

### Neighbourhoods

Neighbourhood health - case studies of good practice in implementing the City and Hackney Anti-Racist Principles at the Hackney Ark Centre and Somerford Grove Practice



#### Introduction to the Case Studies:

These case studies provide examples of existing good practice that forms the foundations of neighbourhood health. They should be read alongside the City and Hackney Anti-Racist guide. This guide outlines six anti-racist principles co-developed with the City and Hackney Neighbourhood Programme team and University of East London and tested by the University of East London and the Homerton Healthcare NHS Foundation Trust Service Improvement Team. Aimed at public and voluntary organisations, the principles support fairer, more inclusive services and workplaces, with better access for the global majority. The guide also offers practical steps for implementation.

Access the full guide here: repository.uel.ac.uk/item/8yvv3





### Somerford Grove Practice



# Key words: co-designing an in-house equality, diversity and inclusion (EDI) team to review and update policy and improve patient communication.

In 2023, City and Hackney Neighbourhoods
Programme Team started a project to improve antiracist policies and to address health inequalities.
The project aimed to co-design improvements
through workshops that would help bring antiracist ideas into the services provided to people
from global majority communities living in the
City and Hackney. The actions learned from the
workshops were finalised in 2024, and anti-racist
principles were developed by Dr Darren Sharpe,
Associate Director of the Institute for Connected
Communities at the University of East London, and
the City and Hackney Neighbourhood Teams.

In October 2024, two clinical services in Hackney were chosen to pilot anti-racist coaching sessions, which included these new anti-racist principles. One of the services was Somerford Grove Practice, a GP surgery in the Clissold Park area of Hackney. Clissold Park has a population of 35,379, with 42% of its residents being from global majority backgrounds. The area is less deprived than other parts of Hackney, but residents here have a higher rate of long-term health conditions (Healthwatch Hackney, 2023).

Somerford Grove Practice has 11,300 patients and serves diverse communities, including the Hasidic Jewish, Turkish, and Afro-Caribbean populations of Hackney. The practice has four GP partners, seven salaried GPs, one nurse associate, three pharmacy technicians, three nurses, one healthcare assistant, one practice manager, five administrators, seven receptionists, and one clinical pharmacist. From October to December 2024, Dr Darren Sharpe and Jorge Castro, a PhD student, delivered three one-hour anti-racist coaching sessions at the practice.

These sessions were held in a meeting room, and they were designed around the anti-racist principles.

This pilot project had the following objectives:

- 1. Identify who needs to be involved in the sessions.
- 2. Understand the service improvement issue.
- 3. Plan for change.
- 4. Test out change ideas (and measures).
- 5. Ensure the sustainability of the changes.

The first three objectives were achieved during the sessions.

# Who Needs to Be Involved? – Conversations with Anti-Racist Champions

To identify who should be involved in the sessions, a GP partner and mental health lead at the practice was chosen as the anti-racist champion. The anti-racist champion promoted the coaching sessions to her colleagues, and she facilitated conversations by sharing her own experiences in learning and applying anti-racist practices. Dr Darren Sharpe provided three-way leadership coaching sessions to the anti-racist champion to support her in this role.

The anti-racist champion invited a group of staff members who were interested in taking part in the sessions as part of their protected training time. She invited both clinical and administrative staff, as she wanted everyone at the practice to be knowledgeable about anti-racism and anti-racist practices.

#### Understanding the Service Improvement Issue

The first session took place in October 2024, and it was attended by 17 staff members, more than half of whom (58.82%) were from global majority backgrounds. During this session, the anti-racist principles were introduced. Staff were then asked what training they had received on anti-racism, and, while most members identified that they had done mandatory eLearning, they felt that this training did not provide the confidence they needed to enact anti-racist principles as part of their practice. Staff were then divided into groups to discuss areas of work in which they would like to promote racial equality, using the anti-racist principles. The group identified three main themes:

- 1. Systems and policies to call out racism.
- 2. Improving accessibility to care.
- 3. Culturally competent resources.

In the second session, held in November 2024, staff shortlisted and refined these themes, and identified areas where they wanted to see change. The session included an exercise on white privilege and its impact on health inequalities and antiracist practices. While some staff found it difficult to talk about white privilege, it sparked important conversations about how societal factors influence healthcare delivery. With an anti-racist lens, staff identified that they wanted to focus on 'calling out racism', 'improving access for non-English speakers', and 'providing more culturally competent resources.

