

# Camden neighbourhoods

Health and Wellbeing Board  
12 March 2025



# In this deck

1. Camden's vision and direction of travel for neighbourhoods
2. Examples of work to bring about a more connected statutory service offer in neighbourhoods, including recent test and learns
3. Work to bring about a more collaborative and supported voluntary sector, and enhanced offer of informal support in neighbourhoods
4. Emerging learnings and roadmap for the future

## **Purpose of this report**

To support a deep dive discussion by the Health and Wellbeing Board on Neighbourhoods. Providing an update on work happening across different parts of the council and the NHS, and within the community. This work is inclusive of, but not limited to, the emergence of Integrated Neighbourhood Teams (INTs).

# Vision and direction of travel

An overview of our neighbourhoods vision and the key challenges addressed through the work.

# The vision for Camden's neighbourhoods

## The 'north-star' for neighbourhood-based services and support

In Camden, people and place lead the way. We are **accessible** to people where they live and want everyone to be **empowered** to live a good life. We want our services to be **local**, **connected** and built on **relationships**, **enabling** people to find solutions.

### \*Because we know that...

**Effective joined up working** happens in some but not all parts of the system, leading to an inconsistent experience of care

Residents feel that they are **passed from service to service**, explaining their story multiple times

Services are not always **connected to local VCSE networks**, missing opportunities to connect people to the wider offer of community-based support

Working at a neighbourhood level with local partners enables services to better **understand and respond to local need**

### We believe that...

We need to support and empower **services to collaborate**, internally and with others to find solutions for residents' needs

We need to transform the way we work, to take a **relationship centred approach** with our residents

We need to create and **nurture community led networks**, and **enhance connections** between statutory, voluntary and community level support

Neighbourhoods can be the delivery vehicle for a more sustainable, preventative and community based health and care system.

# The national mandate for change

## Our local ambitions are in line with a shift in national policy and practice

- NHS has been adapting to a model of [integrated care systems](#) to deliver joined up, place-based services since Health and Care Act 2022.
- The development of Integrated Neighbourhood Teams was a central recommendation of the [Fuller Stocktake](#), a 2022 report which reviewed primary care services in England.
- The Government have committed to a ['Neighbourhood Health Service'](#) to help drive a 'shift left':
  - hospital to primary care and community services
  - treatment to prevention
  - analogue to digital
- A new [10 Year Plan 2025](#) due in 2025 will set out plans for a more sustainable health system, rooted in neighbourhoods.
- The Government is running an [Independent Commission on Neighbourhoods](#)
- [Social Care and Family Hubs](#): Family Help, an all age, whole family model bringing together current targeted early help and child in need into a single system in localities. All local authorities expected to implement reforms by March 2026.
- A host of think-tanks and professional associations are advocating for a new and more sustainable form of public-sector delivery rooted in prevention, place and communities. Including [NHS Confederation](#), [Centre for Public Impact](#), and [New Local](#).



# Alignment with the NCL Neighbourhood ambitions

## Bringing Camden activity together with plans from the NCL ICB

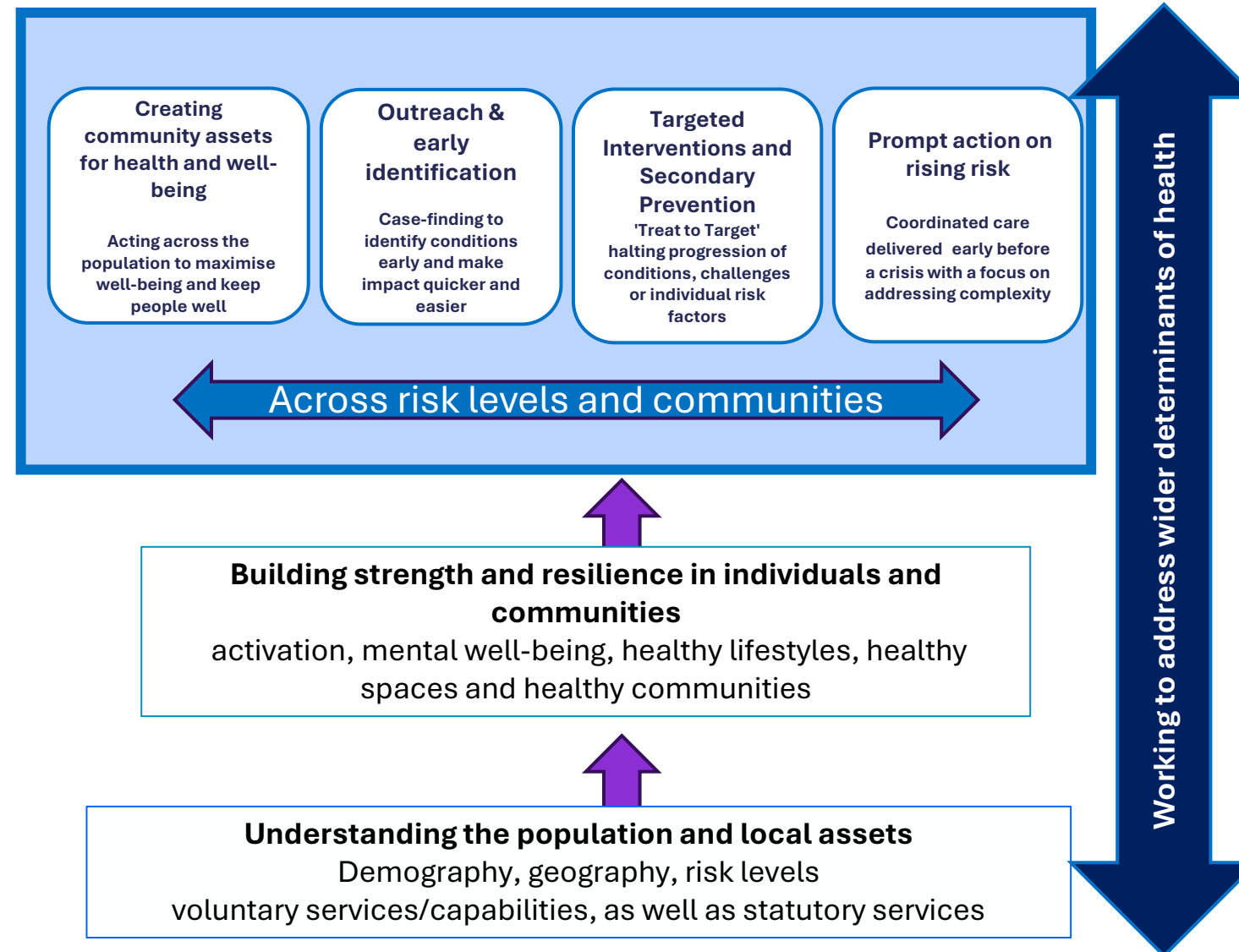
Camden is more mature in its ambition and work to date than some other places, particularly in exploration of INTs. The National policy debate has advanced in recent years resulting in the development of an ICB model for neighbourhoods which emerged in early 2025 (see next two slides). The ICB model and Camden approach are informing each other and developing in partnership.

- Camden has well-developed neighbourhood models across Family Hubs and Children and Young Peoples services.
- Camden's long-standing Frailty and Complex Care Hub is well established and functions at borough and neighbourhood levels.
- Camden and NCL's emerging Neighbourhood models share a population health framing around start well, live well and age well.
- The East INT was established in Kentish Town in 2024, with enabling support from the ICB, particularly around Estates.
- Work to establish INTs in other parts of Camden speaks to different aspects of the ICB model.
- Camden's approach to evaluation of the East INT accords with the NCL's "staff, residents, system" pillars of change.
- Camden have been regularly collaborating, sharing plans and updates with NCL via the relevant governance forums.
- Camden is enhancing its neighbourhood infrastructure and working openly to demonstrate how aspects of neighbourhood working might apply in other areas across NCL. Defining the operational 'how' of neighbourhood health teams and elements to scale.

