



Haringey Council

Scrutiny - Men's Health: Getting to the heart of the matter

MONDAY, 17TH OCTOBER, 2011 at 18:30 HRS - .

MEMBERS: Councillors Winskill (Chair), Waters, Hare and Rice

AGENDA

1. APOLOGIES FOR ABSENCE

2. URGENT BUSINESS

The Chair will consider the admission of any late items of urgent business. (Late items will be considered under the agenda item which they appear. New items will be dealt with at item 10 below).

3. DECLARATIONS OF INTEREST

A member with a personal interest in a matter who attends a meeting of the authority at which the matter is being considered must disclose to that meeting the existence and nature of that interest at the commencement of that consideration, or when the interest becomes apparent.

A member with a personal interest in a matter also has a prejudicial interest in that matter if the interest is one which a member of the public with knowledge of the relevant facts would reasonably regard as so significant that it is likely to prejudice the member's judgement of the public interest and if this interest affects their financial position or the financial of a person or body as described in paragraph 8 of the Code of Conduct and/or it is related to the determining of any approval, consent, license, permission or registration in relation to them or any person or body described in paragraph 8 of the Code of Conduct.

4. TOTTENHAM FOUNDATION

To hear from Maria Abraham, Health and Wellbeing Manager, Tottenham Foundation on working with men to improve their health and wellbeing and an update on the Health Check Programme bid.

5. DR REBECCA VINEY

To hear from Dr Rebecca Viney, Shadow Clinical Commissioning Group board member & Coaching and Mentoring Lead, London Deanery.

6. PUBLIC HEALTH

To hear from a Public Health representative on the work being undertaken to tackle health inequalities specifically relating to men's health and cardiovascular disease.

7. NHS HARINGEY AGM FEEDBACK (PAGES 1 - 4)

To note the feedback from local men and local health representatives from the NHS Haringey AGM and discuss any next steps arising from the feedback.

- How do we get men to go to health services when they have early symptoms?
- What is it that prevents them from going early enough?
- How can we encourage men to keep themselves well?

8. DATES OF FUTURE MEETINGS

Thursday 17th November, 6.30-8.30
Thursday 8th December, 5.30-7.30

9. MINUTES (PAGES 5 - 34)

To approve the minutes of the meeting held on 19th September 2011.

10. NEW ITEMS OF URGENT BUSINESS

To consider any items submitted under Item 2 above.

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Haringey Council

Briefing for:	Scrutiny Review Panel – Men’s Health: Getting to the heart of the matter
Title:	NHS Haringey AGM and review launch consultation feedback
Lead Officer:	Melanie Ponomarenko Senior Policy Officer Melanie.Ponomarenko@Haringey.gov.uk 0208 489 2933
Date:	17 th October 2011

The NHS AGM was attended by a range of different people and organisations. This included:

- Whittington Health
- Haringey Council
- Local Councillors
- Local men
- Health trainers
- GPs
- Clinical Commissioning Group Consortia
- Local Involvement network

Each table had a facilitator and note taker and discussed the areas as below.

How do we get men to go to health services when they have early symptoms?

What is it that prevents them from going early enough?

General comments

- Wait until at deaths door before going to the Doctor.
- GP – pointed out that when people register at the Dr they get a lifestyle check which is a good way to pick up anyone which may need intervention.
- Men will do anything to hide what is wrong with them.



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- Women are used to going to the Dr/medical places and talking about their health e.g. birth control pregnancy, birth, taking children, health visitors etc. (however it was noted that men are increasingly playing a bigger role in the health of their children.

Men as providers

- Men as the providers/bread winners
- A lot of men have their own hierarchy of need and what they need to do – primarily this means that going to work and providing is more important in their minds than going to the Dr.
- Education of women and other family members that men may be frightened of not being able to provide.

Work constraints

- “Don’t have time/can’t take time off work”
- Would like to not have to take time off work

Psychological barriers

- Fear of own mortality/what might happen – not to do with actual treatment.
- Going to the GP is a sign of weakness.
- Try and hide symptoms that they have
- “Peter Pan” syndrome – invincible/won’t get ill/won’t get old.
- Psychological barriers for men – expectation of role in society. Men would rather not know until it is inevitable.
- Fear of someone telling you how to change your life.
- Fear of showing ‘private areas’ to female practitioners
- Men think if they complain there are women
- Men suffer secretly
- No sense that it is their responsibility
- By going to the GP they are admitting they have an illness
- Frightened of the outcome if you are sick.



Environmental/physical barriers

- Don't want to sit in a waiting room full of women and children – feels like a women's environment.
- Gender specific staff and clinics – ask for a male doctor? Feel uncomfortable talking to a female about some things.
- More comfortable when more men are around.
- Don't like having someone 'poking and prodding' them.
- Hours of GP practice make it difficult to attend.

How do we encourage men to keep themselves well?

- Men's clinic day?
- Need to target adolescent boys to 'normalise' GP visits.
- Mother's of boys = health educators.
- Need to dispel the idea of frequent users as hypochondriacs.
- Advice on where to seek help if ill. E.g. A&E or GP
- Mobile units/Take screening 'on the road' like they do for Breast Screening – somewhere on the High Road?
- Having an event at the Spurs ground with added incentive of tour of the grounds
- Walk in health check would take half an hour – at supermarket, car parks, religious centres.
- Think about men's health days in the pub/social club
- Have mobile access – use famous people to draw crowds
- Breakfast meeting at surgery – drop in like session
- Incentive for men to come.
- Tendency to not want to be seen to be making a fuss – establish and publicise what isn't a fuss and should be taken seriously.
- Raise awareness of signs and symptoms of illness e.g. Diabetes through:
 1. Advertising campaigns



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2. health champions
3. through their wives
4. internet

N.B. Would be interesting to know if access time/after opening are accessed by those who need those slots e.g. because of their hours of work

**Scrutiny Review – Stroke Prevention Services
Panel Meeting
19th November 2008**

Councillors present: Cllr Winskill (Chair), Cllr Rice, Cllr Waters, Cllr Hare

Others attending: Sally Brearley (Centre for Public Scrutiny), Fiona Wright (Public Health), Maria Abraham (Tottenham Foundation), Craig Ferguson (Business Intelligence), Jodie Szwedzinski (Corporate Policy)

Agenda Item	Subject/decision
1.	
2.	Apologies for absence
3.	Declarations of Interest
4.	Urgent Business
5.	<p>Local Data Mapping</p> <p>Craig Ferguson, GIS Analyst, Business Intelligence</p> <p>Please see attached presentation.</p> <p>MOSAIC shows the likelihood of certain characteristics being present in certain groups of the population. Individual and area based surveys also show a stark difference between the East and West of the borough.</p> <p>Male life expectancy varies greatly across the borough varying from 81.52 years in Fortis Green in the West of Haringey and 72.46 years in Tottenham Green in the East of Haringey.</p> <p>The picture for female life expectancy is different with life expectancy across the borough more randomly spread.</p> <p>There is a link between the likelihood of someone smoking and living in more deprived areas.</p> <p>Discussion about fast food outlets in the East of the Borough and the cheap meal offers e.g. £1.99 for fried chicken and chips.</p> <p>Discussion about migrant effect and transience and the effect on messages being tailored for an every changing population and the potential impact of this. This needs to be considered when</p>

	the review panel discusses recommendations.
6.	<p>Tottenham Foundation</p> <p>Maria Abraham, Health and Wellbeing Manager</p> <p>The Tottenham Foundation is a charity connected to Tottenham Hotspurs which works with the local community and partners to provide health, training and education programmes.</p> <p>There a number of projects which are directly related to men's health for example 'Guys and Goals'.</p> <ul style="list-style-type: none"> ▪ This project incorporates 5 a side football with health and lifestyle workshops over a ten week period. ▪ Projects works with a number of local organisations e.g. Haringey Advisory Group on Alcohol (HAGA), Bringing Unity Back into the Community (BUBIC) and Improving Access to Psychological Therapies (IAPT). ▪ The project has one year of funding left and it planned for the project to focus on the Broadwater Farm area next. ▪ Project has run 6 cohorts in Tottenham so far. ▪ It is difficult to monitor participants after they complete the programme. <p>Other projects include Bowel Cancer awareness and imen 50+ (7 week computing course):</p> <ul style="list-style-type: none"> ▪ Men will often look at issues on line which they wouldn't necessarily speak to someone about. ▪ Men are more likely to print something off the internet which they have found relating to their health and take it to their doctor. <p>The Foundation has a number of pending bids e.g.:</p> <ul style="list-style-type: none"> ▪ Health Guides ▪ Whipps Cross Cardiac Rehab ▪ Community Health Checks (bringing health checks into the Community). <p>The foundation often has difficulties in getting GPs to refer patients to the programmes that it runs. However, men don't necessarily go to the GP and so this is not always the most likely referral path.</p> <p>Discussion about how participants are recruited onto programmes. This is often done by Maria getting out and about leafleting, going into Barbers and Pool clubs, going to Tottenham Community Sports Centre on a Thursday morning where men</p>