#### **Planning for Change**

In the second and third sessions, staff identified steps to address the issues raised. These included updating practice policies (e.g. NHS Employment Policy on Dignity at Work or NHS Anti-Harassment and Bullying Policy) to include specific guidelines for tackling racism and discrimination, and forming and resourcing an 'Equality, Diversity, and Inclusion Team' at the practice. In the third session, Irene Ebyarimpa, Improvement Advisor at Homerton Healthcare NHS Foundation Trust, joined the group to help create a logical model for implementing these changes. Irene will support the practice in testing and ensuring that these changes are sustainable.

An anti-racist working group has been established within the practice, facilitated by Irene, to support the team to develop an anti-racist toolkit which encompasses the changes staff wanted to see to address the issues raised. Staff have been given protected time to attend the working group and together have created a mission statement for what the anti-racist group wants to achieve.

#### Learners' feedback

By the end of this process, staff expressed excitement about seeing the potential changes take place, and they were grateful for the opportunity to discuss anti-racism at the practice. A feedback survey was completed by ten out of seventeen of the participants. Most participants said that they joined the sessions to learn more about racism, and that they were curious to see how it would be addressed. Nine out of ten staff believed that the sessions helped them understand how racism affects both service users and staff, and how they could help address racism in the practice. Before the sessions, 30% of respondents felt not at all confident in using antiracist practices; by the end, only 10% still felt that way. Staff felt that the sessions were well-run, but they suggested that longer sessions with more examples and stories about addressing racism would be helpful.

### **Hackney Ark Centre**



## Key words: recruitment and promoting a diverse workforce to provide holistic care.

In 2023, the City and Hackney Neighbourhood Programme team launched a project to improve anti-racist policies and to address health inequalities, with a focus on cardiovascular disease. The project aimed to co-design actions and learning to introduce anti-racism approaches, helping to improve services for people from global majority communities living in the City and Hackney. The learning actions were finalised in 2024, and a set of anti-racist principles were created by Dr Darren Sharpe, Associate Director of the Institute for Connected Communities at the University of East London, and the City and Hackney Neighbourhood Teams.

In October 2024, two clinical services in the London Borough of Hackney were selected to pilot antiracist principles that included group and champion coaching sessions. One of the services chosen was Hackney Ark, a centre that provides a range of health, educational, and social care services for children and families with special educational needs and disabilities (SEND). The Ark is part of the Clissold Park neighbourhood and is located in the Shackell ward, but it serves children and families living or attending school in both the City of London and the London Borough of Hackney. Hackney has a higher percentage of children with SEND (19%) compared to the Northeast London average (15%) (City and Hackney Public Health Team, 2024). Children from ethnic groups such as travellers of Irish heritage, mixed white and black Caribbean, and black ethnicities, have a higher prevalence of SEND than the general population (City and Hackney Public Health Team, 2024).

In both the City of London and Hackney, speech and language therapy is the most used service for children with SEND. Hackney Ark provides care to a diverse population, including children and families from black African, Caribbean, Hasidic Jewish, and Turkish backgrounds. The Ark provides services such as information and signposting, assessment and diagnostic services, and medical support to children and their families. This case study will describe the anti-racist coaching sessions that took place from October to December 2024, during which three one-hour coaching sessions were delivered by Dr Darren Sharpe and Jorge Castro, a PhD student. Two of the sessions took place via MS Teams, and one took place in-person at the Ark. The content of the sessions was designed based on anti-racist principles, and the project had the following objectives:

- Identify who needs to be involved in the sessions.
- 2. Understand the service improvement issue.
- 3. Plan for change.
- 4. Test out change ideas (and measures).
- 5. Ensure the sustainability of the changes.

The anti-racist sessions achieved objectives one, two, and three.

# Who Needs to Be Involved? – Conversations with Anti-Racist Champion

To identify the key people who should be involved in the anti-racist sessions at Hackney Ark, the Head of Therapies for Children and Young People at the Centre was invited to join the project as an anti-racist champion. This senior clinician's role was to promote the anti-racist sessions to her colleagues and to share her own experiences with anti-racist practices during the coaching sessions to

facilitate discussion, encouraging open and honest conversations, and ensuring that participants felt safe to express their experiences and perspectives. The anti-racist champion also promoted reflection on individual and collective biases, guided conversations around systemic barriers, and supported the sessions attendees in developing practical actions to embed anti-racist principles in daily practice.