Alongside and building on the developments in Camden, NCL ICB are consulting on a broader ICS ambition for a neighbourhood health service with partners across the five boroughs. There is an opportunity to use the scale of this approach to benefit Camden developments around wider enablers such as digital interoperability, estates and more.

# NCL Neighbourhood ambition. Key Features

- The distinctive feature is the **purposeful and consistent connection between the context of people's lives and the support offered** to increase efficacy and achieve improved outcomes
- The **link between statutory and voluntary services** is also fundamental. Voluntary services are the bridge to communities and offer hyper-local, trusted support for those most in need.
- This is **person centred and asset-based** approach to generate individual and community strength and resilience.
- Action is rooted in a more **sophisticated understanding of the population and drivers of variation in outcomes**. Population health data + qualitative insight + coproduction.
- **Can be applied to a range of population groups and priority cohorts** and works meaningfully across the life course (Start, Live, Age Well)

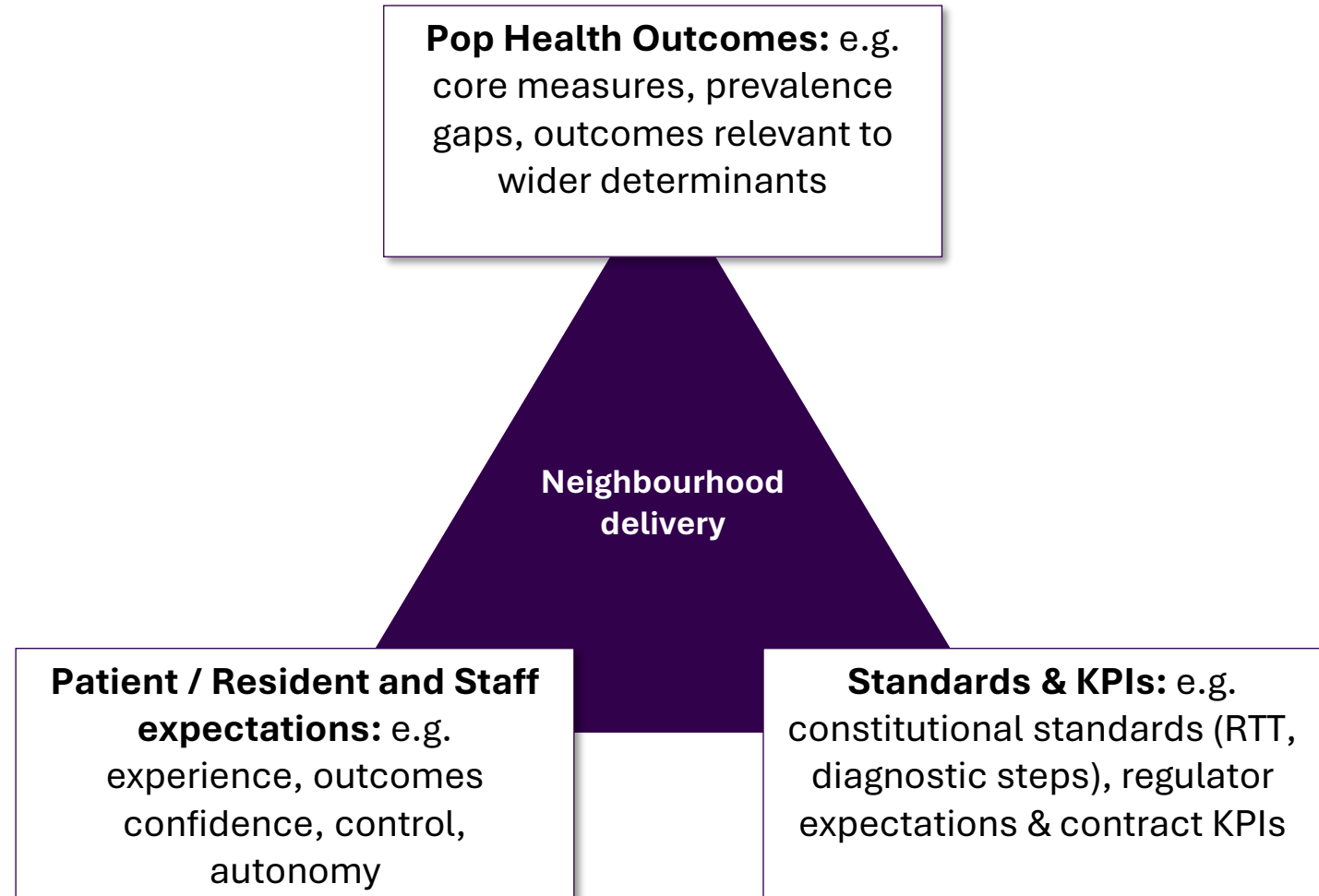


# NCL Neighbourhood ambition. Impact

We believe Neighbourhoods can help tackle three core sets of measures:

- Pop health outcomes –the opportunity to deliver health & care differently and purposefully improve population health
- Standards – addressing core and statutory requirements to support operational needs and wider credibility
- Patient/resident and Staff expectations – neighbourhoods will be rooted in communities, understanding or responding to their needs

Significant work is needed around benefits realisation including defining the range of potential benefits and impacts, monitoring and attribution





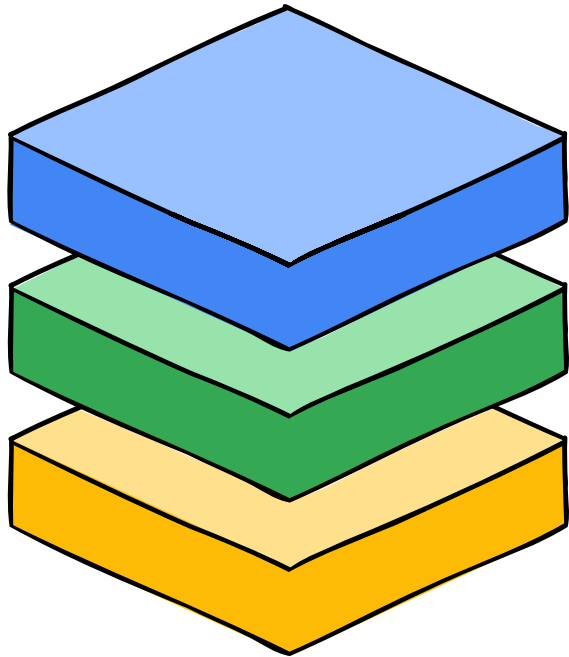
# Forthcoming Camden Annual Public Health Report 2025

## Theme: Healthy Places

- This year's Annual Public Health Report launching in April 2025, is on 'Healthy Places'
- Complementing the Council and borough partnerships ambitions around neighbourhoods, this report:
  - Raises awareness of the influence of place on health and wellbeing
  - Independently appraises the academic evidence base on place-based approaches
  - Summarises the current policy landscape and examples of place-based activity in Camden
  - Analyses the data on key health and wellbeing indicators across each of the five Camden neighbourhoods
  - Summarises the best practice on key challenges and facilitators to effective place-based working
- Emerging findings validate and reinforce the broad approach being developed in Camden
- Report to be considered by CICE before coming to Health and Wellbeing Board in Spring/Summer.



