Welcome to the Spring Edition of our community newsletter. In this issue we highlight LIME’s recent Becoming a Doctor Focus Day for school students as well as covering community news and offering a community update. We further include interesting articles by medical students on their community placements last December with diverse groups as well including articles by community organisations highlighting their important work in the local community. As the weather hopefully takes a turn for the better we hope you will all enjoy reading this edition.

**LIME Widening Participation Conference**

State school students from the region take part in small group discussions with medical students on, ‘Mental Health and Body Language.’ This was part of the very well evaluated Widening Participation Conference on ‘Becoming a Doctor’ which was held at Leeds Medical School on Saturday the 2nd of February, 2013. The event was organised by third year medical student, Aarushi Gangahar with the support of the School’s Widening Participation Officer, Carreen Dew. The event was also supported by medical students and staff. In total 82 young people attended the conference.
As part of a winter project within our training as medical students, we spent 30 hours with a community engagement organisation, Black Health Initiative (BHI). BHI are a voluntary organisation that looks at the health and well-being of members of the BME community; working towards equality of health care access within Leeds.

On our first day we were greeted by four enthusiastic ladies; the key members of staff, eager to share with us the work of BHI. The work of the organisation can be broken down into five main sectors; women’s health, men’s health, teenage health, cancer support and counselling services. We were fully absorbed into the bustle of the office straight away; the day following our introduction, we were invited to attend a networking and diversity event hosted by a partner organisation; PATH Yorkshire. The event focused on racism and xenophobia in the workplace and really opened our eyes as to what it is like to be in such a situation. Rotherham College performed a relevant sketch for us to discuss and dissect as an interactive audience, which was hugely thought-provoking and very emotive.

We were told to be prepared that no two days were ever the same, and this was definitely correct! The next day, we assisted in compiling cancer information packs for an upcoming charity ball, thrown by a BHI service user, before heading off to a local high school to assist in running a healthy Caribbean cooking course. It was fantastic to see how varied all of the services at BHI were, and it was so rewarding to be able to appreciate how enthusiastic the community were in having such services available.

Before the day was done we were to witness a Teenage forum in action, part of BHI’s Health and Well-being project called SHACA, where young people between the ages of 14 and 19 meet on a weekly basis in a safe, friendly and confidential environment to discuss physical and emotional health issues that matter to them. On this occasion we were greeted by 4 vibrant young ladies and were privileged to meet the two key founder members amongst them!

The following day we attended a meeting between Richard Worlock the Diversity and Equality Manager of Leeds Community Healthcare NHS Trust, BHI’s Chief Executive and a Leeds Prisoner Patient Involvement Manager who are all working together towards innovative ways of improving the health and cultural inclusion of BME populations in Leeds’ prisons. BHI is also looking to work in partnership with the prisons to help support the prisoners and facilitating a more positive integration into society on their release. We were amazed just at how creative, innovative and passionate the team at BHI are about making a positive impact on the health of the community.

This has been an enlightening experience and we will undoubtedly remember BHI for many years to come. BHI has reminded us of the importance of treating and serving all communities equally whilst respecting and acknowledging their differences. BHI can pride itself on having positively influenced us to become the fully competent, culturally conscious doctors we aspire to be!

Jacinda Green & Shashu Graves
Barry’s Community Update

Another busy time working with the local community and some groups I am supporting are making real progress. Leeds Hospital Food Group has managed to make a lot of improvements to the food service but we will have to see if the new Leeds Healthwatch (which is taking over from Leeds LINK) will continue to support for the group. A few of us on the management committee have said that we are happy to meet with the new organisation to discuss continuing support for the food group and its vital work for patients. Jigsaw Visitor’s Centre, Leeds Prison also seems to be progressing well although prisons in the region are soon to be ‘benchmarked’ against Durham Prison and this could have an impact on the centre. I also support the work of Menspace in South Leeds and they have just secured a few £1,000 Community First Grants to work with men in the area. I further continue to work with Leeds Men’s Health Network and although this is a fairly fragile voluntary organisation, I manage to keep it going by acting as Secretary plus I have met with a senior Leeds City Councillor (Cllr. Adam Ogilvie) who has agreed to take on the role of Men’s Health Champion for the city. We now have the students’ evaluations of the IDEALS Year 2 Language Lab Workshops. These were run on minority languages common to Leeds and we hope that these will help to build a better rapport between doctors and diverse groups of patients. 88% of the students rated the sessions extremely good/very good and relevant plus there were some useful suggestions on how the sessions could be run slightly differently. We will discuss these with the session facilitators to seek their views for when we run them again later in the year. Fifty six second and third year students chose the community option in the RESS Pre-Xmas Student Selected Project placements in December and this included twenty three students who did Sign Language. Once again the standard of reflective diaries has been very good and the feedback on the placements was also very positive with just a few minor tweaks needed here and there. The first years in the School have been out on placement at Primary Care and Secondary Care for eight Tuesday mornings and whilst at Primary Care we ask them (in groups of four) to do a community visit to a voluntary group close to their practice. A similar visit is also carried out by the second years whilst at Primary Care. The intention is that the students will learn about the importance of the voluntary sector as potential partners in healthcare delivery and as well as helping them to think more holistically about patients, they may also be helping to build links between practices and the voluntary sector which is what the voluntary sector is always asking for. The bad snow affected our IDEALS Year 2 Community Morning in January and only ten out of the scheduled twenty outside facilitators were able to make it in for their interactive workshops with small groups on Diversity topics. With a bit of juggling around and some doubling up of some workshops we were able to offer most of the students a session. The few students that had sessions cancelled or couldn’t get in were directed to our virtual learning environment (VLE) where there are six Diversity video podcasts including two new ones: ‘The Expert Patient Programme’ by Karen Gouly and patients from Chapeltown Health Centre, and Kathy Grogan from STOP (Start Treating Others Positively) which covers working with perpetrators of domestic violence. There are also some multiple choice questions on Diversity topics on our VLE so hopefully no students missed out. We thank the facilitators for their efforts in coming in and also the students for their efforts and patience. I’ve also joined 3,000 others on the Local Council’s Citizen Panel to contribute ideas on policy development which I have been doing now for about a year and there are a wide range of topics to discuss from the future of Leeds City Market to the future of lap dancing clubs! I’ve also had some input into the Redesign of the School of Medicine Website and hopefully ‘Community’ and ‘Patient Involvement’ will have their own pages, so watch this space! Finally, I think the cuts to local authorities and the voluntary sector are now beginning to bite and we are all having to learn how to cope in this new, and very challenging economic environment.

