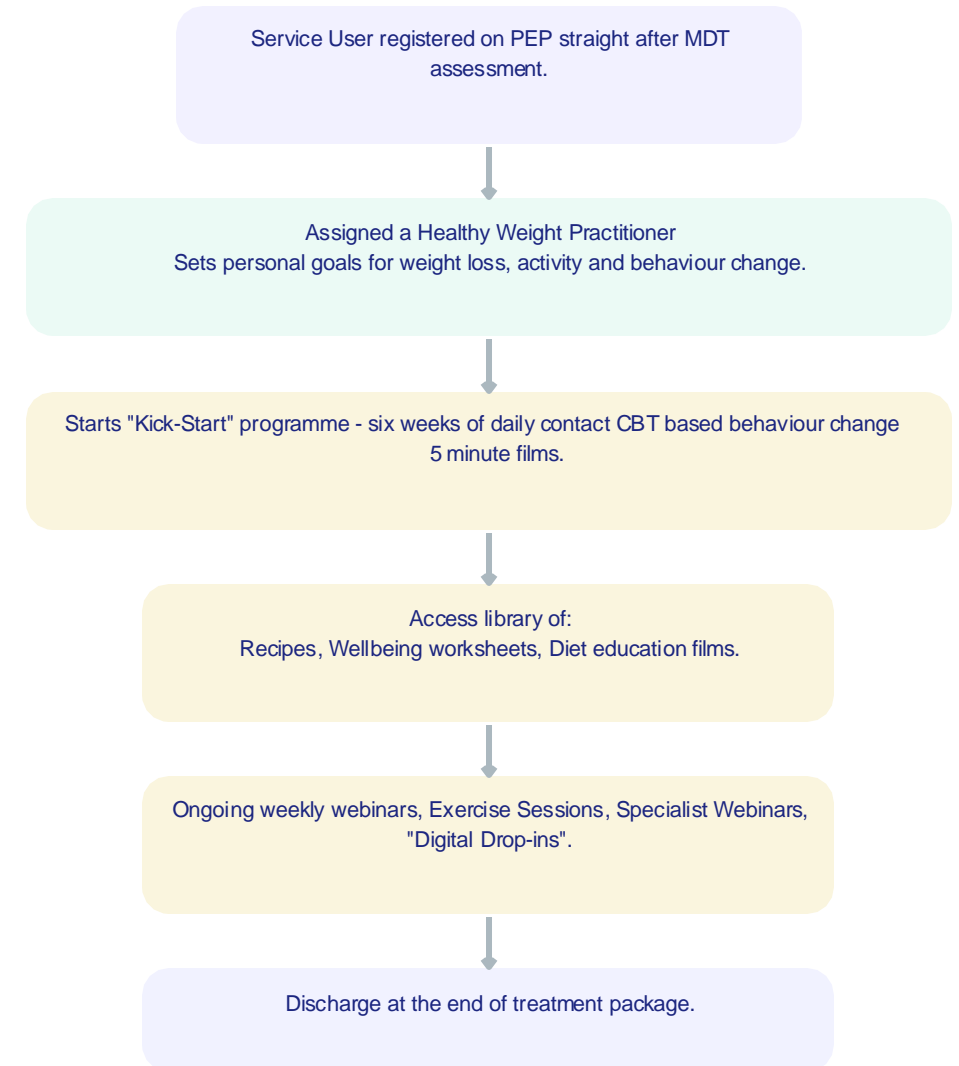
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Overview of "My Digital Assistant" Patient Engagement Portal

Please refer to pathway for full and detailed description of each component.



Community Integrated Service



Hertfordshire has a wealth of opportunities within the community for service users to access long-term support specific to their needs.

The new integrated service will link in with this network and develop strong referral pathways into and out of the services.

We will work with each individual to develop a plan for ongoing support in their local area.

The grid contains the following logos and services:

- Communities 1st** (Working with you to make a bigger difference)
- Communities 1st Wellbeing Support** (Connecting you with help and wellbeing services)
- Making a Difference** (Empowering local volunteering)
- Partnership Projects**
- C.1st Centre for Voluntary Service** (for the districts of St Albans and Hertsmere)
- Communities 1st Volunteer Centre** (helping you to make a bigger difference, St Albans, Hertsmere, Broxbourne and East Herts)
- Community Help Hertfordshire**
- Volunteering Herts CIC**
- National Academy for Social Prescribing**
- VCS Emergencies Partnership**
- Vision for Volunteering**
- NHS CORE20 PLUS 5**
- Warm Welcome Hubs**
- Small Group Support & Development**
- Stronger Together Networks**
- Support**
- Representation**
- Working in partnership**
- Funding advice & opportunities**
- Better Business** (Linking Business with the Community)
- Inspire** (Communities 1st programme, Linking Education, Business and the Community)
- Able2Enable**
- Let's give**
- Multiply**
- Adult Skills and Community Learning** (Communities 1st, Bringing value into training and learning, mobility)
- Volunteering Herts CIC**
- The New River Line**
- Abbey Line** (Community Risk Partnership)
- your Community Hub**
- Activities and Events** (What's happening every day)
- Out and About with Communities 1st**
- Learn My Way**
- Healthy hub Hertsmere**
- Healthy hub St Albans District**
- Aycliffe Road Craft Centre**
- Travel Link** (C.1st Travel Link)
- BETTER DAYS Hubs** (have a good day every day)
- Handyperson Service** (Communities 1st Learning, Education, St Albans & Broxbourne Hertfordshire) (Gardening • Handy Person Housekeeping • Painting & Decorating)
- Peer-to-peer Support Groups**
- NHS Nurse Buddies** (Communities 1st and Education Service working in partnership with the NHS Constellation Programme)
- Our Health Matters**
- Compassionate Community Connectors**
- Choice for all** (Inclusion at the heart of the community)
- Community Information Champions**
- Computers and a Cuppa**
- Companion Call** (Communities 1st)
- Meet and Eat Cookery Group**
- Litter Picking**
- Event Stewards**
- NO PLACE LIKE HOME** (Communities 1st Sensory Garden Gardening Club)
- Aberford Community Centre Bowls**
- Fillmore Centre**
- Organ Hall**
- Windsor Hall**
- Fariers Way Community Centre**
- Aberford Community Centre**
- DBS CHECKS**
- Networking & Communications**
- ID Badges**
- Bookkeeping**
- Website Design & Hosting**

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Service Delivery



Service delivery will be primarily be face to face in community locations. Digital sessions will also be available.

The Service head office will be based in Welwyn.

The service will start from September 1st.

Healthy Lifestyle groups will run in community locations across all ten districts.

Tier 3 clinics will be based in GP surgeries across all localities.



Priority Group Mapping



Localities target for specific groups

Overweight & living with obesity

- Stevenage
- Hertsmere
- Welwyn/Hatfield
- Broxbourne

Ethnic minority populations

- Hertsmere
- Watford
- Three Rivers
- Welwyn/Hatfield

Living with urban adversity

- Stevenage
- Hertsmere
- Welwyn/Hatfield
- Broxbourne

All other populations including SEND and Pregnancy

- Hertsmere
- Watford
- Three Rivers
- Welwyn/Hatfield

Hertfordshire Service Delivery Locality Mapping

- Priority for deprivation
- ◆ Priority for overweight
- ▲ Priority for ethnic minority

| | | |
|---|--|--|
| Broxbourne Urban adversity 31.5% Overweight 63.5% Ethnic Profile 32.8% ● ◆ ▲ | Welwyn Hatfield Urban adversity 31.5% Overweight 63.5% Ethnic Profile 32.8% ● ◆ ▲ | Hertsmere Urban adversity 10.6% Overweight 64.6% Ethnic Profile 36.9% ◆ ▲ |
| Stevenage Urban adversity 16% Overweight 70.3% Ethnic Profile 24.7% ● ◆ | Three Rivers Urban adversity 7.0% Overweight 60.8% Ethnic Profile 32% ▲ | Watford Urban adversity 11.10% Overweight 59.3% Ethnic Profile 54.2% ▲ |
| Dacorum Urban adversity 8.5% Overweight 61.3% Ethnic Profile 21.3% | East Hertfordshire Urban adversity 4.7% Overweight 53.6% Ethnic Profile 15.3% | North Hertfordshire Urban adversity 9.2% Overweight 61.2% Ethnic Profile 26.5% |
| St Albans Urban adversity 6.2% Overweight 56.7% Ethnic Profile 26.5% | | |

(Censuses, 2021)

Six out of Ten residents of Hertfordshire are overweight or living with obesity.

This map identifies the priority areas for engagement.

Referral



- Integrated pathway referral form to be completed and sent via secure email to tbc.healthcare@hertfordshire.gov.uk
- Referral form will be available via EMIS/System One/Ardens
- There will be a self referral option from 1st September via the link on the Hertfordshire My Healthy Weight page, or TBC Healthcare's Hertfordshire page.

Telephone queries can be made via our Patient Care Team on 01707 242 188

From Sept 1st 01707 242 188 or by emailing Hertfordshire@tbchealthcare.co.uk

We also offer information sessions via Teams as well as tailored training around overweight and obesity to stakeholders.

Delivered by  **TBCHEALTHCARE**

Integrated Tier 2 and Tier 3 Adult Weight Management Service for Hertfordshire



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The Vision

Our vision is to empower, inspire and motivate residents of Hertfordshire to lead a healthy and fulfilling life.

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Let's be healthy!