# Thinking about Neighbourhoods. In Camden we aim to enhance the connections between different the layers of a Neighbourhood ecosystem



**A well-connected statutory service offer**

GPs, schools, NHS (primary, intermediary and secondary care) and council services – e.g. General Practice, Family Hubs, INTs, Frailty MDTs, Housing, NHS trusts/programmes

**A collaborative and supported voluntary sector**

Registered charities and organisations delivering help and support – e.g. Creative Health Camden, Brandon Centre, Greenwood Centre, NW5 Youth Project, GLL, Clean Break

**Visible and confident grassroots community level support**

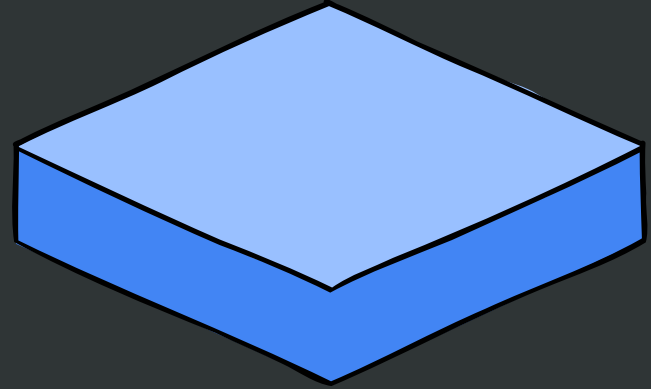
Informal groups and associations, active citizens – e.g. TRAs, Kentish Town Pedals, Self Sufficient Women, Transition Kentish Town.

Camden has been developing its Neighbourhoods across all these areas. Through the work, we seek to create dynamic and innovative local networks that work together seamlessly to empower healthy, happy and independent lives across the life course.

Ensuring everyone can start well, live well and age well.

# **A well-connected statutory service offer in neighbourhoods**

Recent activity to test, evolve and  
connect service models in Camden  
neighbourhoods



# Camden Neighbourhood-based services: a roadmap for change

## Developing neighbourhoods model (short-term - long-term)

### Legacy Model

A more fragmented and reactive model that needs to be updated to better serve more complex local needs.

### Shifting the system to a neighbourhoods model

Prototypes of place based collaborative services, building on what works well already. E.g. Family Hubs (Start Well) and Complex Care & Frailty Hub (Age Well)

### Services as part of the local community, centred on prevention and early help

A renewed system of timely, placed based support focused on relationships and rooted in the community.

## What this looks like:

### Understanding local need and staff barriers

Using data, evidence, and participatory research with staff to better understand residents' needs and staff barriers to neighborhood work.

### Bringing the voice of staff and residents into the neighbourhoods model.

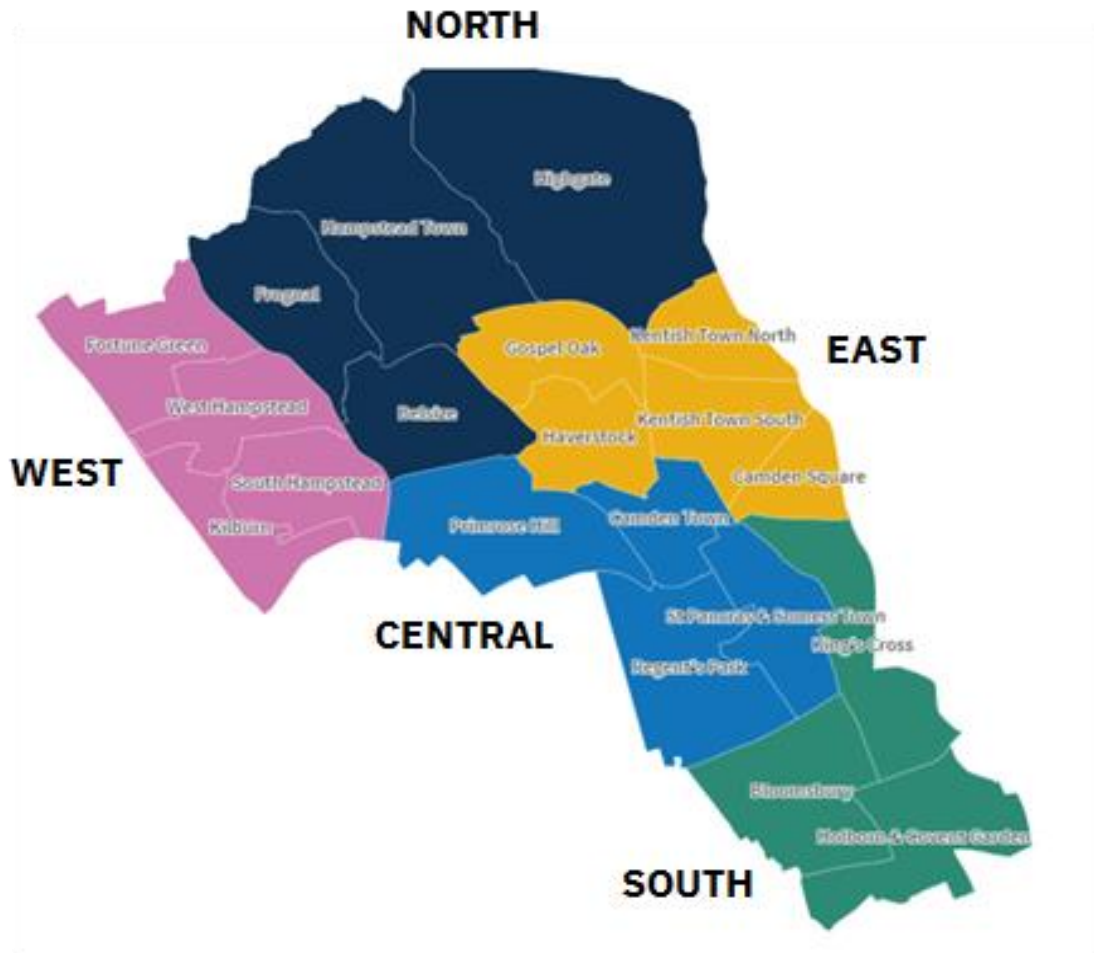
Testing out new ways of working and engaging residents to make sure those with complex needs and the wider community are supported. Employing a genuine 'test and learn' approach.

### Residents + staff continuously involved in service improvement

A sustainable and organic model of system change with routine feedback mechanisms to ensure residents + staff have input to local service delivery.  
A platform for population health management interventions.

# Geography and service delivery

Camden's borough partnership has a shared understanding of neighbourhoods



Camden Council and local NHS organisations have worked together to develop a consistent understanding of neighbourhood (locality) footprints\*.

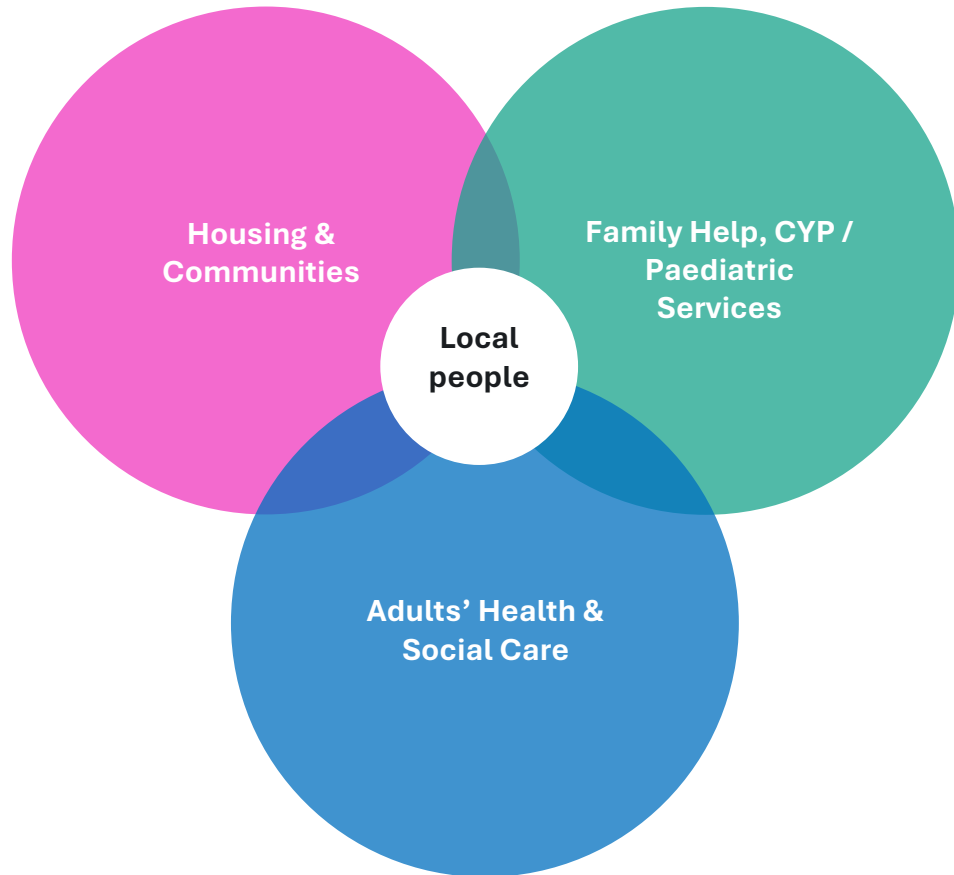
- **LBC Adult Social Care** realigned Support & Safeguarding, becoming Adult Social Care Neighbourhoods in 2024.
- **CNWL Camden Integrated Community Health** realigned to the five neighbourhoods in 2024.
- **LBC Housing** is currently realigning onto the five neighbourhoods.
- **LBC Repairs** is going to realign onto the five neighbourhoods.
- **NLFT Mental Health** teams are realigning their three locality areas that overlay the five neighbourhoods.
- **GPs** have demonstrated flexibility and willingness to work across PCNs, building strong ties with the council and other services.