	<p>congregate etc. Other routes include referalls from Health Trainers, the Drug and Alcohol Action Team (DAAT, BUBIC, IAPT etc.</p> <p>Misconception that you can find the target group by heading to Spurs on match days. Need to remember that these are unlikely to be Haringey residents or from more deprived areas as match tickets are expensive.</p> <p>Men’s Health Foundation are having Cardio Vascular Disease for their theme next year.</p>
<p>7.</p>	<p>Public Health</p> <p>Dr Fiona Wright, AD Public Health</p> <p>Please see Appendix B from Scoping report.</p> <p>28% of the difference in life expectancy gap between Haringey and England is due to Cardio Vascular disease.</p> <p>73% of the difference in life expectancy gap between Haringey and England is due to men over 40 years of age.</p> <p>Discussion as to why the review is focusing on only those over 40 years of age. The biggest inequalities in deaths are in those over 40 years of age – this is where we can make the biggest difference.</p> <p>Health Check programme is for those over 40 years of age.</p> <p>By changing certain risk factors in those over 40 years of age you can make a quick difference as to whether or not the persons suffers from Cardio Vascular Disease.</p> <p>The current GP referral scheme (where those at risk of CVD are referred to a free exercise and management programme) currently involves GPs from the East of the borough. This scheme is at risk due to funding pressures.</p> <p>There is a need to ensure that all programmes and services are joined up between all aspects of each programme as well as between all agencies delivering.</p> <p>There is a limited range of services currently available to support people who have a weight problem in managing their weight.</p>

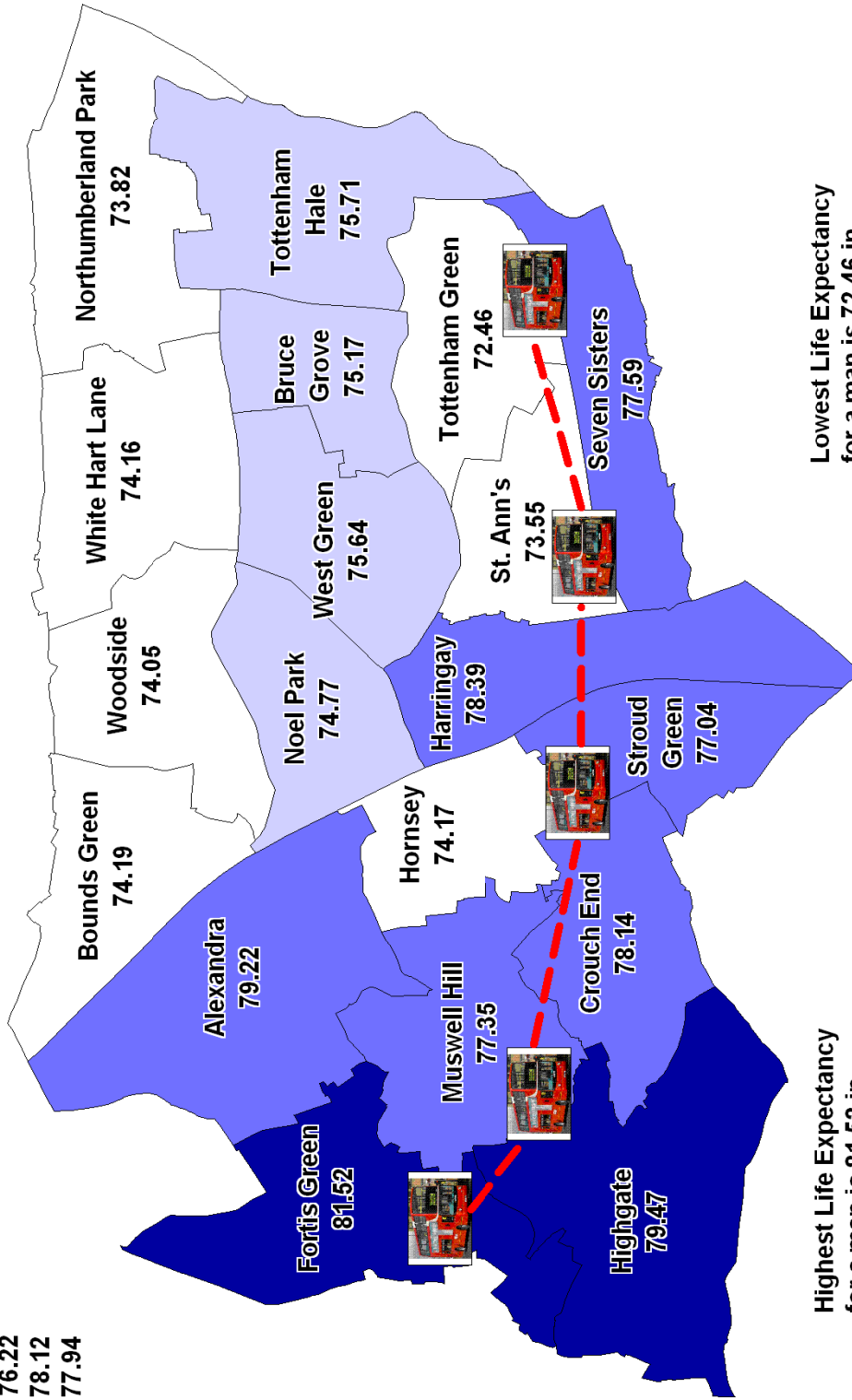
	<p>There is a need to consider what can be done in relation to planning and licensing and fast food outlets.</p> <p>This review should consider the recommendations made in the Life Expectancy Paper and consider where we can add to these.</p> <p>There is a need to consider how we can get messages and support out to the target group.</p>
8.	<p>Draft Scope</p> <p>Agreed</p>
9.	<p>Centre for Public Scrutiny Pilot</p> <p>Discussion around Impact Statements. Support from the Centre for Public Scrutiny will be looked at in order to complete these.</p>
10.	<p>Dates of future meetings</p> <p>17th October, 6.30-8.30 17th November, 6.30-8.30 8th December, 5.30-7.30</p>
11.	<p>New items of urgent business</p> <p>None</p>

Health Data Mapping

Craig Ferguson
Business Intelligence

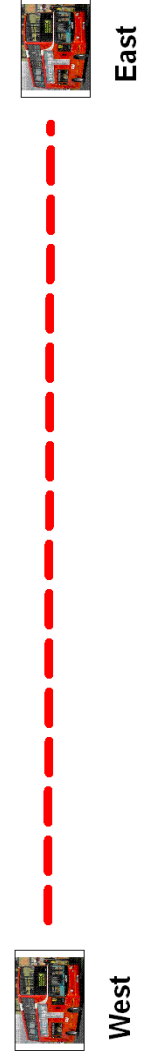
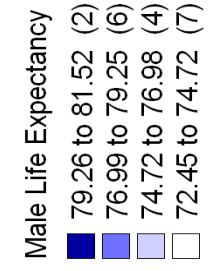
Male Life Expectancy
Source: LHO 2005-2009