The anti-racist champion, along with Dr Sharpe, identified the group of staff members who needed to attend the sessions. She invited a group of senior colleagues who she line manages and who have clinical lead positions. The managers from each service were chosen to ensure that diverse perspectives were present in the conversation, to encourage peer learning, and to promote systematic changes throughout the service as a whole. To support the anti-racist champion in her role, Dr Sharpe provided her with three-way leadership coaching. In these sessions, the antiracist champion from the ARK and Somerford Grove Practice and Dr Sharpe also discussed and refined the thematic focus of the sessions, as well as reflections and feedback.

#### Understanding the Service Improvement Issue

The first anti-racist session took place in October 2024 via MS Teams, with 11 staff members attending. Seven of the participants were from a white British background. At the start of the session, Dr Sharpe and the anti-racist champion introduced the purpose of the coaching sessions. Jorge Castro then asked participants to introduce themselves, their roles, and their previous experience with anti-racism training. Five participants had received online training or had attended anti-racism events, three had received no previous training, and three had completed unconscious bias training.

After this, Dr Sharpe introduced the anti-racist principles and asked participants to think about which area of their service they would like to focus on for anti-racism work. The participants

shared their thoughts in a Mentimeter survey, and Dr Sharpe identified common themes in their responses. The themes that emerged were:

- 1. Recruiting a diverse workforce.
- 2. Holistic care.
- 3. Dealing with complaints.

These themes were revisited and refined in the second session, held at the Ark in November 2024. To refine these themes with an anti-racist lens, Dr Sharpe led an exercise where attendees reflected on what they understood by "whiteness" and "white privilege". Although some participants were unsure about this exercise at first, further explanation by Dr Sharpe helped them to engage. After this activity, participants identified the following service improvement issues to focus on:

- 1. Increasing holistic care.
- 2. Recruiting and progressing a more diverse workforce.

Participants agreed that a diverse workforce was necessary to achieve holistic care, and to improve the service for children and families from diverse backgrounds.

#### **Planning for Change**

In the third and final session, conducted via MS Teams, Irene Ebyarimpa, Improvement Advisor at Homerton Healthcare NHS Foundation Trust, joined to help create a logical model to implement the proposed changes to address the issues identified by the Ark staff. Irene will support the practice in testing and ensuring the sustainability of these changes (Objectives 4 and 5). During the session, participants worked alongside Irene, Dr Sharpe, and Jorge to identify the inputs, outputs, and outcomes needed to increase holistic care and to recruit a more diverse workforce. They discussed the importance of improving community spaces for families, creating protected time for projects, and increasing the pool of diverse staff members on interview panels as key steps to achieve these goals.

#### Learners' Feedback

By the end of the process, attendees expressed appreciation for the sessions, and they highlighted the importance and impact of creating a safe environment for discussing difficult but important conversations about racism and white privilege. Participants valued the real-life scenarios that were discussed during the sessions, which facilitated a deeper understanding of the experiences of racism and discrimination. To improve the sessions, participants suggested having more practical examples of implementing anti-racist practices within the service and clinical settings, alongside ongoing follow-up sessions that reinforce the learning and that measure learning progress. Although the participants believe that having an anti-racist framework is necessary, due to the high workload, they would like more practical guidelines regarding anti-racist practices.

The sessions highlighted the shortfalls of a predominantly white profession in language therapy, which under-serves multi-ethnic communities. Language and identity are closely linked in treatment, so therapists must understand the cultural and linguistic needs of diverse individuals. Without this awareness, therapy can become inadequate or culturally insensitive, impacting those from multi-ethnic backgrounds.

In the UK, language therapy services, like many healthcare professions, have lacked diversity, which makes it difficult to effectively support clients from varied cultural backgrounds. Language therapists must be both linguistically skilled and culturally competent to address these needs.

To improve this, training and recruitment efforts should focus on increasing diversity and integrating cultural sensitivity into language therapy education. This would ensure that therapy services are inclusive and responsive to the diverse communities they serve.