Delivered by  TBCHEALTHCARE

Integrated Tier 2 and Tier 3 Adult Weight Management Service for Hertfordshire



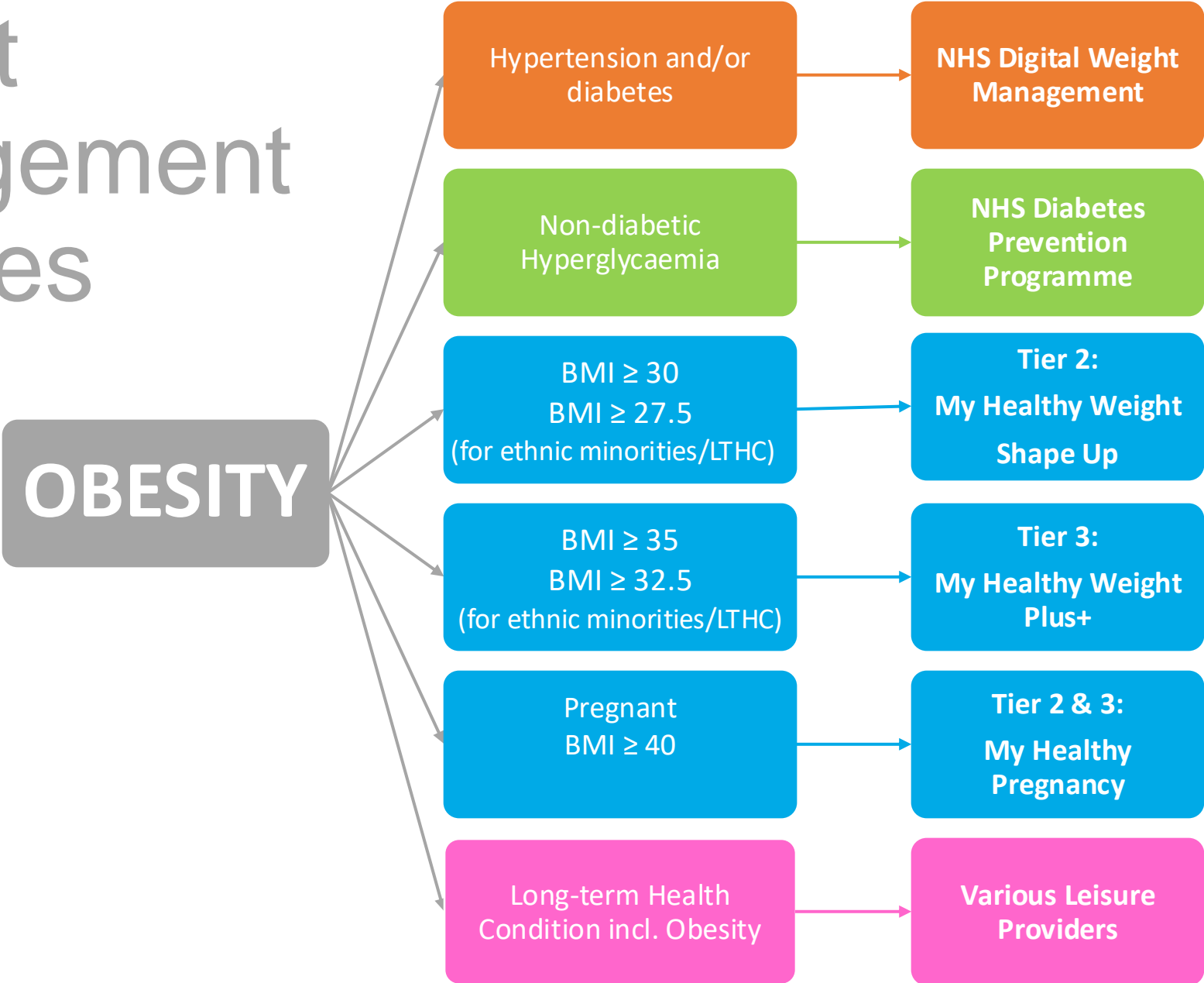
An Overview of Tier 2 Adult Weight Management Services

including Exercise referrals

Claudette Rhiney, Health Improvement Coordinator
Adult Health Improvement, Public Health