Haringey: 76.22
London: 78.12
England: 77.94

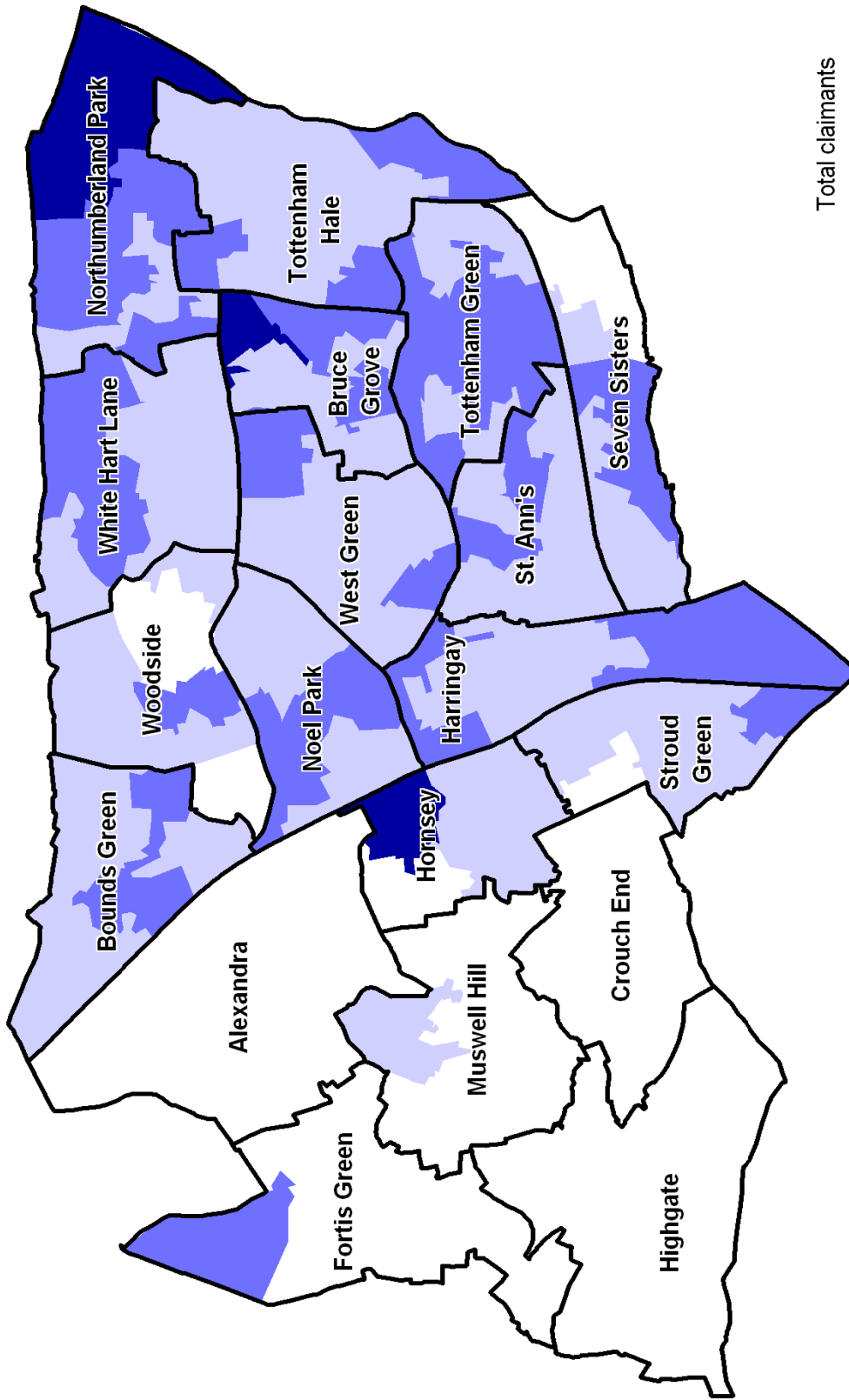


Highest Life Expectancy for a man is 81.52 in Fortis Green

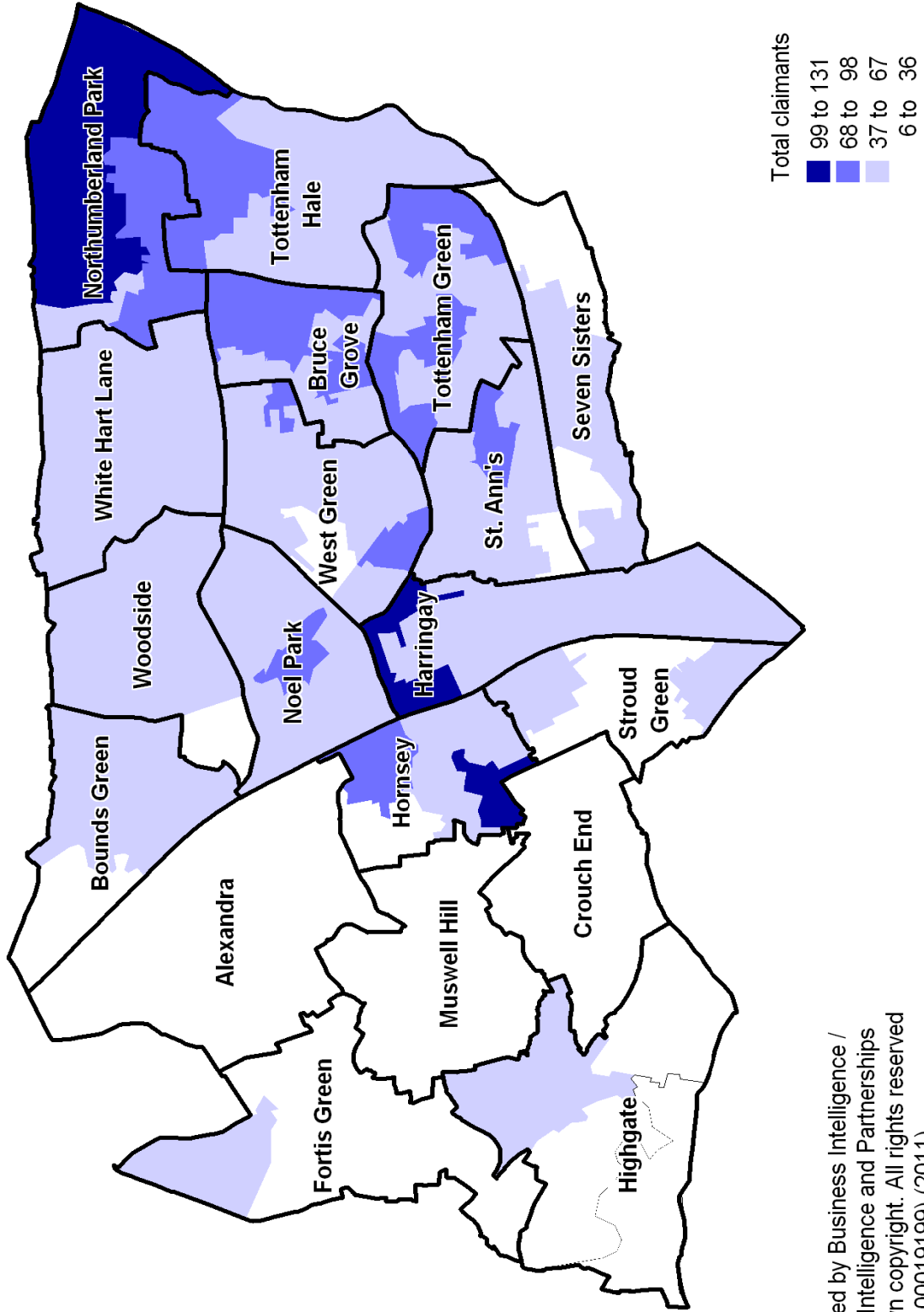
Lowest Life Expectancy for a man is 72.46 in Tottenham Green