The changes are providing the platform for integrated teams to come together and sustain in neighbourhoods.

\*Not all council and NHS services, including GPs, will align their teams to the five neighbourhood footprints. Smaller teams will continue to work borough-wide or at system level but connect better with neighbourhood teams.



# Our recent work has started by building a more networked offer of neighbourhood-based services and staff, rooted in place



Services working together in support of the neighbourhood population, across the life course

*Start Well, Live Well and Age Well*

Through test and learn, we are encouraging staff and services who tend to support similar population cohorts to cluster together and innovate.

GPs, Schools, CAHMS, CYP NHS Community Services, SEND, Early Help, Health Visiting, Nurseries...

Housing and Landlord Services, Community Safety, Repairs, Caretaking and Estate Management, private sector housing support...

GPs and Social Prescribing, Adult Social Care, District Nursing, Community Rehab, Care Agencies, Mental Health Teams, commissioned VCSE organisations (E.g. Likewise, MIND, Age UK Camden)...

**We are building learning environments** that allow for greater join up of support, information sharing and sustainable population health management interventions. The work is enhancing human relationships within and across service 'clusters' and tends to centre around people with a more complex range of needs. It builds on existing activity in Camden.



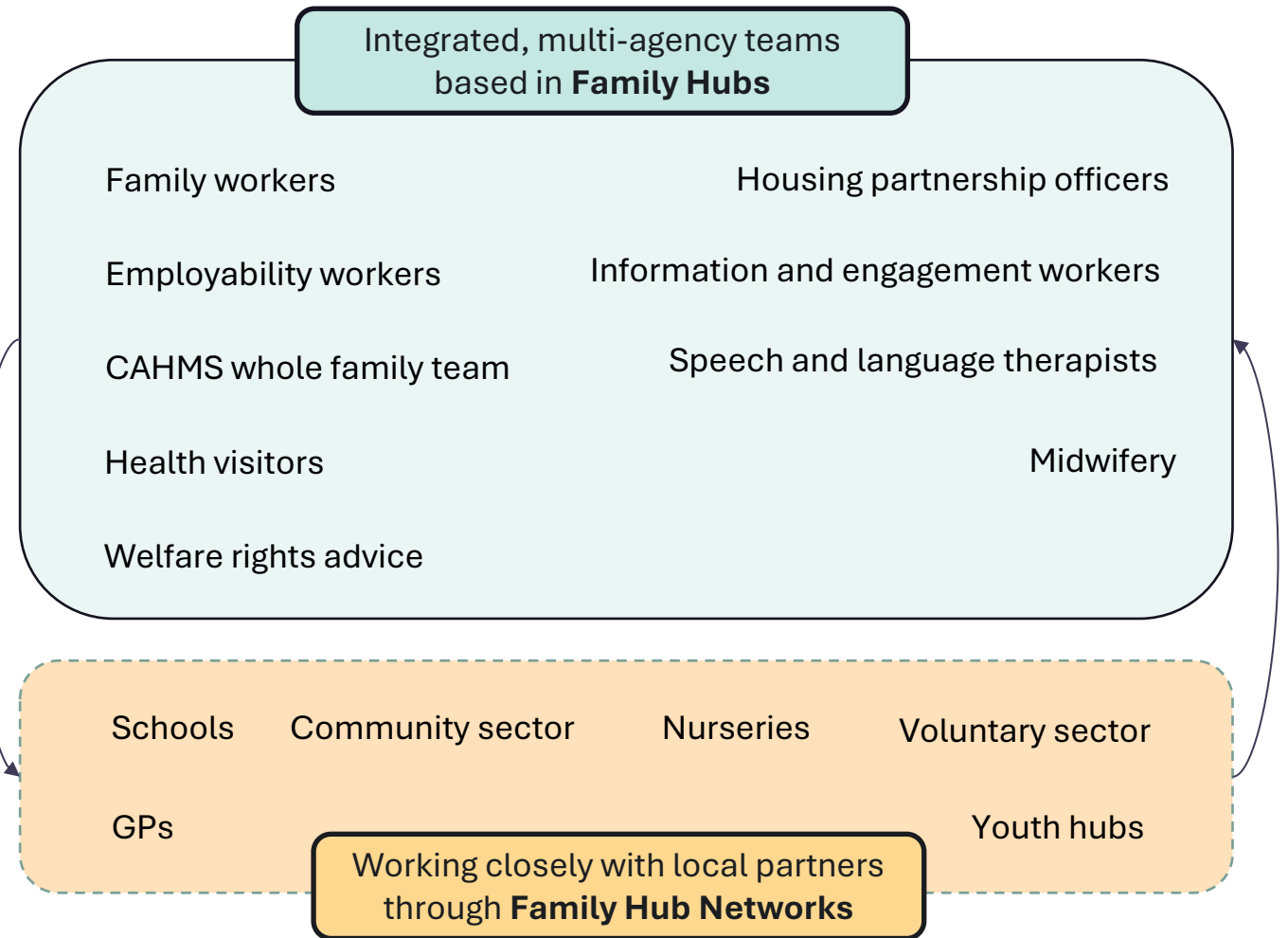
# Family Hubs and the emergence of Family Help

Perhaps our most mature demonstration of a neighbourhood approach

**Camden's Children's Centres and Family Hubs** date back to the Sure Start programme and have been operating on a locality (neighbourhood) basis for 15 years, with multi-agency teams delivering outstanding early years support to families.

Camden Council's Children's & Learning directorate is currently developing the concept of **Family Help** across early help and social care child in need casework, connecting these to a Camden Neighbourhoods model.

Integrated locality-based teams work in close partnership with the voluntary and community sector through **Family Hub Networks**.



# Redesign of the Camden Integrated Paediatric Service to 'Neighbourhood Services 4 Children' (NP4C)

Led by the ICB Camden Clinical Lead for Start Well, Chaima Hale, the objective of this strand of work is to redesign Camden's Integrated Paediatric Service monthly Multi-Disciplinary Meetings (MDMs), aligning with Camden's neighbourhood approach. Trials merging Central Hampstead and West Camden PCNs into a single West Neighbourhood CYP MDM have demonstrated that a neighbourhood model can improve engagement, collaboration, and utilisation.

The proposed structure aims to optimise resource allocation, support local stakeholder collaboration, and improve accessibility for CYP patients and families across the borough, forming closer ties with Family Hubs.

A rebranded 'Neighbourhood Teams for Children' (or NT4C) will mirror the Complex Care and Frailty MDM structure (Age Well) and tie in with the broader Camden neighbourhood approach.