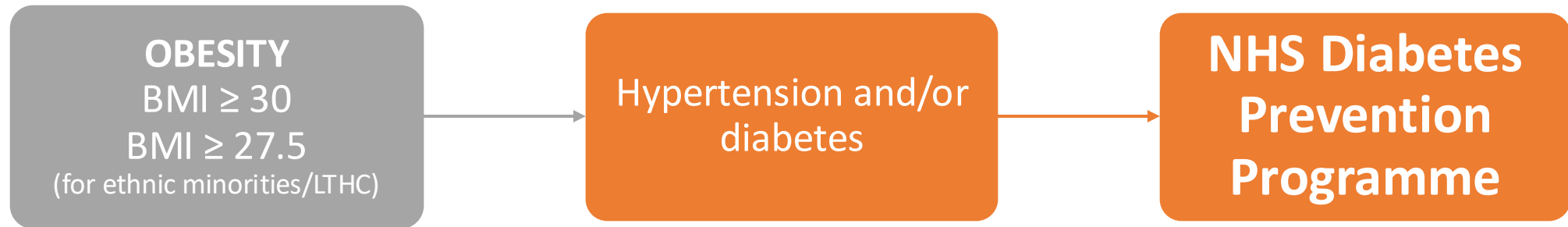


Weight Management Services



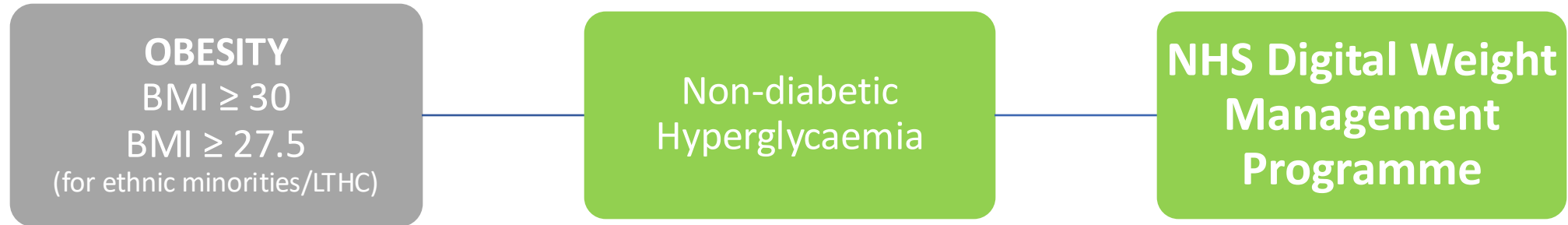
National Digital Weight Management Programme

Choice of 3 providers at each level:



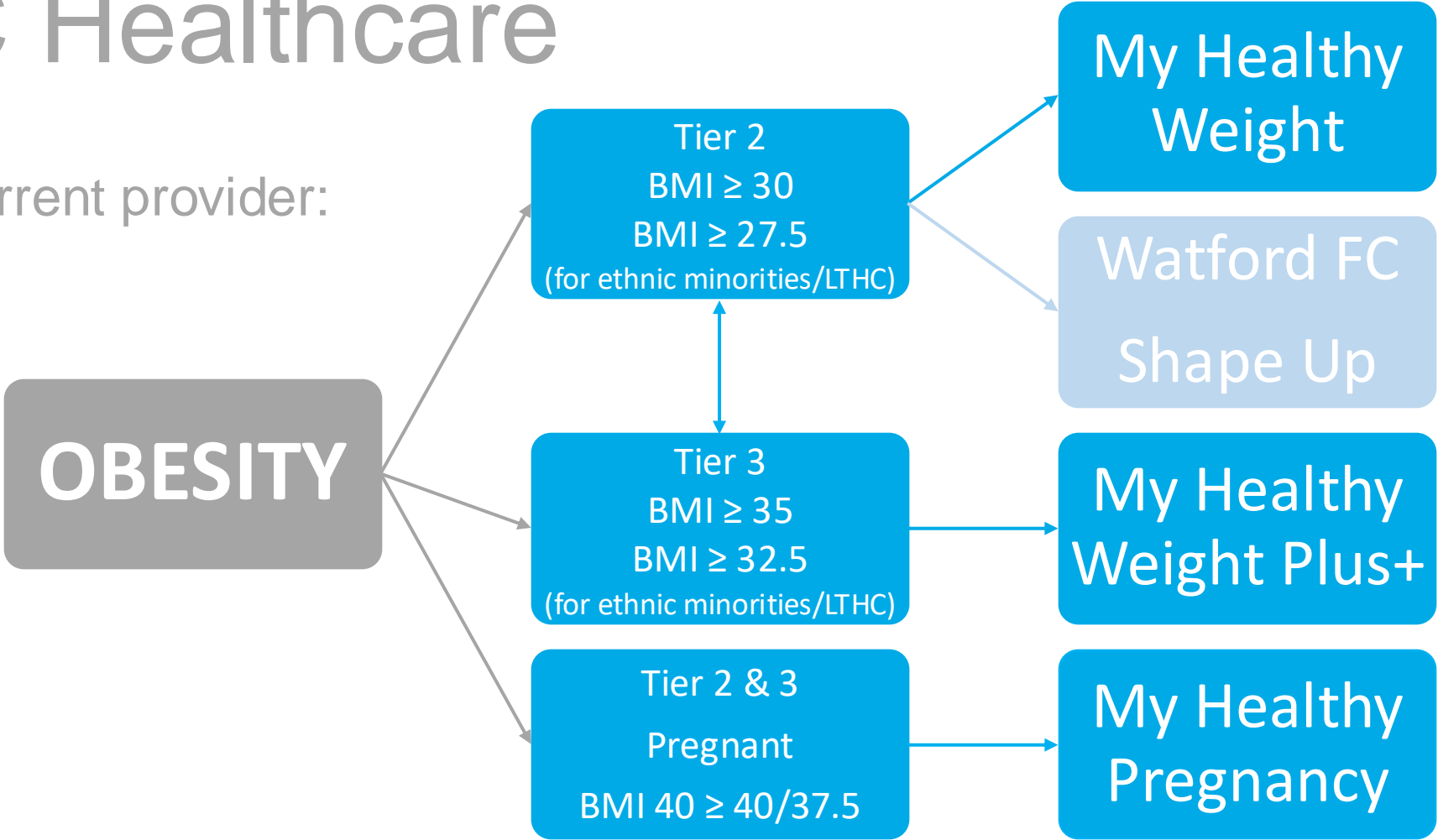
Living Well Taking Control

National Programme/Local provider:



TBC Healthcare

Local current provider:



TBC Healthcare

Local current provider:

1



Join one of our 14-week healthy lifestyle programmes based in your community.