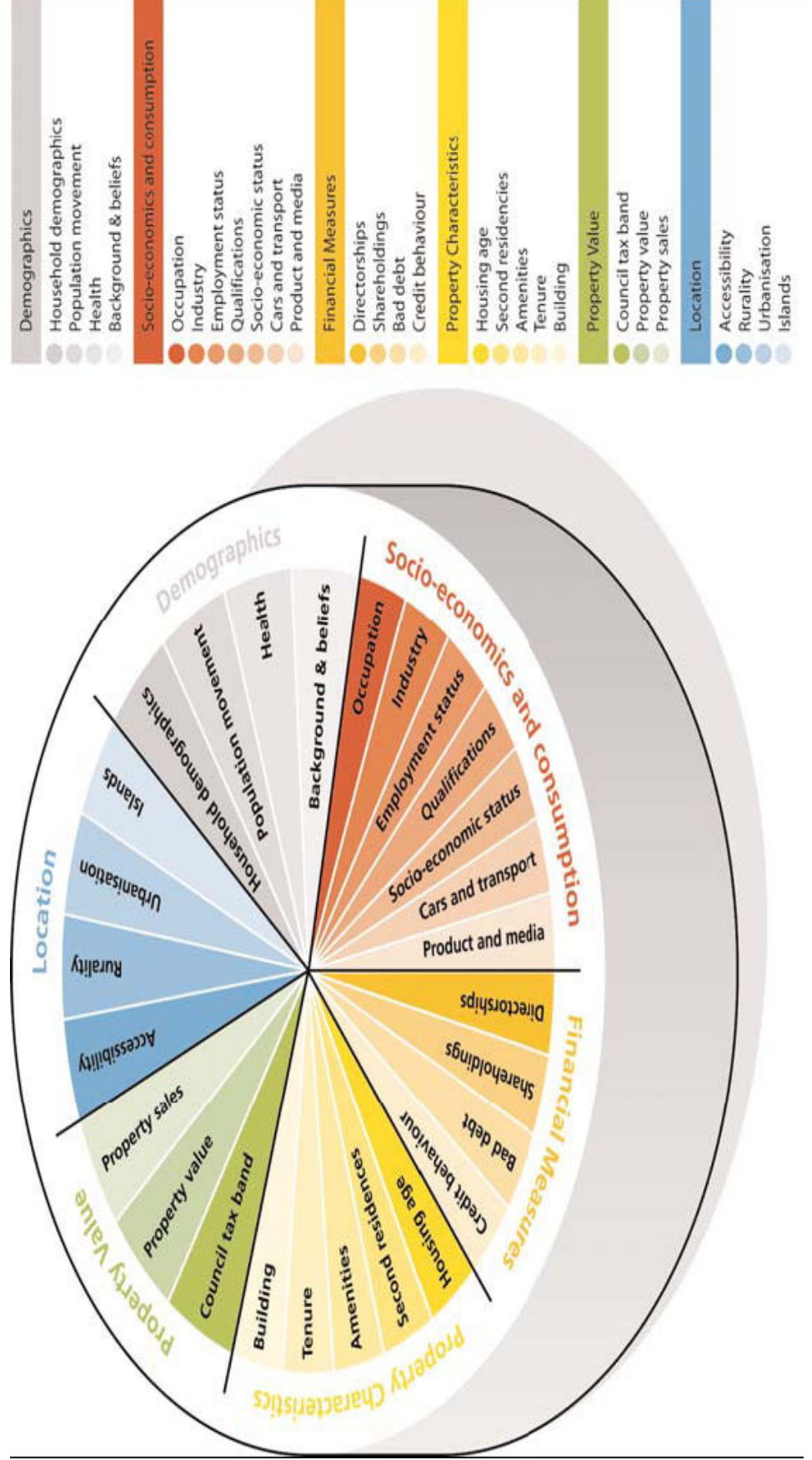
Total male Incapacity Benefit / Severe Disablement Allowance / Employment Support Allowance claimants
February 2011



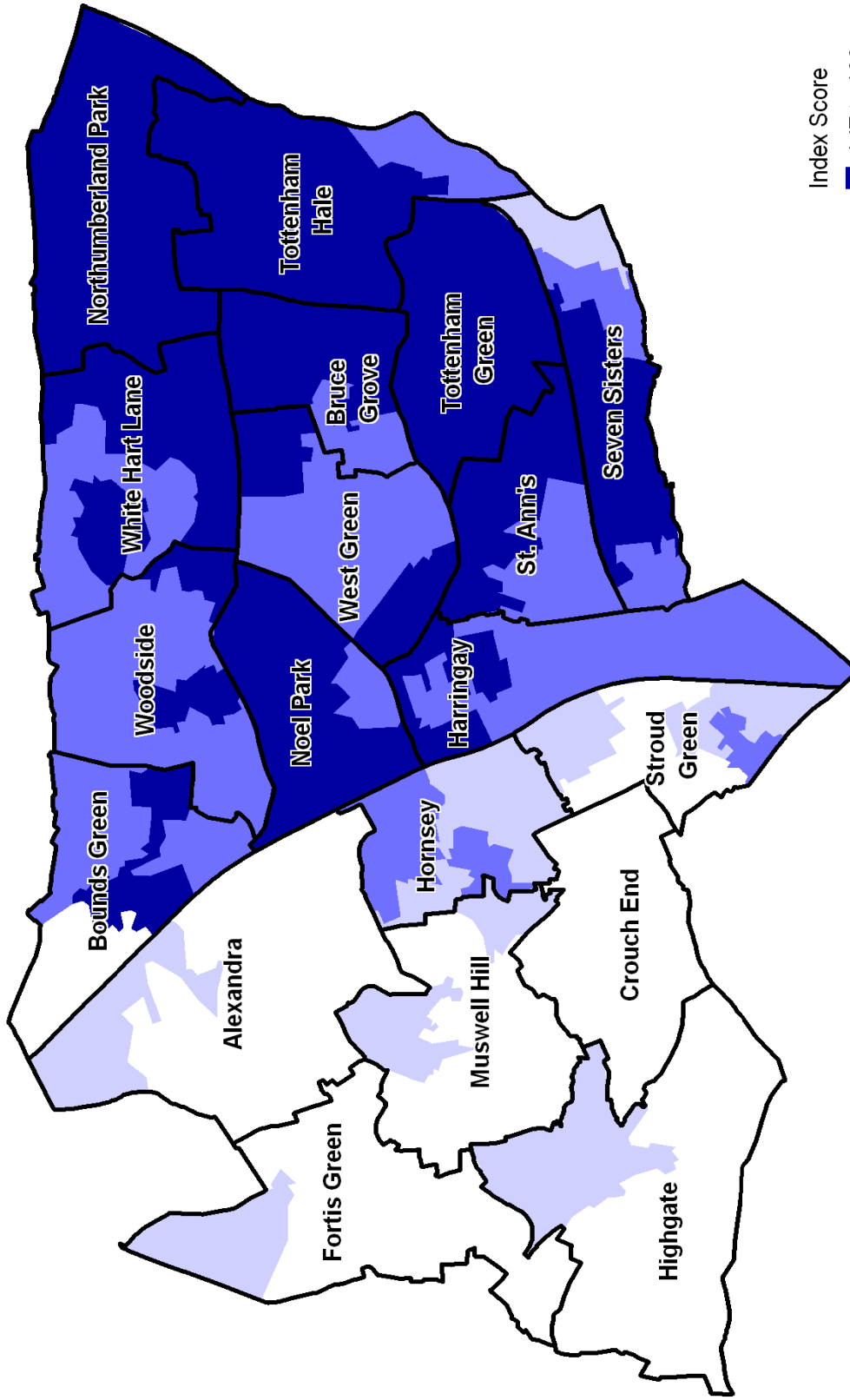
Total male Job Seekers Allowance (JSA) claimants
August 2011



MOSAIC Community profiling data where each postcode is allocated into 15 groups or 69 types



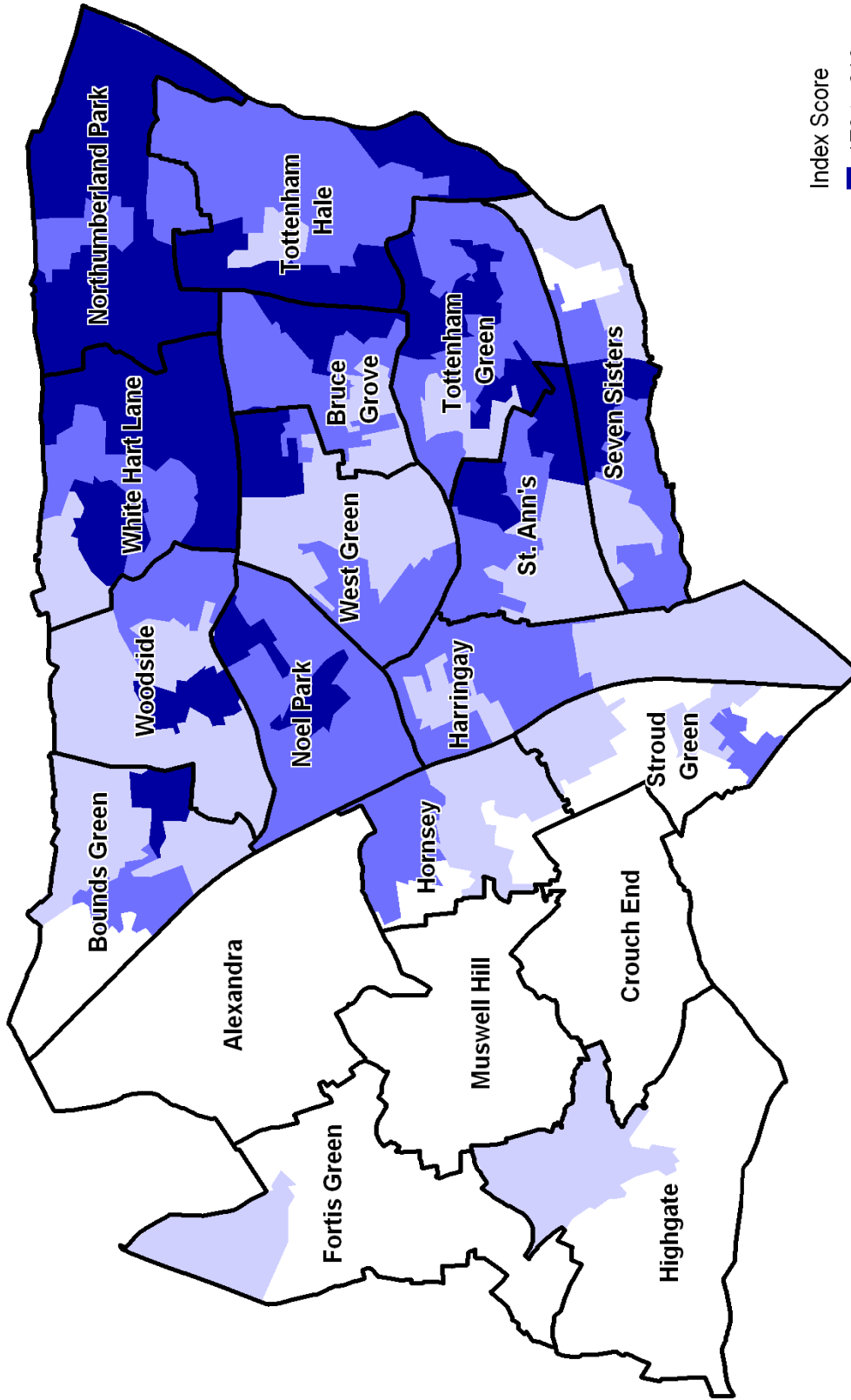
Index score of how likely people are to be a heavy smoker (over 20 a day)
100 = National Average, Higher score = More likely
Haringey Super Output Areas
MOSAIC 2010



