

**Scrutiny Review – Men’s Health
Panel Meeting
October 2011**

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

Others attending: Maria Abraham (Tottenham Foundation), Ricardo Johnson (LINK), Brenda Taverner, Dr Rebecca Viney, Dr Mehboobali Alimohamed, John Nunney (LPC).

| Agenda Item | Subject/decision |
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| 1. | Apologies for absence Fiona Wright, Public Health |
| 2. | Declarations of Interest Dr Rebecca Viney – Member of the Health and Wellbeing Board Executive and Clinical Commissioning Group. |
| 3. | Urgent Business None |
| 4. | Tottenham Hotspur Foundation – Health Check programme An update on the Premier League bud to fund a Health Check programme was given. Please see attached presentation. Key points from the discussion: Funding would be from Premier League and Public Health match funded. Target group would not necessarily go to Tottenham stadium as they would find it daunting and they also do not have the funds to pay for matches. To access the target group do not attend on match days – this is not the target group. A good point of access would be Tottenham Community Sports Centre on Thursday mornings when there is a market. <ul style="list-style-type: none"> ▪ Centre would be a good venue for health checks |

Programme would aim to cover as many languages as possible when recruiting Health Ambassadors from the local community. The role of the Health Ambassadors would be to spread health messages and encourage men to uptake health checks in the programme.

Other good places to raise awareness would be:

- Community parks
- Lordship Recreation Ground and café
- Downhills
- Caribbean cafes and takeaways
- Barber shops

Cultural aspects e.g. Turkish Community are highly likely to be smokers.

Target of the programme is 3000 health checks over the course of the project.

Programme would target the men who are unlikely to attend GP surgeries and who are less likely to engage with health services.

Noted that the programme will not be widely advertised due to budget constraints.

Discussion around forums for advertising the programme which would not necessarily cost e.g. mosque newsletters.

Health Trainers would be assisting on days when Health Checks are taking place. Their role would include signposting people to other services as well as the services which they provide themselves.

Noted that men do visit pharmacies for a variety of reasons including to self medicate, buying other items and for general information.

Discussion around whether pharmacies would be able to refer men onto the Tottenham Hotspur Foundation programme if they do not provide health checks themselves or where a person is unable to pay for one being offered in a pharmacy.

John Nunney would be happy to be a link into pharmacies for this piece of work.

Discussion around how information could be given to pharmacies – suggested that Health Ambassadors would be able to help in their communities.

Should funding be confirmed the programme would start in early March 2012.

Health checks would be done by the British Heart Foundation.

Maria would be looking at getting the health checks done at a variety of times and not always within 9-5 e.g. early morning or after work hours.

Discussion around the use of schools as an outlet for information e.g. school newsletters. Noted that children can be a very good route of getting messages and information to their families.

Discussion about a 'Bring your dad' session where children are offered a chance to see the Spurs ground and their dads would then be given a health check.

Noted that when health checks are offered in the right setting there is usually a queue of men wanting to get one down. Element of 'Me too-ism'.

Noted that men are more likely to maintain sport if they participate in a team sport.

Noted from Dr Viney that all GPs should be assessing risk factors as part of their consultation with patients. This should be recorded via QOF and includes:

- Smoking
- Weight management
- Risk factors
- Family history

This would be done on an opportunistic basis.

Noted that the Tottenham Hotspur Foundation would be targeting those who do not attend GP surgeries.

Noted that Turkish cafes quite often have football on. Discussion around encouraging and supporting men in the cafes to set up football teams and whether this would incentivise them in increasing physical activity.

Discussion around whether the health check programme could link up with leisure services. Would there be an opportunity to offer men who had a health checks a discounted rate to encourage them to attend the leisure centres?

Discussion about whether Spurs would sponsor a wrist band for

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| | <p>the health check programme to show men who had been for one and encourage others to do so.</p> |
| <p>5.</p> | <p>Dr Rebecca Viney</p> <p>Discussion around how well informed GP Surgeries are in terms of the local population e.g. do all GPs and their practice staff know the context in which they are working e.g. the life expectancy gap?</p> <p>Noted that the Clinical Commissioning Group is considering have a 'Haringey Health' website which would not be about ill health but about health and prevention.</p> <p>Noted that some countries are better than the UK at social marketing of health messages.</p> <p>There are a number of diseased that people do not know the symptoms for e.g. bowel cancer.</p> <p>Noted that employers should encourage men to go for health checks.</p> <p>Noted that men, and in particular some ethnic groups, do not want to see or be seen by women. There is a tension here as it is generally women who are in these positions.</p> <p>Discussion around whether GP surgeries could do men's hours or session. Noted that there would be Equalities Act legislation around this which would make it difficult e.g. could be seen as positive discrimination.</p> <p>Dr Viney would be happy to assist with a recommendation around men and health checks.</p> <p>Noted that it does not have to be a GP who does the health checks.</p> <p>Noted that libraries are a good point of contact for the target group.</p> <p>Discussion around the big opportunity to get pharmacies involved.</p> <p>Noted that pharmacies can refer to a GP when they do health checks – some have a question about whether the person is happy for their information/results to be sent to their GP after.</p> <ul style="list-style-type: none"> ▪ If the person is not registered with a GP the Pharmacist will give them a list of local GPs. |

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| | <ul style="list-style-type: none"> ▪ Discussion around how you can actually get men to then go to their/a GP. <p>Discussion around the fact that not everyone knows their way around the UK health system and not everyone knows that it is free.</p> <ul style="list-style-type: none"> ▪ Need to think of ways to help people to navigate the health system. <p>Discussion around who attends A&E rather than going to their GP or another health professional.</p> <ul style="list-style-type: none"> ▪ What are the demographics of attendees? ▪ Do they have GPs? ▪ Age? Ethnicity? <p>Could A&E be used as a place to disseminate information?</p> <p>Discussion around the use of role models – suggestions Spurs players e.g. Benoît Assou-Ekotto</p> <p>Noted that awareness raising in the community is key.</p> |
| 6. | <p>Public Health</p> <p>Deferred</p> |
| 7. | <p>NHS Haringey AGM feedback</p> <p>Noted</p> |
| 8. | <p>Dates of future meetings</p> <p>Noted</p> |
| 9. | <p>Minutes</p> <p>Approved</p> |
| 10. | <p>New Items of urgent business</p> <p>None</p> |