If you need that little bit extra, our Plus+ programme is a one-year journey specifically tailored to support and guide you to a healthier weight.

3

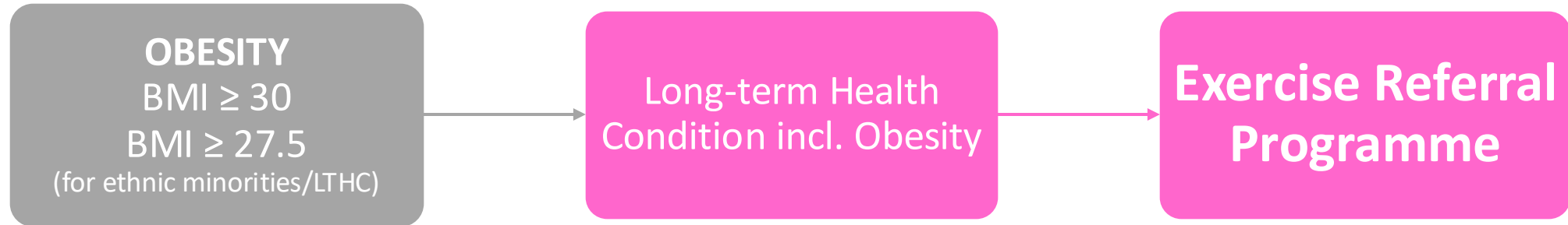


We're also proud to offer a specialised maternity pathway for women planning a pregnancy or aiming to maintain a healthy weight during and after.



Various Leisure Providers

Available at most Leisure Centres



Exercise Referral

[Exercise Referral \(sportinherts.org.uk\)](https://sportinherts.org.uk)



The screenshot shows the website header with the logo for Herts Sport & Physical Activity Partnership on the left and navigation links for 'Get Active', 'Get Support', 'News & Events', and 'About' on the right. The main heading is 'Exercise Referral' in a large, bold, dark blue font. Below the heading is a paragraph of text: 'Exercise referral schemes are long-term health condition prevention and management programmes that aim to improve health and wellbeing.' At the bottom of the screenshot is a photograph of five diverse women in a gym setting, smiling and holding small dumbbells as if participating in a fitness class. A small URL 'https://sportinherts.org.uk' is visible in the bottom left corner of the image area.





Creating a cleaner, greener,
healthier Hertfordshire



Comfort Break



Suzy Bentley-White

Physiotherapist and HCPA Clinical Lead

Posture, Physical Activity and Movement

Health Inequalities

- ▶ In 2019, there were 1.5 million people in the UK with a learning disability
- ▶ Public Health England estimates that about 2% of the population of Hertfordshire has a learning disability (c23,500)
- ▶ One in five of these 23,500 die early
- ▶ In 2018, the Learning Disability Mortality Review (LeDeR) (3) found that this early mortality amounted to people dying between 20 and 30 years younger than the general population
- ▶ The review revealed that the most common cause of death was a respiratory infection, which is more commonly known as a chest infection

The importance of posture

- ▶ Poor postural alignment can have severe and life-threatening consequences
- ▶ Body shape distortion is NOT inevitable
- ▶ These premature deaths are also potentially avoidable

POSTURE self-check

Two practical exercises

1a. Sit in a slumped position in your chair – imagine you are one of the individuals you care for who has slipped down the bed, and is hunched with chin on chest

Try and take a deep breath

1b. Change your position to sit up straight

Now take a deep breath . Exaggerate this further by adding a thoracic rotation (twist)!

In pairs:

2a. One person sit in crooked position (with your pelvis down on one side)

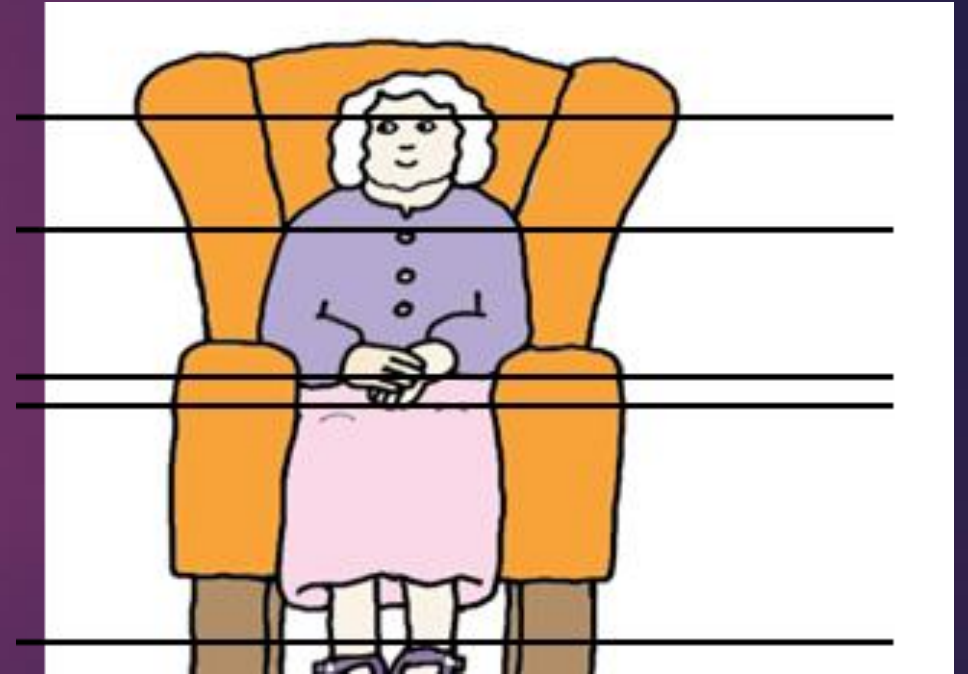
The other person assists the person to put on their cardigan or jacket (the person sitting shouldn't help too much)