Community Education Development Officer Report
Barry Ewart - Since the last newsletter I have attended the following

COMMITTEE MEETINGS:
• White Ribbon Campaign Planning Group (5/9/12, 11/10/12 and Walk and leaflet of the public in Leeds Central Bus Station 22/11/12)
• Jigsaw Visitor’s Centre, Leeds Prison (25/9/12, 27/11/12 including AGM and Special meeting on Housing Project 23/10/12 plus 8/11/13)
• Leeds Men’s Health Network (26/9/12, 5/12/12 and 20/2/13)
• Hospital Good Group (2/10/12, 4/12/12, 5/2/13 and Tasting Session 21/11/12)
• Menspace, Holbeck Community Centre (1/11/12 and Funding Meeting 28/11/12 plus 24/1/13)

CONFERENCES/SEMINARS/PRESENTATIONS/TEACHING:
• Language Lab Video Podcast Filming Sessions (13/8/12, 20/8/12, 17/9/12 and 1/10/12), Language Lab Teaching Team (1/10/12 and 14/2/13) plus Student Community SSP Drop-in (10/10/12)
• RESS SSP Tutor Training Session (21/8/12) and Course Management Team (1/10/12 and 14/2/13)
• Language Lab Planning Team (11/9/12)
• Year 2 Communication Skills Training (17/9/12)
• Campus to Clinic Course Management Team (1/10/12)
• Age UK ‘Maximising Your Research Impact: The Role of the Voluntary Sector’ University of Leeds (10/10/12)
• Support for Language Lab Workshops (15/10/12 and 5/11/12)
• Support for IDEALS 2 Community Morning Lecture on Deaf Awareness and Diversity Workshops plus facilitated Workshop on ‘Working Class Doctors’ (22/10/12 and 21/1/13)
• Third Sector Leeds Conference ‘Integration of Health & Social Care’, Leeds Church Institute (29/11/12)
• Pre-Xmas SSP Open Meeting (3/12/12 and Feedback Session 14/12/12)
• Mental Health Workshop, ‘Becoming A Doctor’ Widening Participation Conference, School of Medicine (2/2/13)

OTHER ACTIVITIES/VISITS:
• Leeds University Social Media Policy Planning Group (18/9/12)
• Leeds University Staff New Mettabale Consultation (3/10/12)
• Launch Leeds ‘Cancer Does Not Discriminate’ Campaign, Black Health Initiative/National Cancer Team, Leeds Town Hall (9/10/12)
• Lesley Pearson, Stanningley & Swinnow Live at Home Scheme (16/10/12) and New Dementia Group Launch (27/11/12)
• Skyline Project Open Day (28/1/13)
• Ghazala Mir and Andrea McGoverin re Broadening Diversity within the medical curriculum (4/2/13)
• Cllr Adam Ogilvie, Leeds City Council re A Men’s Health Champion for Leeds (6/2/13)
Stanningley and Swinnow Live at Home Scheme was formed in 1988 by a group of volunteers from the local churches in the Stanningley and Swinnow area with the specific purpose of helping older people in the area to stay happier, healthier, longer and more independent in their own homes. This wish is still true today and the scheme now operates under the umbrella of being a part of MHA.