Index Score
147 to 188
100 to 146
67 to 99
27 to 66

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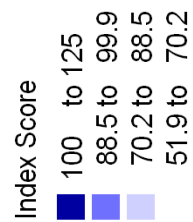
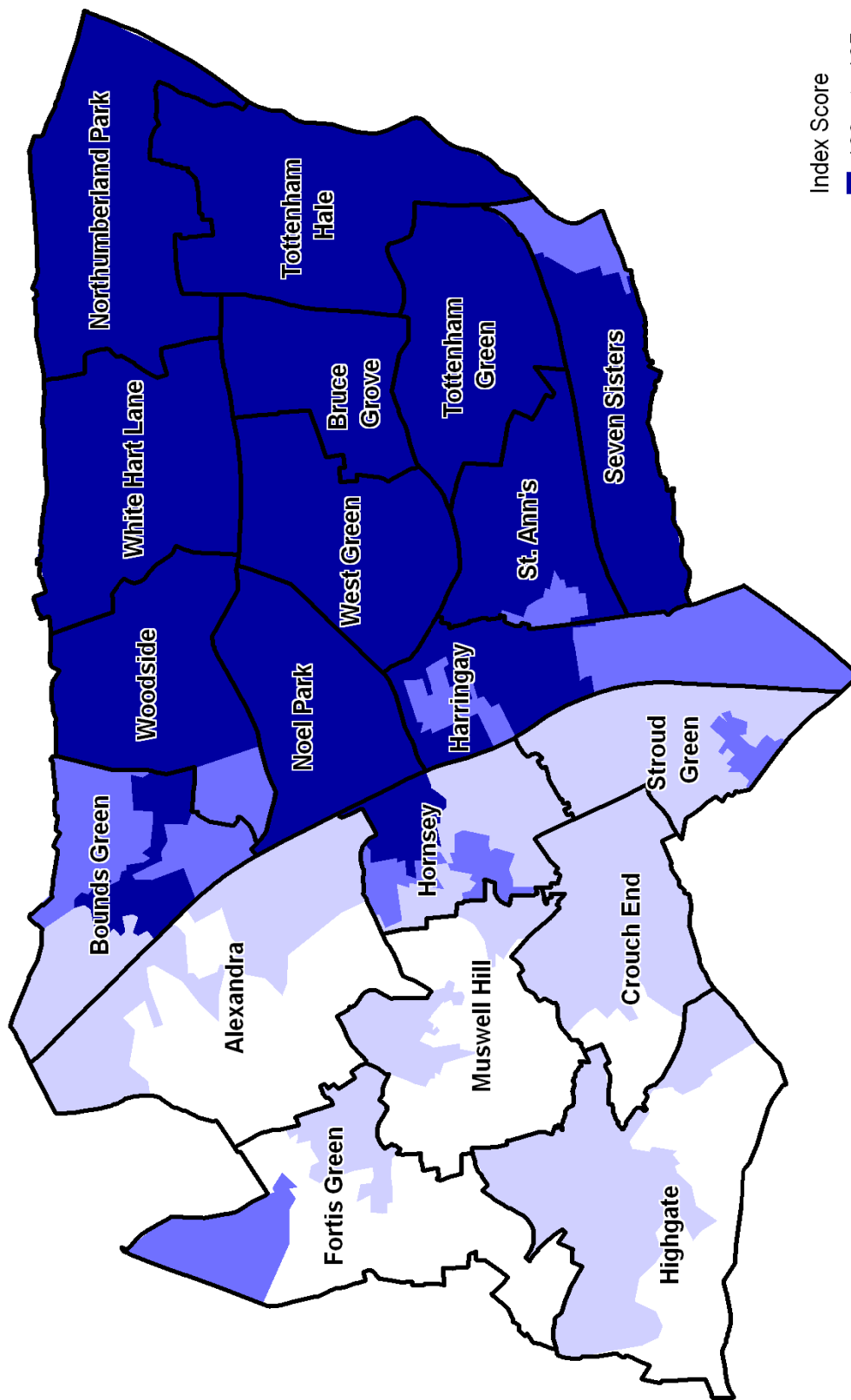
Index score of how likely people are to be Obese
100 = National Average, Higher score = More likely
Haringey Super Output Areas
MOSAIC 2010



Index Score
172 to 213
132 to 171
92 to 131
52 to 91

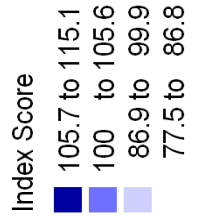
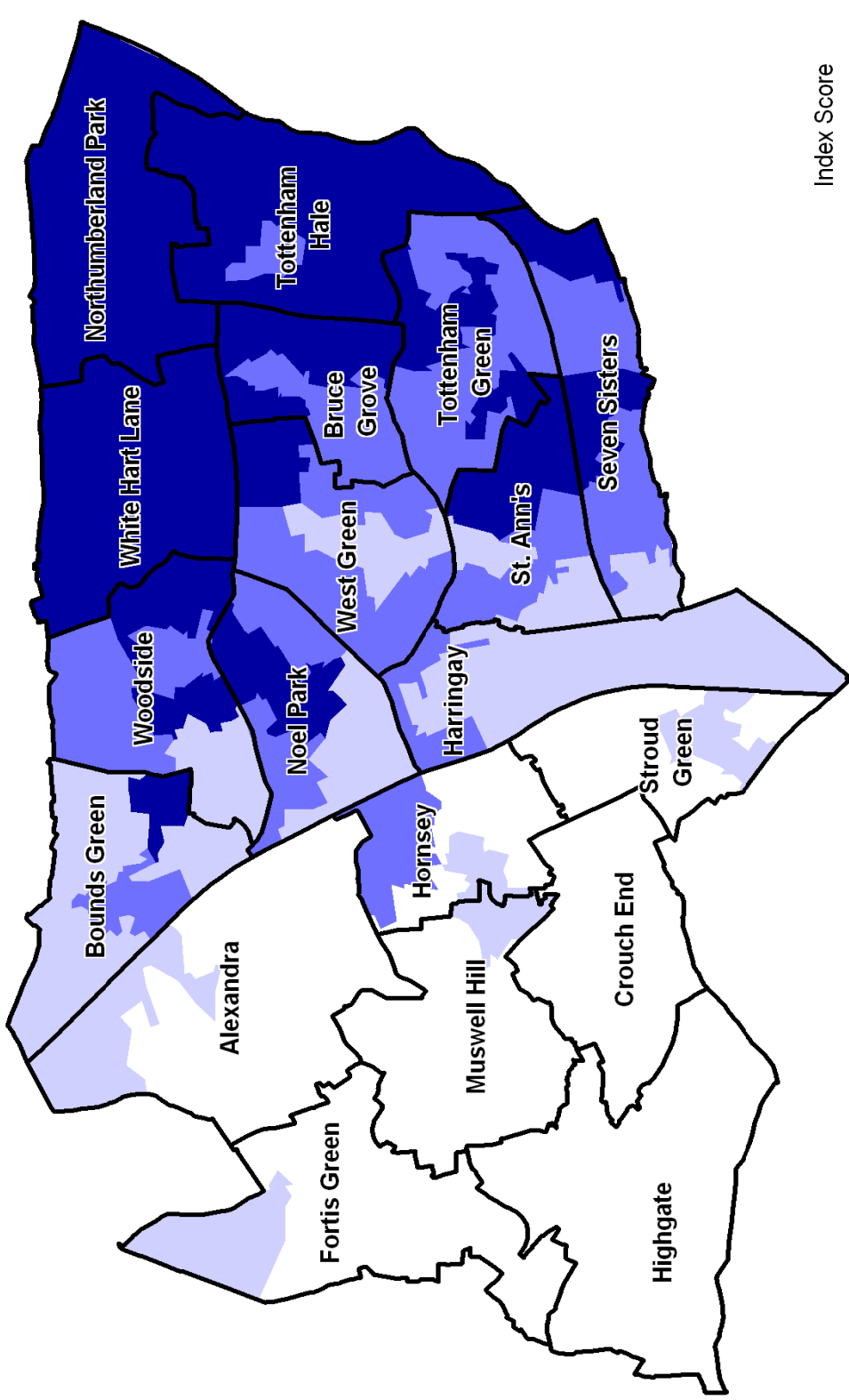
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Index score of how likely people are to eat less than two portions of fruit or vegetables a day
 100 = National Average, Higher score = More likely
 Haringey Super Output Areas
 MOSAIC 2010