This redesign includes:


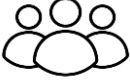
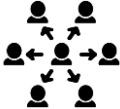





- **Creation of Five Neighbourhood-Based CYP MDMs:** South, Central, West, East, North.
- **Camden-Wide Access:** Introduce one F2F borough-wide MDM hosted by a Family Hub that provides all borough CYP patients and families access to MDMs twice monthly, enhancing accessibility and utilisation and connect community teams in person. Mirroring the Complex Care and Frailty MDM model.
- **Face-to-Face Meetings in Family Hubs:** Hold some of the new MDMs in person in designated Family Hubs to connect teams and promote co-location. This approach aligns with the Camden INTs agenda, developing stronger collaboration, integrated problem-solving and care delivery.

# Test & Learn activity in the East Neighbourhood



# New 'teams of teams' have been established in the East Neighbourhood

## Testing a range of things within new aligned environments

Structure		Geography	Teams work in support of consistent neighbourhood patches
		Teams	Team members come from multiple services and disciplines.
Resources		Orchestration (£)	A person to convene, build relationships, facilitate meetings, and guide
		Budget (£)	Access to a shared flexible pot of funding for rapid response
		Co-location	Shared space to sit and work together, build relationships and support people
Ways of working		Collaborative meetings	Regular time spent with colleagues from different services and agencies
		Agency and autonomy	Authority for staff to shape their own arrangements in each neighbourhood
		Systems and processes	Removing or mitigating misaligned systems and processes

This list is not exhaustive, but a reflection of the things trialled as part of test and learn activity in the East Neighbourhood

# The East Housing and Communities Team test & learn

Has been operating at Holmes Road Depot for over a year, bringing together:

Housing

Community  
Safety

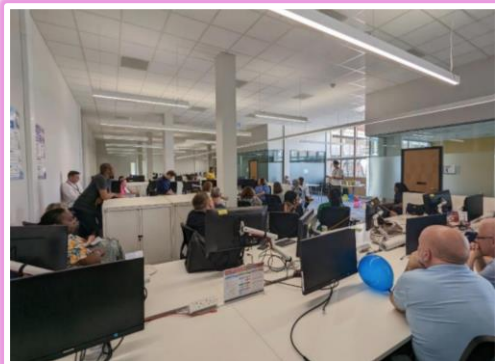
Repairs

Estate  
Management

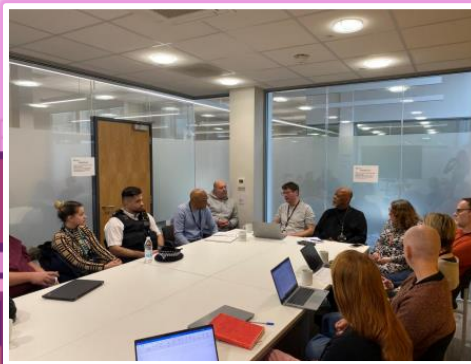
ASC and social  
prescribers

PICT (Mental  
Health)

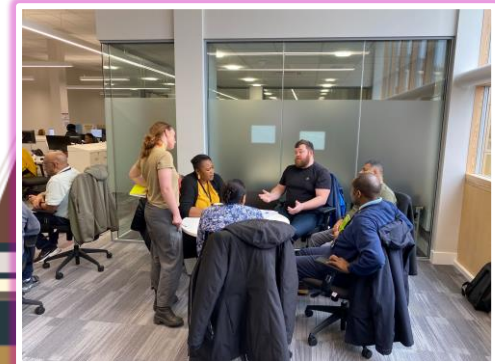
*Kick off meeting*



*A 'working together meeting'*



*A team retrospective*



Holmes  
Road





# The East Integrated Neighbourhood Team test & learn

Went live in Kentish Town Health Centre in October, bringing together

Adult Social  
Care (LBC)

District  
Nursing (NHS)

Physical  
Therapies  
(LBC & NHS)

Mental Health  
(NHS & LBC)

GPs and  
social  
prescribing  
(NHS)

Drug &  
Alcohol  
Support (CGL)



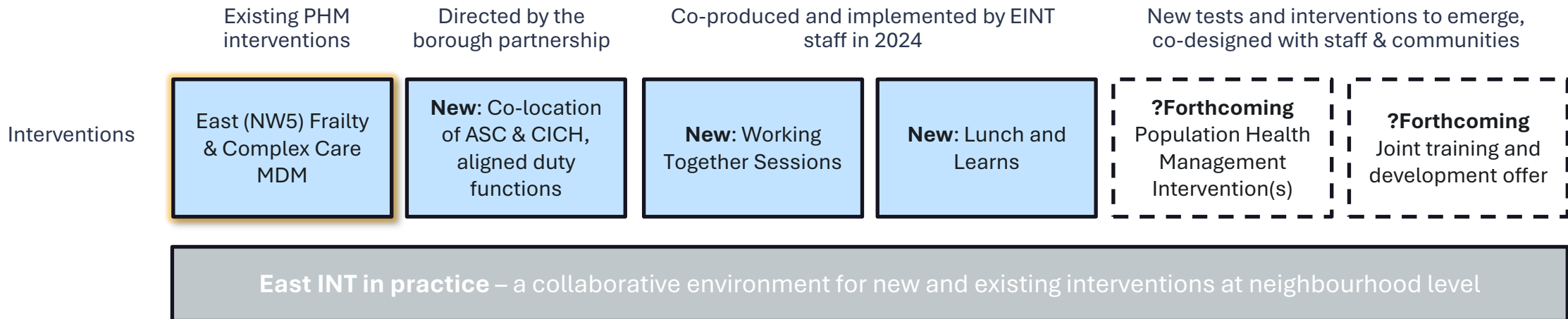
East INT launch party, October 2024



# INTs are complementary to Camden's well established Frailty and Complex Care Hub

Pioneered by the ICB Camden Clinical Lead for Age Well, Stuart McKay-Thomas, and established over many year, the [Frailty and Complex Care Hub](#) is a core part of Camden's integrated partnership working. Here, a borough-wide MDM 'hub' meets regularly, with participation from GPs, secondary care specialists, community nursing, social care and more to ensure that adults with complex care needs receive the right support. Underneath the borough-wide hub exists a collection of neighbourhood-based MDMs, which are chaired by a local GP and include local health and care practitioners from a variety of services. The borough-wide MDM is generally for cases with a greater acuity of need, the neighbourhood MDMs support aligned care in the community.

The neighbourhood-based MDMs can be understood within the context of new INTs, as one of many ways that staff are working together to empower healthy, happy and more independent lives. The East INT, for example, includes the East Frailty & Complex Care and is experimenting with holding the meetings in-person at Kentish Town Health Centre from March 2025.



**East INT shared purpose:** Empower adults to live healthy, happy and independent lives

# What we are hearing: Orchestration

## As a critical success factor for integrated teams

Investment in system integrators who convene partners, build relationships, facilitate meetings, and curate the strategic direction of the work.

### Findings from discovery work

“(Leaders of integrated teams) require different skills...(including): ‘inspiring intent to work together’, ‘creating the conditions’, ‘balancing multiple perspectives’, ‘working with power’, ‘taking a wider view’, ‘a commitment to learning and development’ and ‘clarifying complexity’.