2b. Now compare this to putting on the person's jacket when the person is sitting straight (i.e. their pelvis is evenly positione)

P.E.A.K.

Used to check sitting posture:

- **P** - **pelvis** in a neutral position
- **E** - **equal weight** on both buttocks
- **A** - **90° angles** at hips, knees and ankles
- **K** - **knees** facing forwards



Tommy's story



▶ <https://www.youtube.com/watch?v=fbmNt4uNeGw>

Tommy

▶ <https://www.youtube.com/watch?v=fbmNt4uNeGw>





Tommy



Tommy

Physical Activity and Movement

Effects of a lack of movement/activity

- ▶ There is increasing evidence that sedentary activity in the older population is becoming more and more problematic
- ▶ In the UK, physical inactivity is associated with 1 in 6 deaths and is estimated to cost the UK £7.4 billion annually (including £0.9 billion to the NHS alone).
- ▶ The latest statistics indicate that lack of physical activity is the cause of type 2 diabetes, obesity, heart disease, stroke, depression and even some cancers

[WHO Global status report on physical activity 2022](#)

Effects of Sedentary Behaviour



Reduced muscle strength, bone density and risk of falls and impact of falls



?? sitting time can change bone markers in those who are 65+, and consequently increases the risk of fractures



Blood sugar rises



Blood flow and circulation decreases



Good/healthy Cholesterol can drop by 20%



Older people spend 80% of their waking day sedentary – approx. 12 hours a day.