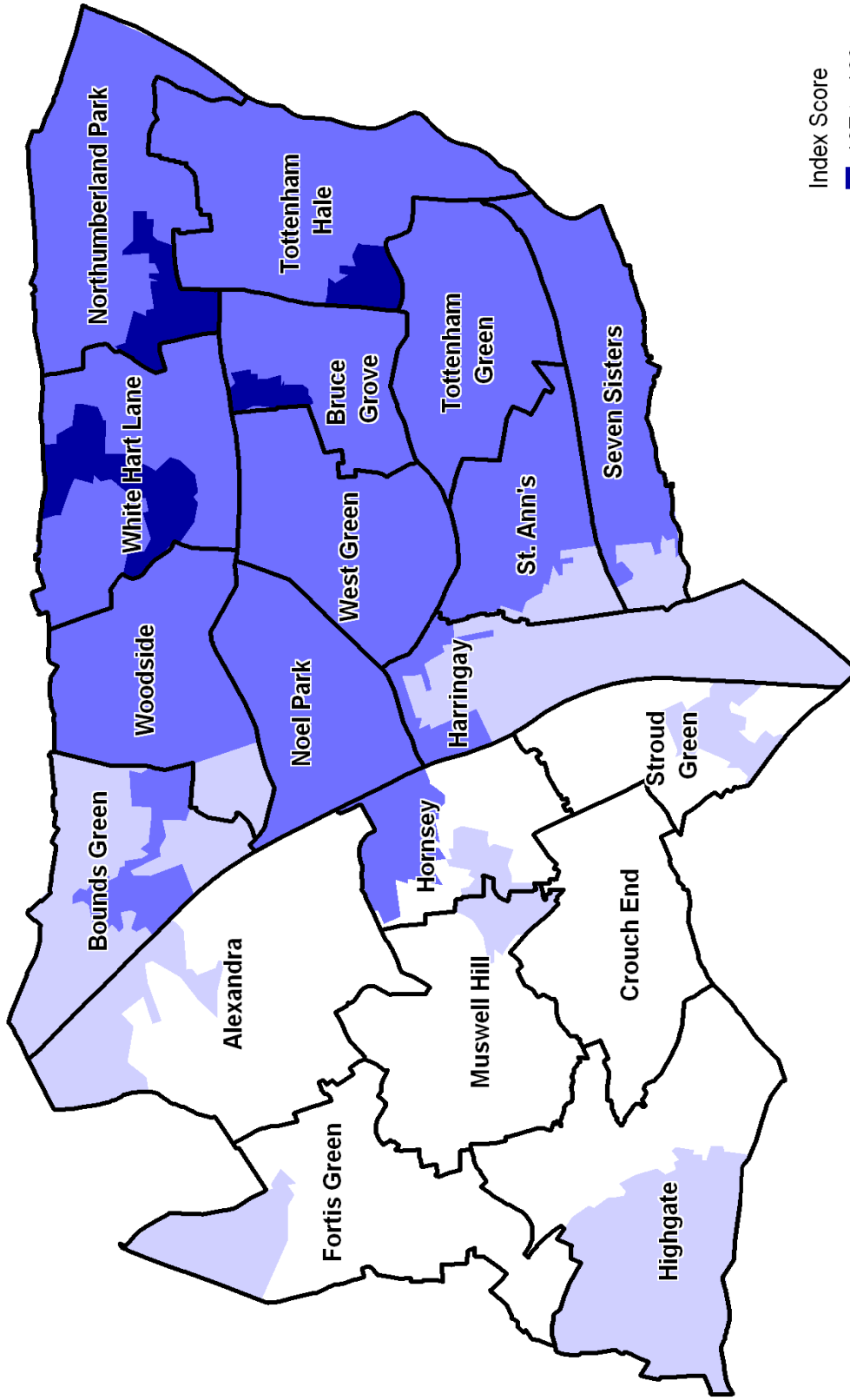
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Index score of how likely people are to have done no exercise in the last week
100 = National Average, Higher score = More likely
Haringey Super Output Areas
MOSAIC 2010



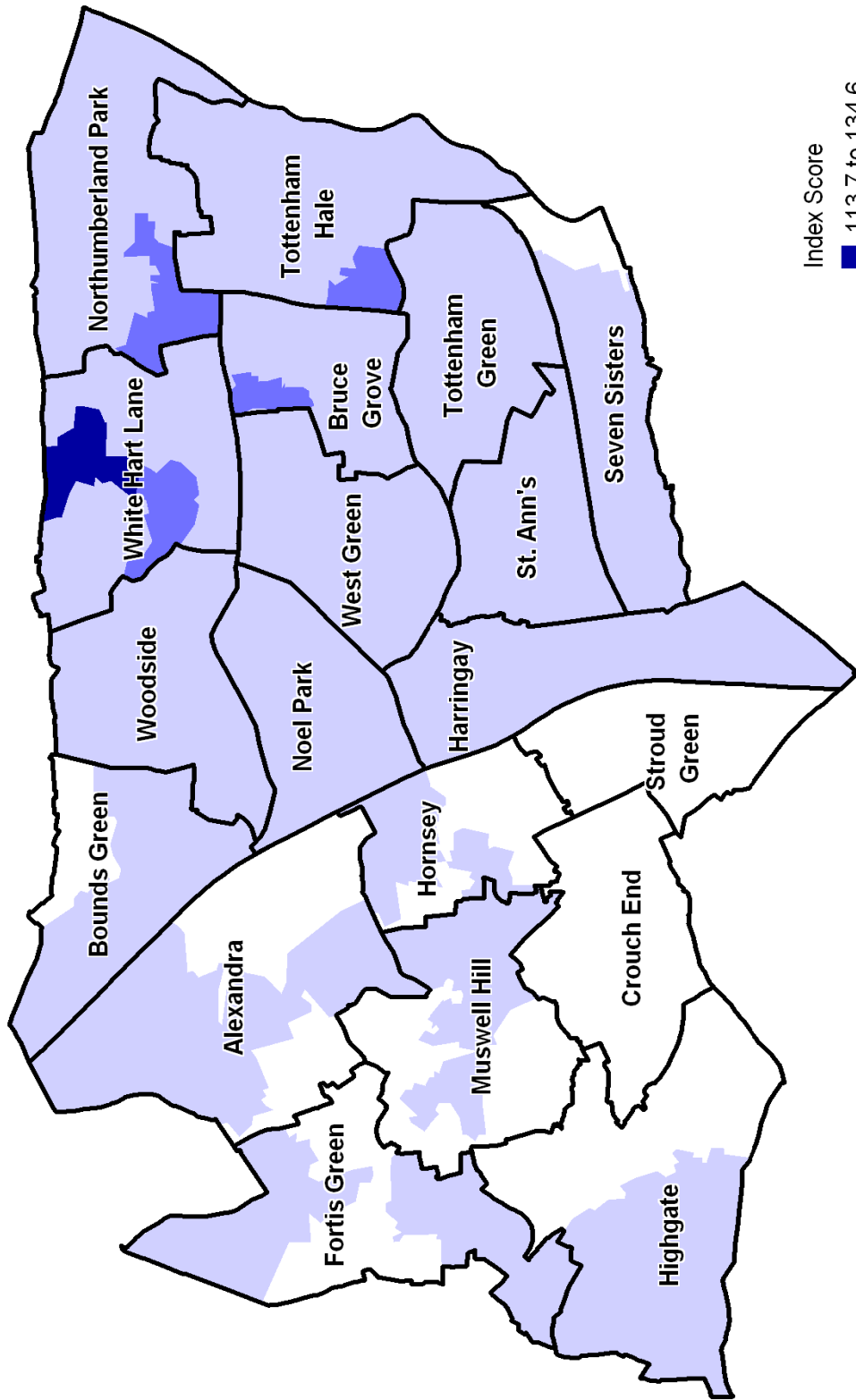
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Index score of how likely people are to suffer from Hypertension
100 = National Average, Higher score = More likely
Haringey Super Output Areas
MOSAIC 2010