Source: [Journal of Integrated Care, 2021](#)

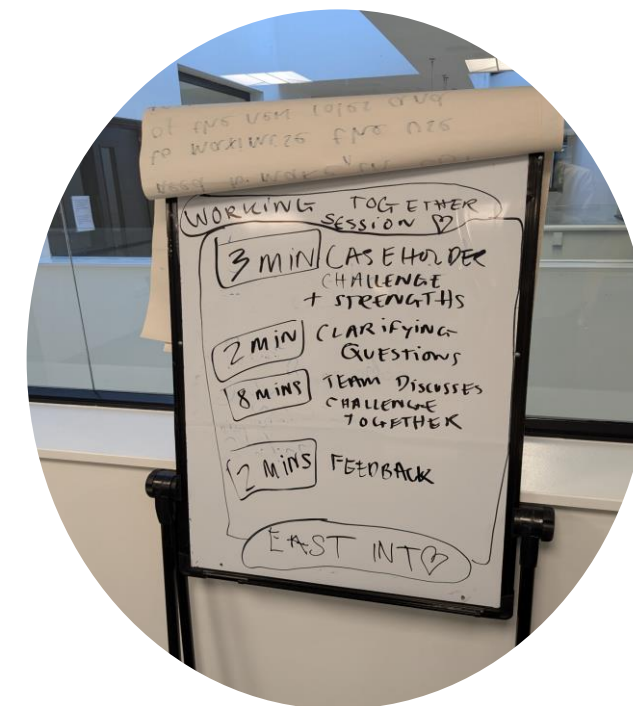
“Transformation programmes require leaders with grit, resilience and credibility”

Source: [Social Care Institute for Excellence, 2020](#)

“You’re our therapist, **the glue that keeps us together!**” – Nhood Housing Officer

“It’s been really important to have the working together sessions **independently facilitated**. It’s made it more of a learning environment” – Community Rehab OT

“Having Alice involved and overseeing the Kentish Town pilot has been key in **allowing managers from differing services to remain open minded to cross team working** and has also encouraged input and collaborative working from external providers.” – East Housing & Communities team manager



Skilled facilitation of a multi-agency working together session. Held in person, based on ‘Wise Crowds’ reflective practice methodology

# Co-location

Staff from different teams share office space and form closer ties. Working within walking distance of the people who draw on their care and support.

## Co-located teams in the East Neighbourhood

For the **East INT**, council Adult Social Care staff and NHS health practitioners work alongside each another every day. They are based upstairs from the James Wigg Practice and have improved relationships to other practices based in the area.

Staff from the East Adult Social Care team have spoken of newfound benefits of working in closer proximity to the people they support.

**At Holmes Road, Housing and Communities Teams sit together on Wednesdays and Thursdays.** This has included Neighbourhood Housing Officers, Caretakers, Repairs Liason Team and Community Safety.

'Tap on the shoulder time' from 10-11am on Wednesdays is an agreed time where all staff are available to each other for information and advice.

"My commute to work is longer than before but I don't mind, I want to be here, working close to people. This is real. This is why I became a social worker".

**Social Worker, Adult Social Care**

"It's been amazing having such easy access to adult social care. It's already made such a difference. I'm telling my friends in the other teams!"

**District Nurse Team Lead, CICH**

"Working face to face creates empathy and helps us to understand resident voices more."

**Repairs Liason Officer**

"This allowed you to get to know the whole team, other teams. Finding out what the actual roles are, how they can support in the work, building up relationships, better partnership working, being able to collaboratively share ideas, move those stuck cases or resolves some of those stuck cases, being able to signpost."

**Neighbourhood Housing Officer**

# Collaborative meetings

## Multi-agency meetings that enable joint casework, shared learning and support

Different multi-agency meetings, for different purposes across neighbourhood settings	
<b>INT Working Together Sessions</b>	Bringing together staff across health and care teams to work through complex cases and challenges that feel 'stuck' on. Housing colleagues and others attend when they have cases to discuss. Early impact: <ul style="list-style-type: none"> <li>• Staff gain experienced perspectives/advice from across agencies</li> <li>• Sharing risk and advancing support on complex cases</li> <li>• Reflective practice and peer to peer support.</li> <li>• Learning about different services, pathways and options available.</li> </ul>
<b>INT Lunch and Learns</b>  <b>Fortnightly learning sessions</b>	Lunch & Learns are providing an opportunity for staff to learn from each other. Staff groups, services and organisations take turns to host, helping build a collective knowledge of the full offer of support available locally. These sessions are very popular, held in-person, and help to demystify different disciplines, spurring conversation about how teams might work together and close the gaps between their services
<b>Neighbourhood Connects</b>	Neighbourhood Connects meetings enable staff from anywhere in the East Neighbourhood to talk directly to Housing and Communities colleagues about the cases they are supporting. For example, social prescribers from local GP practices often attend the monthly Neighbourhoods Connects meeting at Holmes Rd and have described them as 'transformational'.

"It's been a great experience and has definitely helped lighten my workload as some problems have been easier to resolve by working together"

**Neighbourhood Housing Manager**

I just wanted to say I really enjoyed the 'lunch and learn'. It was so interesting to hear all about physical therapies. I enjoyed how everyone sat in a circle, it was a relaxed space to listen and share... It was good to meet in person, ask questions and learn from each other.

**Social prescriber, the Brandon Centre**

"It allows you to get to know the whole team, other teams. Finding out what the actual roles are and how they can support in the work... building up relationships, better partnership working, being able to share ideas, move those stuck cases or resolve some of those stuck cases, being able to signpost."

**Neighbourhood Housing Officer**

# Agency and autonomy

## A test and learn approach ensures that staff have control.

Our **test and learn approach** begins with active listening to residents, patients and staff about their experience engaging with or working in our health and care system.

It is allowing teams to respond to challenges quickly by experimenting with different ideas, establishing new ways of working and testing them out. We then use those insights to adapt and improve.

Monthly learning cycles and ‘retrospective sessions’ allow test and learn activities to become a regular part of teams’ working patterns. New ideas are reviewed and changed until they are either stood down or embedded in the neighbourhood operating model. These regular patterns can sustain learning environments in the long-term.

“For integration to thrive, system leaders will need the courage to devolve power to frontline teams, only then will truly creative solutions emerge.”

**Nuffield Trust, 2024**



A Lunch & Learn session at the Caversham Group Practice

“I feel more empowered to talk to people and share ideas, collaborate and get things in the right direction.”

**Caretaking Officer**

“What’s good is that we can always test it out differently next time.”

**Consultant Psychiatrist** commenting on the methodology trialled in East INT Working Together Session

# So what?

## East Housing & Communities Team story of difference: Sandra

A Social Prescriber from a local GP Practice brought a case to the Neighbourhoods Connect Session. She described 'Sandra', an older resident with restricted mobility who had spoken to the Social Prescriber about her trouble with a new fire door, impacting her quality of life. Unlike previously, the Social Prescriber was able to connect with the right Housing teams quickly to find the solution that mattered most to Sandra.

Sandra is an older resident living in Kentish Town who recently had the front door to her house replaced in line with fire safety regulations. However, soon afterwards, Sandra found that the new fire door was too heavy for her to open and close independently. Sandra was already suffering with several medical conditions that severely restricting her mobility. The new door added to her stress, making it difficult for her to live independently and allow people to visit. She withdrew. Increasingly she ran the risk of becoming socially isolated.

Sandra had spoken of her situation *not* to a housing or repairs officer, but to Christina, a Social Prescriber at Parliament Hill Medical Centre with whom she had a good relationship.

As part of the test and learn, the Social Prescriber attends the East Neighbourhood Connect Session, a space for staff from any team or service in the neighbourhood to discuss issues with the East Housing & Communities Team. She brought the case to the team's attention in the hope that they might be able to help. Christina was able to speak directly with Repairs Liaison Manager, who called Sandra that day and arranged an in-person visit. Through working in this joined up way, the Repairs Team were able to quickly change the door and remedy the situation for Sandra.

**This simple intervention didn't resolve Sandra's medical conditions, but it did deliver a rapid response to what mattered most to her at that time and may well have prevented her needs from escalating. Without the Neighbourhood Connects sessions, the GP practice would have found it much harder to access the advice from Housing.**

Our Social Prescriber later described the neighbourhoods test and learn activity as 'transformational'.





# So what?

## East INT story of difference: Miriam

**A Social Care Practitioner brought a case she was worried about to the INT Working Together Session. She described 'Miriam', a woman in her 80s, whose mental capacity appeared to have changed but was not receiving any care and support. She also wasn't allowing anyone into her property, even her family.**

Our Adult Social Care Practitioner felt stuck because she'd found out that Miriam - who'd been referred to the ASC - hadn't been registered with a GP since 2006. Despite no known history of physical or mental health conditions, Miriam had been verbally abusing her neighbours and had also been found wandering by herself late at night in central London. Miriam's family were concerned for her wellbeing and about the risk of a fire due to hoarding in her flat.