Benefits of physical activity on mental wellbeing



Being independent improves confidence and self esteem



Better physical health reduces depression and anxiety



Group activity can improve social interaction, reducing loneliness and isolation

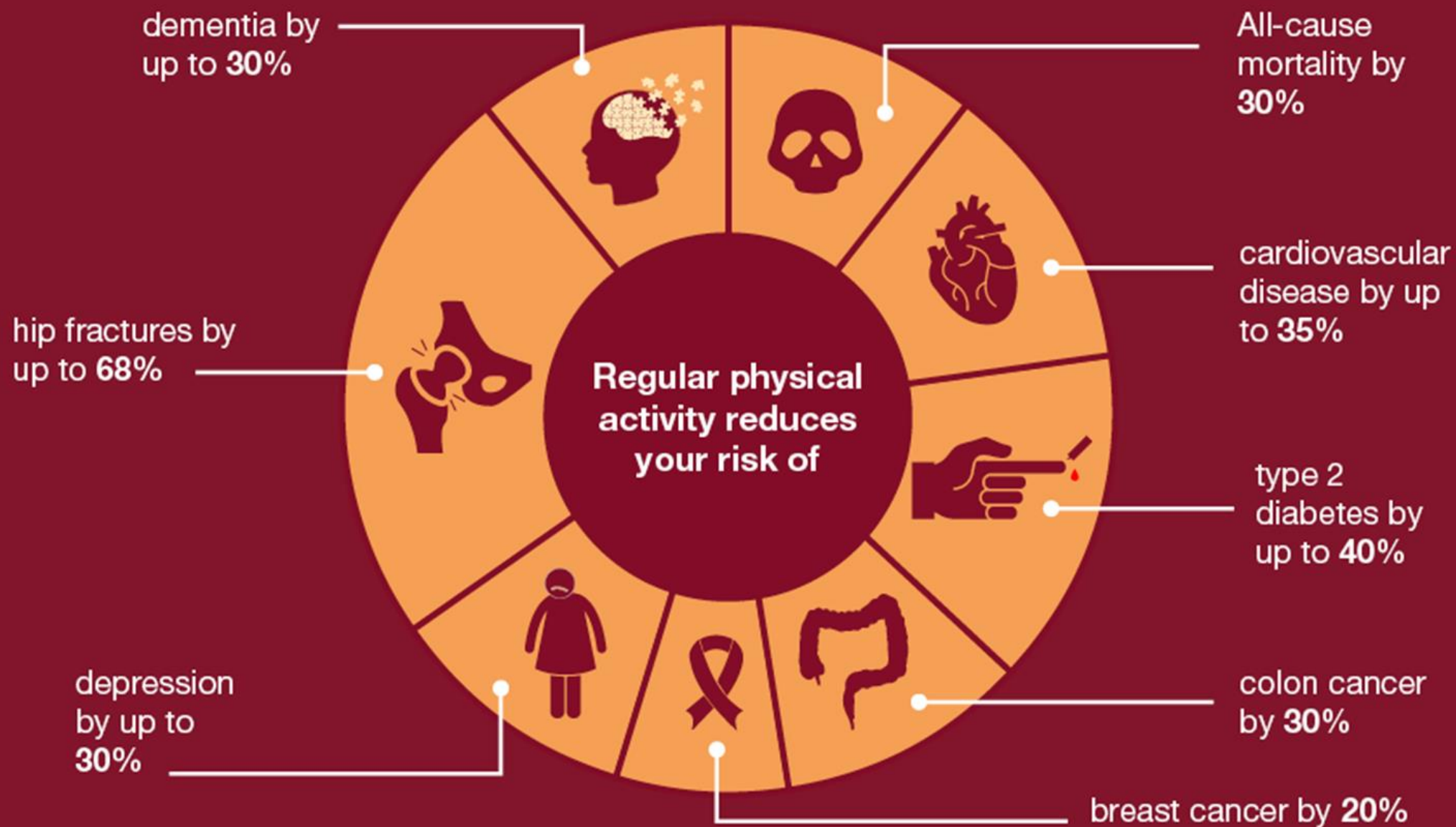


Participating in activities can give people a better quality of life and sense of achievement if they are involved in the things they love and connect to



Having a sense of purpose and belonging to a community can positively affect mental wellbeing

What are the health benefits of physical activity?



HCPA's

“Posture Friends” Resource Booklet

- ▶ An Enabling Care Approach: Changing the culture across the Care Sector in Hertfordshire - An education resource for anyone involved in the delivery of care
- ▶ [Enabling-in-Care-Resource-05.03-V1.2.pdf \(usercontent.one\)](#)

Any
Questions?







Wednesday 15th October 2024

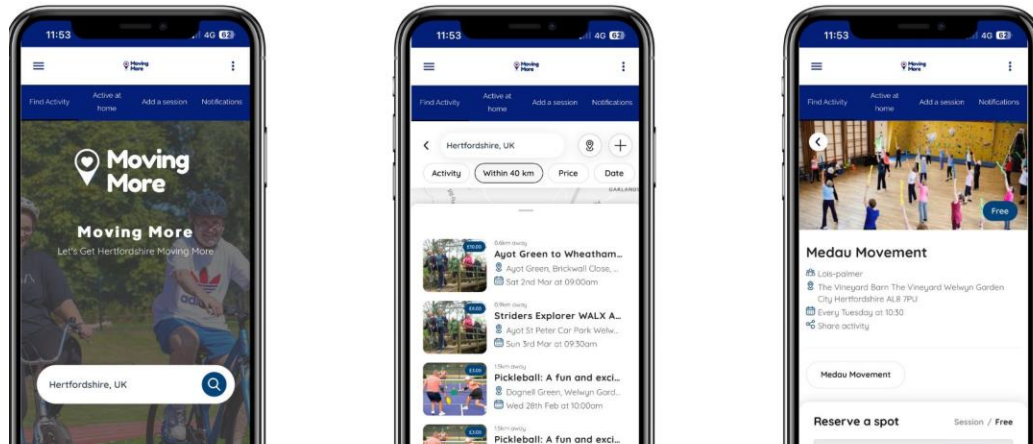
Getting active in Hertfordshire

Charlotte Bird & Tom Horey, Herts Sport & Physical Activity Partnership

Join the revolution.

Herts Sport & Physical Activity Partnership.

- Helping people with disabilities and long-term health conditions to be active
- Herts Disability Sport Foundation – sister charity
- Disability inclusion survey
- Moving More, Hertfordshire's activity finder, helping to find ways to be active
- Newsletters & webinars for ageing well, mental health & disability
- Active Medicine training



Join the revolution.

Community sessions

- Special Olympics

St Albans & East Herts

- [Herts Inclusive Football](#)

Hertford, Hemel, Letchworth...

Inclusive United Hatfield

- Watford FC Trust

- Saracens – Stone X and Community

Activity camps

Mixed ability Rugby (Letchworth, Hertford, Welwyn, Fullerians)

Strictly Sarrie

- Imagination Dance CiC



HDSF sessions

Stanborough, WGC, Hatfield & Baldock

- Adapted cycling
- Boxercise
- 18+ fitness
- Bell-boating
- Pedalos
- Rowing
- Paddleboards





Helping people in Hertfordshire to be more physically active.

Enter your location below to find a physical activity near you.