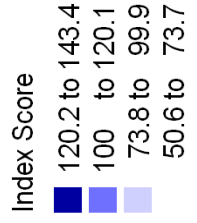
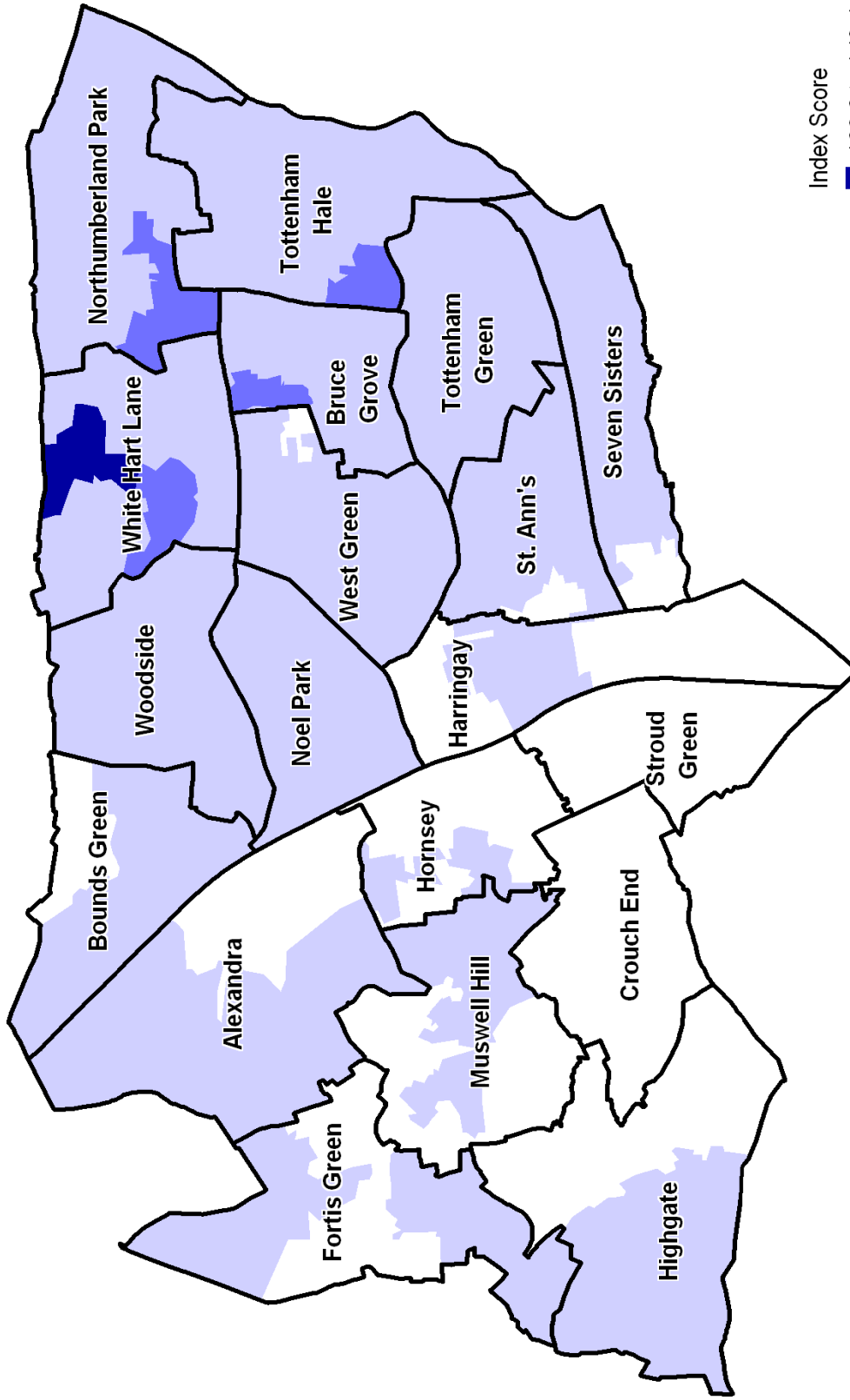
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Index score of how likely people are to suffer from Pulmonary Heart Disease
100 = National Average, Higher score = More likely
Haringey Super Output Areas
MOSAIC 2010



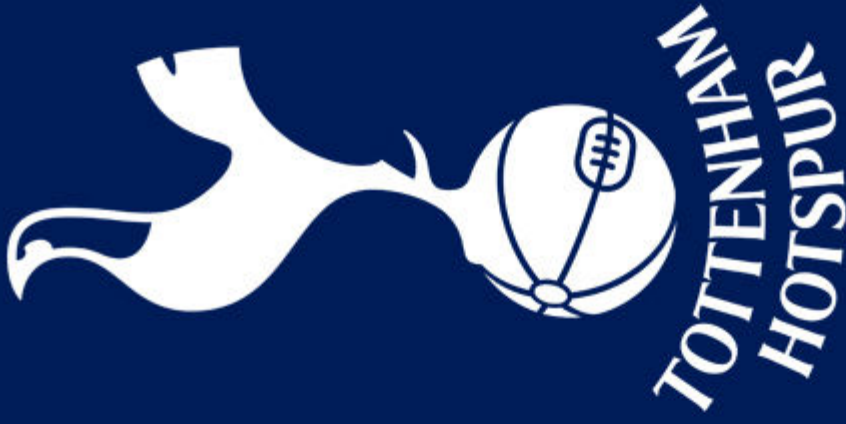
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Index score of how likely people are to have CVD
 100 = National Average, Higher score = More likely
 Haringey Super Output Areas
 MOSAIC 2010



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Tottenham Hotspur Foundation
Creating Opportunities That Change Lives



Maria Abraham
Health & Wellbeing Manager

TO DARE IS TO DO

TOTTENHAM
HOTSPUR·COM

MISSION STATEMENT



Tottenham Hotspur Foundation is committed to providing the best sports, health, training and education programmes for all our communities. Creating opportunities, encouraging enterprise and innovation, promoting social cohesion and enhancing life skills.

WHO WE ARE



- **Tottenham Hotspur Foundation** was established as a Registered Charity in 2006 with significant investment from Tottenham Hotspur Football Club.
- We work predominately within the London Boroughs of Haringey, Waltham Forest, Enfield and Barnet and the District Council of Epping.
- We currently have 48 programmes in operation.