The practitioner discussed the situation in East INT Working Together Session, a reflective multi-agency session that meeting in-person every two weeks and employs elements of Team Around Me. In a supportive environment, she reflected on the circumstances and the group considered what appropriate next steps might be. A colleague from the mental health trust suggested a conversation with the Adult Mental Health Home Treatment team. The Social Care Practitioner hadn't been aware that she could approach this team without being registered with a practice. The GP also gave advice on how the family could re-register Miriam and agreed to make a quick call afterwards to speed up the process.

Following the Working Together Session, the family was supported to re-register Miriam with her former GP, which happened quickly. Contact was also made with the Older Adults Mental Health Team, who soon undertook a joint visit with the Social Care Practitioner. Following assessment by the Home Treatment Team, Miriam was diagnosed with likely Dementia and taken into hospital under the Mental Health Act. Support is also being put in place to identify suitable sheltered housing or supported living residential care. As a result, Miriam is in a safe place receiving the care she needs – while her family have greater peace of mind. Meanwhile, Neighbourhood Housing Officers are supporting with cleaning of her home.

**Without this advice, the practitioner would have continued to feel alone and 'stuck' while Miriam's condition is likely to have deteriorated. The right support reached Miriam more quickly than it may have done previously, with the INT arrangements helping to make this happen.**

Account of activity in East INT, November 2024 – January 2025



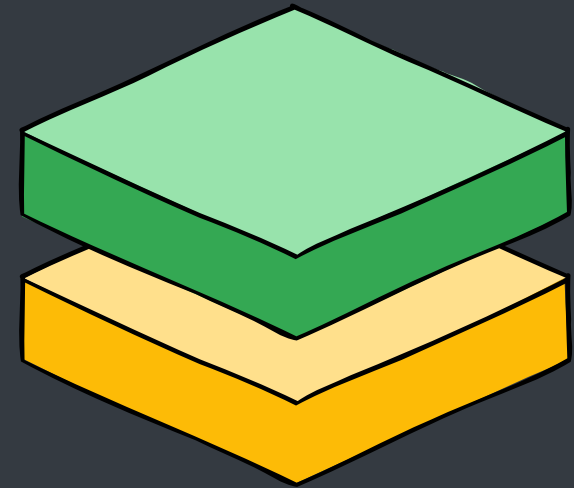
# Evaluating the impact of the test & learns

## What are we trying to achieve through new Neighbourhood Teams?

Outcome domain	East Housing and Communities Team	East Integrated Neighbourhood Team
Infrastructure	<ul style="list-style-type: none"> <li>Team infrastructure supports collaboration and uses resources effectively and efficiently</li> </ul>	<ul style="list-style-type: none"> <li>Camden borough partnership has a clearer understanding of the infrastructure and operational arrangements needed to support INTs across the borough.</li> </ul>
Workforce	<ul style="list-style-type: none"> <li>Staff feel supported in their role, connected to colleagues and are empowered to do their job.</li> <li>Staff are able and have the knowledge/ tools they need to do their jobs.</li> </ul>	<ul style="list-style-type: none"> <li>Staff benefit from a collaborative and empowered team culture, embedded within the community they serve.</li> </ul>
Residents	<ul style="list-style-type: none"> <li>Residents are heard and understood</li> <li>Residents can easily navigate our systems, and complex issues are dealt with</li> <li>We take a strengths-based approach and treat residents as individuals</li> </ul>	<ul style="list-style-type: none"> <li>The people we support have an overall improved quality of life, a positive experience of services and more autonomy over their health and wellbeing</li> </ul>
System	<ul style="list-style-type: none"> <li>Less failure demand across our teams</li> <li>Faster resolution of complex issues</li> <li>Homes in better condition</li> </ul>	<ul style="list-style-type: none"> <li>Reduced demand for primary and secondary care services in Camden and a more seamless community-based offer, particularly for those with multiple and complex needs.</li> </ul>

**A collaborative and  
supported voluntary  
sector, and**

**Visible and confident  
grassroots community  
support**



# A different way for the Council and NHS to work with communities

Through intense work in multiple neighbourhoods, we are finding that a different approach is required to enable neighbourhoods to flourish. Statutory sector partners need to embrace new roles, principles and power sharing.

What has proved important so far -

We've invested staff time in Neighbourhoods, **demonstrating dedication to place.**

It also helps us to better understand local need, challenges and ambitions.



By being present and visible, we are able to **get to know community leaders on a personal level.**



Demonstrating commitment to a place builds trust. Trust that we are serious about working together on real local priorities.

**But we can only move at the speed of trust.**

We are working in the open, **everyone is welcome.**

Difference is valued and everyone has something to contribute.



We really take time to listen all the ideas and suggestions.

**We get behind the energy of community leaders and act quickly.**



We **use our convening power** to bring together a range of partners and active residents across sectors to have **one conversation**, across the Neighbourhood.

# We've worked across Kentish Town and Kilburn, convening a strong network of existing social infrastructure



**Walkabouts**

Community led, open to all walkabouts to get to know the neighbourhood based on different themes.



**Open Meetings**

A chance to talk about local challenges, and how we might work together to solve them.



**Brands and websites**

Both projects have specific branded websites, which include a range of features.



**KentishTown**  
CONNECTS



# One Kilburn



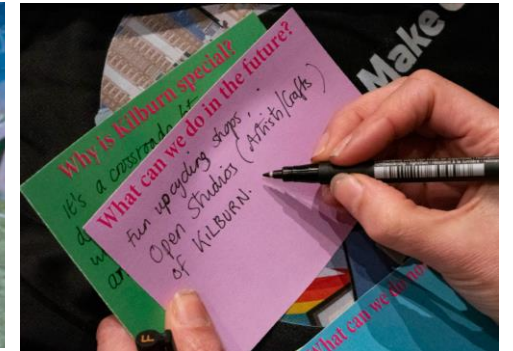
Local Priority 1:  
**Community Toilets.**



Local Priority 2:  
**One Kilburn Fund.**



Local Priority 3:  
**Highroad Improvements.**



## ONE KILBURN ACHIEVEMENTS in 2023 HERE'S TO MORE IN '24!



*"I feel really inspired having talked community with you all and look forward to investing in our shared neighbourhoods over time together"*

1K Community Fund applicant



# Kentish Town Connects



Local Priority 1:

**Run a Neighbourhood Summit.**



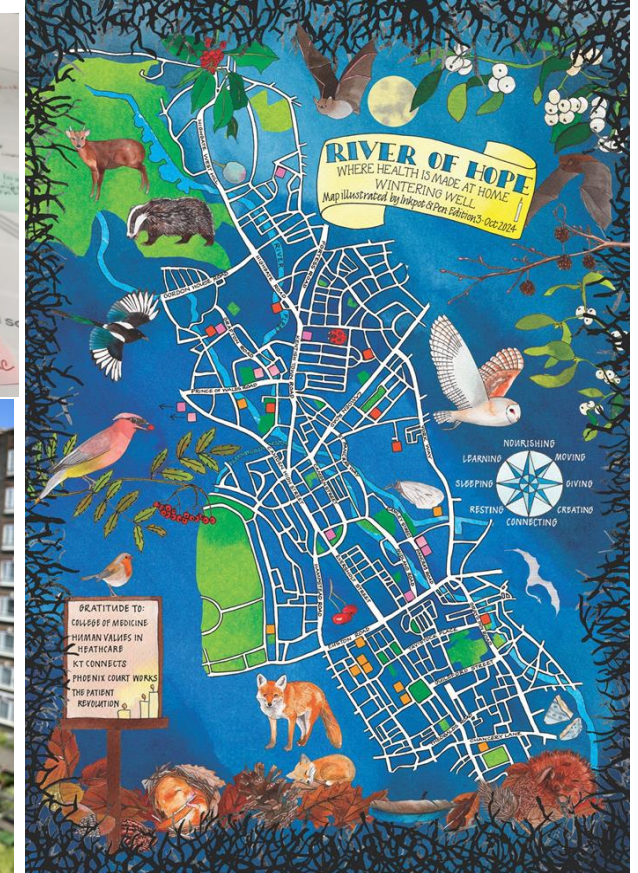
Local Priority 2:

**Focus on Peckwater Estate.**



Local Priority 3:

**Develop a locally led community connectedness campaign.**



*"Good to meet you yesterday and hear your positivity and aspirations for supporting collaborative working across the borough and particularly hyper-locally. We are grateful for your enthusiasm and refreshing approach in helping us all get connected"*

Caversham GP

# Where to begin? Build trust and follow the energy..

**Established Kentish Town Connects** through our role as a convener in a place

**A network of organisations, citizens and statutory services meeting regularly to share knowledge, insight & enable local action.**

- Hosted a series of citizen and organisation led walkabouts and events in Kentish Town, providing opportunities to connect with new people, visit places leading projects and find mutual areas for collaboration.
- Exploring new models of community governance around local decision making and spending. Giving local organisations and active residents a voice in projects.
- Supporting local projects, providing energy, ideas and support.

**Supporting the River of Hope** - an initiative of The Listening Space & Caversham GP

**Supporting local initiatives linking residents with local services and projects in Kentish Town and Camden.**

- Supporting local community leaders to expand, grow and develop their concept.
- Supporting our efforts to develop relationships and take action, quickly - successfully applied for £5,000 of CIL money to [fund social action ideas to increase health outcomes](#).
- Developing our understanding of how the KT Connects network could spend money collectively.
- Developing a structure to move money from institutions to community-based health provision through Camden Anchors.

**Increasing participation from young people** in Kentish Town

**Increasing participation from young people into local services and activities taking place in the neighbourhood.**

- Jointly organising outreach and identifying local key priorities
- Sharing power to develop better outcomes: applying as Kentish Town Connects to the Lottery Community Power Fund – to recruit local, paid young people to further advise on barriers to local participation, and co-produce solutions.

**Established One Kilburn**, an alliance of local people, organisations, and businesses

**Supporting local community-led activities through a network of organisations, initiatives, businesses and individuals across Kilburn**

- Providing a local voice: influencing and holding those with power to account, and providing a platform for engagement and decision making across borough boundaries.
- Developing activities and projects in partnership with local people and organisations
- Promoting community leadership: building leadership skills to support community-led projects and activities



# Our learning and roadmap



# How to do neighbourhoods?

We are learning that the work should be broad, relational and codesigned



## 1/ Connect across the full breadth of services and embrace the community

Integrated teams are good - but the big prize is connecting both horizontally (across services) and vertically (with community organisations and secondary care). We have taken steps to connect staff from health and care, with those in housing and community safety. Rather than prescribe how they work together, staff have identified the opportunities themselves, created new forums and shared spaces. Feedback is positive - momentum is building.



## 2/ Start with relationships, rather than structure

Collaboration requires investment in relationships - new ways of working don't flow solely from new service structures and co-location. The role of a Neighbourhood 'Orchestrator' has been a key catalyst for change. Dynamic locality leadership can turbocharge the change process and help relationships embed. Once formed, enhanced professional networks provide the platform for more sophisticated partnership interventions (around prevention, population health management, and systems and processes).



## 3/ Empower teams and communities with agency and resource

Listening and acting on the needs of frontline teams is natural place to start. LB Camden have given the East Housing and Community team a delegated budget which, although small, has enabled the team to be much more responsive to the needs of their client base. Our East INT has been co-designed with staff through iterative 'learning cycles'. Staff are warming up to a very different kind of change process but are often constrained by targets and process. They need training, permission and autonomy to work differently in neighbourhoods.

# Looking back

## Key successes from 2024

### Delivering the model

- **We've launched the East INT in Kentish Town Health Centre**, built on a strong foundation of relational working. Bringing together community health, mental health, adult social care and GPs on a regular basis. Social workers, GPs, community nurses and OTs are working together on a day-to-day basis.
- **We've expanded the Housing & Communities neighbourhood team to East**, now testing at a full neighbourhood geography.
- **We've launched the Family Help co-design staff group**, to co-design what Family Help (delivered through Family Hubs) could look like, connecting to the Neighbourhoods model.
- **We've helped launch Kentish Town Connects**, made up of local community organisations, active residents and partners, building a new way of working together with communities in Kentish Town. We've spent time with people, in place through walks, neighbourhood summits and open meetings.

### Connecting across the work

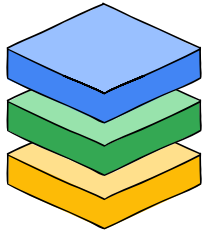
- **We've increased connections and awareness of activity within across the different services in the East Neighbourhood** – with staff from the INT, Family Hubs, Housing services and more taking part in multi-disciplinary meetings and learning sessions. Staff are increasingly working across services and organisational boundaries in support of local people.
- **Council services have formed much stronger relationships with primary care in Kentish Town.** GPs and social prescribers have been active participants in Housing & Communities and INT multi-agency meetings learning sessions. People of work across council and NHS services are learning more about what each other do.
- **We've helped launched the River of Hope project**, alongside with 30+ VCSE partners, showcasing how residents in Kentish Town can stay well this winter. Including the River of Hope fund!

### Showcasing our work

- **We've showcased our work** and learning, hosting site visits to multiple audiences – including DfE visits to the Family Hubs, the NHS 10 Year Plan Working Group visit to Kentish Town Health Centre, a full Council Cabinet walk-about and presenting at New Local. Dr Claire Fuller and the NCL ICB executives have visited the East INT on multiple occasions.
- **We've shared our learning** through our new blog series and are honing our key advocacy messages and targets to continue sharing our learning and influencing national policy in 2025.

# Looking forward

## Opportunities for 2025 and beyond.



### Embedding and evaluating

- **The East INT in will need time to embed and allow relationships to form.** Continued support and training is required to support colleagues from across health and social care to work together effectively in neighbourhoods.
- **New interventions will be tested.** Staff will continue to shape how they work together, including through multi-disciplinary working and by building a shared identity. A preventative intervention will be designed in response to a specific health need that is prevalent in the East neighbourhood.
- **Learning and evaluation** will happen in lock step with the development of the INT operating model, with partners monitoring impact on an ongoing basis: assessing impact against infrastructure, workforce, people and system.
- The Council's Health and Wellbeing Department will deliver a comprehensive evaluation of the East INT in early 2026.

### Deepening relationships

- **Horizontal integration** will continue to be promoted across all statutory services that deliver at a neighbourhood level. Including strengthening connections between the East INT, East Housing & Communities team and local Family Hubs and Childrens Centres. Additional focus on mental health services, care agencies and the VCSE.
- **Vertical integration with primary and secondary care.** The East INT will continue to strengthen new connections with the GP and community pharmacy offer in the East Neighbourhood and explore opportunities to connect with secondary care hospital-based services.
- **Deeper connections between services, communities and the people who draw on care and support.** Continue active listening with residents and communities, ensuring the Neighbourhoods model is designed with local people and in response to their needs. Interventions will be co-designed with Kentish Town Connects and service users.

### Scaling the model

- **Making progress in all neighbourhoods.** While we need to learn and evaluate the activity in the East, there is a need to nurture elements of neighbourhood working elsewhere in the borough simultaneously. Previous work to reshape local services onto the five neighbourhood footprints can enable this change to happen more quickly.
- **Key partnership decisions** will support the emergence of neighbourhood teams in other Neighbourhoods, with consideration of strategic estates planning (for co-location), management and leadership, and learning and development.
- **We will continue to employ a test and learn approach** giving staff and communities the tools to create their own neighbourhood model. Camden will continue to collaborate closely with the NCL ICB and respond to directions within the governments 10-year plan for the NHS.