Powered by 



Within 40 km

Price

Date

Time of day

Age

Level

Accessibility

Gender

Clear all

10548 activities found



£4.00

1.5km away

Pickleball: A fun and exciting racket game for all

Dognell Green, Welwyn Garden City AL8 7BL, UK

Wed 17th Apr at 10:00am



£4.00

1.5km away

Pickleball: A fun and exciting racket game for all

Dognell Grn, Welwyn Garden City AL8 7BL, United Kingdom

Thu 18th Apr at 14:00pm



£4.00

1.5km away

Pickleball: A fun and exciting racket game for all

Dognell Grn, Welwyn Garden City AL8 7BL, United Kingdom

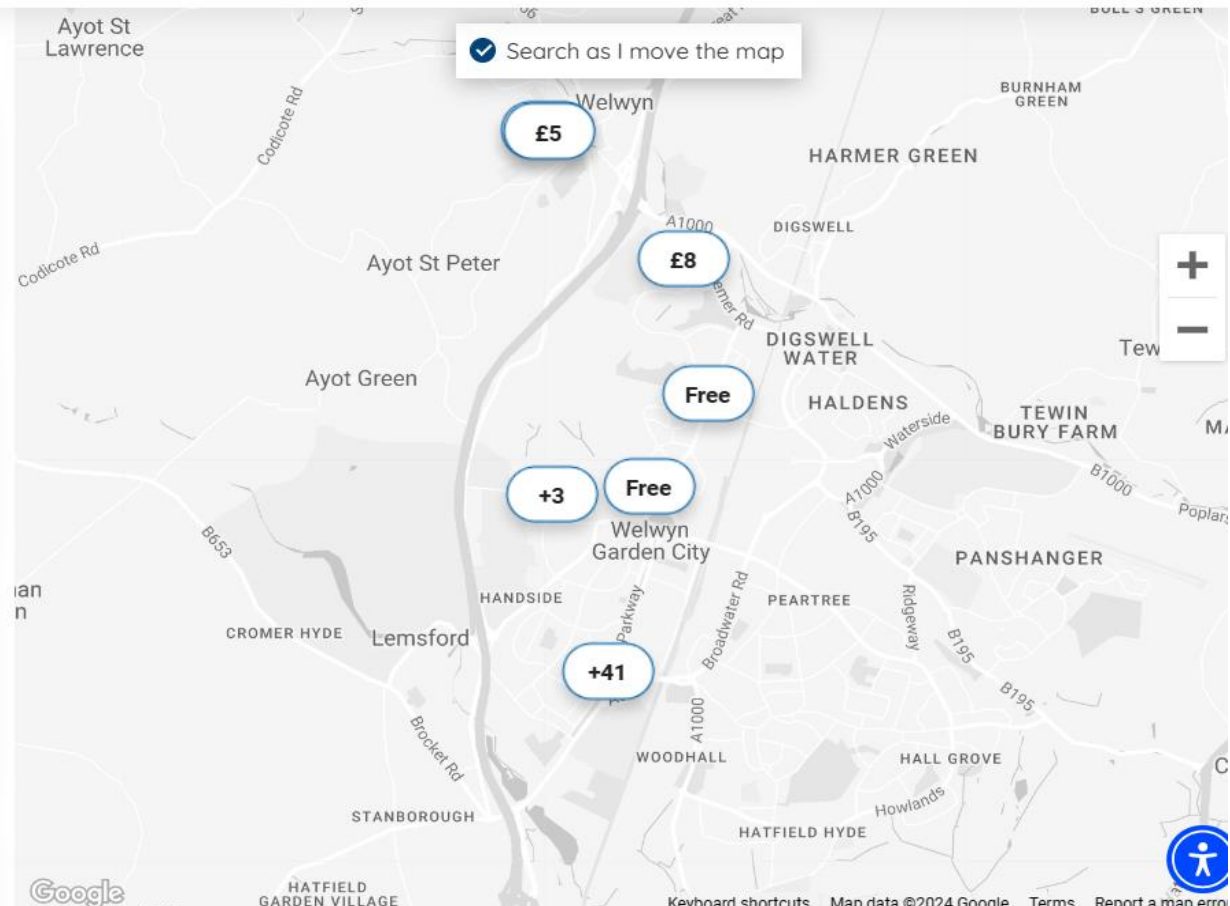
Sun 21st Apr at 17:00pm



Free

2.1km away

Meday Movement



Thank you!

Any questions, please contact Charlotte Bird- c.bird3@herts.ac.uk
Or Tom Horey – t.horey2@herts.ac.uk

Join the revolution.

What are your key takeaway actions from today?

Join at
slido.com
#3322733



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Stay up to date with sector news!
 Ensure you and your leadership team are signed up to receive HCPA's newsletters.

Subscribe to our mailing list



THE HCPA CARE PROVIDER HUB PROVIDING PEACE OF MIND.....



ASK us anything! We are your support service, here to answer your questions on all topics Adult Social Care related.

- Govt guidance, laws, standards and expectation
- Covid: PPE, vaccinations and infection control
- Liaison with Hertfordshire County Council
- Funding, contracting and commissioning
- Staff wellbeing and recognition
- HR, Staffing and recruitment
- Training and education
- Business continuity
- Data protection
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HCPA: 'Sharing best practice in care through partnership'



Feedback

Webinar evaluation form