OUR KEY STATISTICS



- Over £2 million of external investment brought into the borough of Haringey over the past three years
- Over one million opportunities created since 2006
- We work with 7000 people every week
- Over 450 hours of provision delivered every week
- We have over 200 partners worldwide
- 13000 inclusive sporting opportunities provided for disabled people every year

OUR INVOLVEMENT



- Community Development
- Education
- Equality & Inclusion
- Health & Wellbeing
- Sports Development

GUYS & GOALS



“After the age of 35 there is a sharp decline in men’s physical activity. Many say they don’t have the time but they also blame poor health or that they simply feel ‘too old’. Unlike women, men tend not to be motivated to improve their health, to lose weight or improve their appearance” **Dr Ian Banks, Men’s Health Forum President**



Tottenham Hotspur Foundation

BOWEL CANCER AWARENESS COMMUNITY ENGAGEMENT



“Having suffered from bowel cancer myself, I think it’s important to pass on my advice and experiences in any way I can. Many people who may be suffering from symptoms will try and bury their heads in the sand, but I want to reassure my local community that catching it early can ultimately save lives.” **Community Ambassador, John Paterson**



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iMen50+



“For the man who believes he needs to be strong, silent and reluctant to admit weakness, uncertainty or limitations in his knowledge, the Internet has clear benefits”
Jim Pollard, Hazardous Waist (2007)

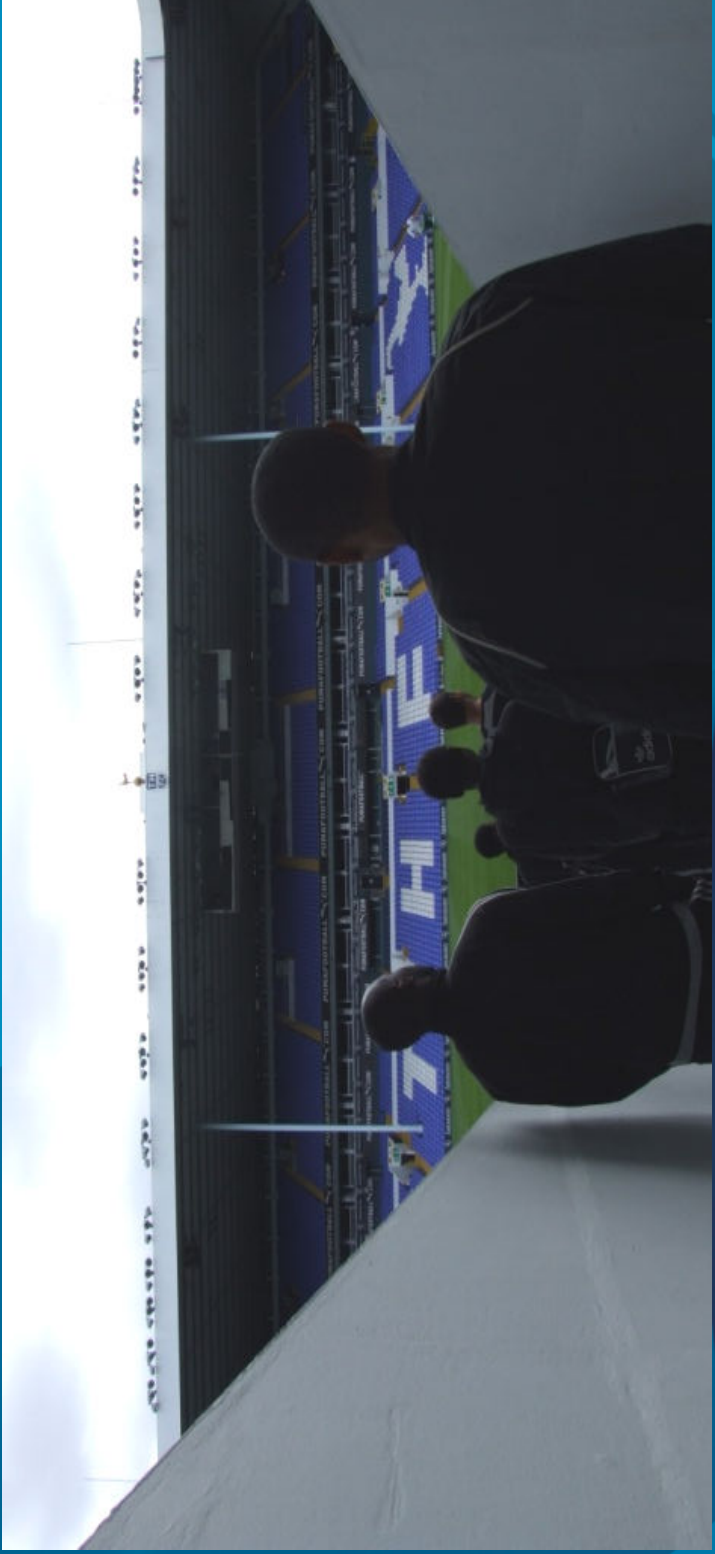


Tottenham Hotspur Foundation

GAME OF TWO HALVES



“Whether we watch or play ‘the beautiful game’, football gives us it all – the highs, the lows, the joy, the despair. The full range of our feelings and emotions can be shown in just 90 minutes of football. This is the beauty of the game.”
Nick Barnes BEH-MHT.



BIDS PENDING

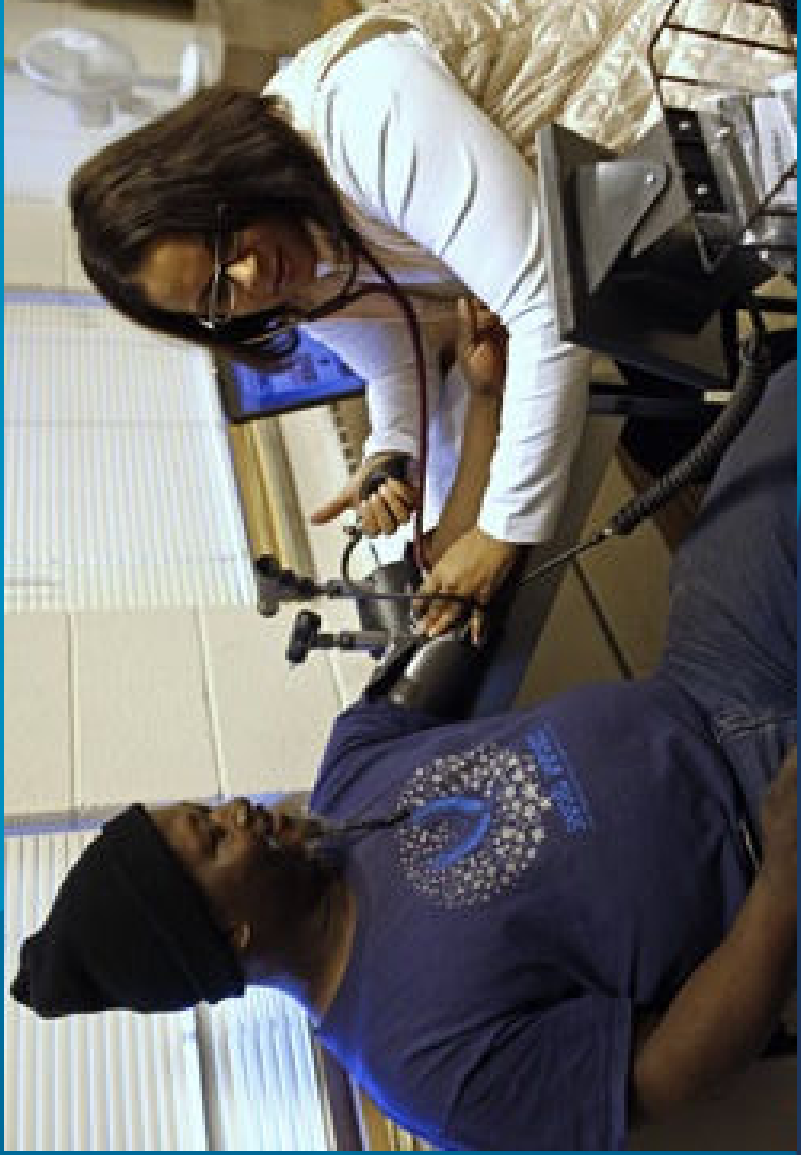


- Health & Social Care Volunteering Fund – Health Guides
- Pfizer Foundation – Whipps X Cardiac Rehab Football
- Pfizer Foundation – iMen50+
- British Heart Foundation – Whipps X Cardiac Rehab Football
- Premier League – Community Health Check

COMMUNITY HEALTH CHECK



“Men do care about their health and don’t want to die young. One issue is that the health system is not working for them. Services are not very male friendly.” **Peter Baker, CEO, Men’s Health Forum**



OUR PARTNERSHIP



- Working together to reduce health inequalities based on social deprivation and gender
- Health Trainers at White Hart Lane
- Health Trainer & Health Check Launch -12.9.2011
- Diabetes Risk Assessment Event – 21.10.2011
- Increasing volunteering capacity
- Guys & Goals (HAGA, Life Savers, IAPT, Health Trainers)
- Joint Bids (The Mayor’s Sport Participation Fund)
- Community Health Check Bid (Premier League)

Men's Health



“If you compare all the major killers, such as heart disease and lung cancer, men easily come out best, from the undertaker’s point of view” .

Dr Ian Banks, President, Men’s Health Forum