MHA (Methodist Homes For The Aged) is the 34th largest charity in the UK and this year we have been awarded the Queens Diamond Jubilee Volunteering award which is the voluntary sector equivalent of an MBE so we are very proud to be a part of this organisation. Whilst MHA has its roots in the Methodist church we serve all persons aged 60 plus regardless of any other considerations and our staff and volunteers are recruited from all sections of society.

Life may have changed a bit since the late 80’s but the concerns facing older people are timeless. How do you manage to cope with failing physical faculties when such simple things like changing a light bulb are now so difficult due to balance problems, carrying shopping home from the supermarket. How do you make a meal if your legs won’t allow you to stand for more than few minutes at a time? How do you cope with the new telephone systems of press 1 for a particular service and 2 for something else? Worse still if the option you want is not on their list or perhaps your hearing is not good enough to catch all that is said quickly enough or you can’t understand regional accents? How can you find reliable tradesmen who will not charge the earth?

How do you keep fit when the gyms are all full of lithe young people? You may feel a bit silly knowing that your figure is not what it used to be and the fees – we’ll say no more!

Stanningley and Swinnow Live At Home Scheme are here to address all these problems and plenty more besides.

We are always looking for volunteers who will help to befriend an older person, perhaps change the light bulb, take them to the shops or maybe just have a game of scrabble or teach them to text, anything to prevent their social isolation. As medical students you are particularly welcome and you can learn so much about the practicalities of medical actions first hand such as how people can be left socially isolated because of diuretic drugs which make them virtually housebound because they are more afraid of having an ‘accident’ on the bus than they are afraid of having an angina attack on the bus.

Older people and medical students are the perfect balance of helping each other out so why not give us a call and learn more about us, who we are, what we can do for you and the older people of Stanningley and Swinnow. We offer training to all our volunteers, this can take different forms depending on what your interests are and could include training to drive a minibus or how to support older people with dementia.

Interested - Please do give us a ring on
Tel: 0113 255 8461

Stanningley and Swinnow Live At Home Scheme
117 Norwood Crescent, Stanningley, Leeds. LS28 6NG.
Tel: 0113 255 8461
Registered Charity No 1083995
PREMIER LEAGUE HEALTH SCHEME TACKLES MEN’S HEALTH
A ground-breaking study concludes that a Premier League health scheme is as effective as a Wayne Rooney header in altering men’s high-risk health behaviour. One of the largest ever academic studies in England, carried out by Prof. Alan White of The Centre for Men’s Health, Leeds Metropolitan University, found that Premier League football clubs can have a powerful effect in changing the health of men, especially those regarded as hard-to-reach and whose lifestyle choices are leading to a substantial drain on NHS services.

The three-year £1.63m health initiative at 16 football clubs engages 10,000 men. The research found that over 70% of them made positive health changes as a result and that football clubs can play an important role in addressing key areas of men’s health such as weight gain and alcohol consumption.

See National Men’s Health Forum http://www.menshealthforum.org.uk/

THE VOCALEYES HOLISTIC APPROACH
This is a service aimed at ensuring that blind and partially sighted people can get the best out of a theatre performance. It includes booking tickets at the box office, receiving introductory production notes on audio CD prior to the performance, being met and greeted at the theatre by members of the theatrical staff, collecting large print and Braille cast lists, going on a touch tour of the set, and an audio description of the performance itself. For further information go to www.VocalEyes.co.uk

LEEDS ALCOHOL HARM REDUCTION PLAN 2011-2015
This focuses on achieving the following strategic priorities over the next four years: 1. Partners to work together towards achieving the Vision for Leeds by tackling the impact of alcohol on local people and communities. 2. People of all ages who consume alcohol do so within nationally recognised safe limits. 3. Fewer people experience alcohol-related violent crime and anti-social behaviour in our communities. 4. Fewer people experience alcohol-related ill-health. 5. Fewer children and young people whose lives are adversely affected by their parents drinking including neglect, physical and emotional abuse. 6. Fewer under 18 year olds develop drinking habits which impact on their health, school attendances, personal safety and achievement. For further information see Leeds Initiative www.leedsinitiative.org/

PCTS GO, CCGS COME IN!
The three Leeds Clinical Commissioning Groups (CCGs) become public bodies from 1 April 2013. Clinical Commissioning Groups are groups of GP Practices which will be responsible for commissioning most hospital and community health services for their area. The three in Leeds will take over these responsibilities for Leeds from the NHS Airedale, Bradford and Leeds PCT cluster which will cease to exist after the 31st of March. Leeds North CCG has the lead for mental health and the LYPFT contract. Leeds West CCG has the LHHT contract and Leeds South & East CCG has Leeds Community Healthcare and the third sector (including voluntary sector contracts). Public Health will also move to the local authority.

RESS Special Studies Project

Yorkshire MESMAC is a sexual health project, established in 1990, with several offices throughout Yorkshire. The part of the organisation my placement was with undertakes HIV prevention and sexual health promotion work with gay and bisexual men. In addition to this, in Leeds and Bradford the organisation works with boys involved in, or at risk of becoming involved in sexual exploitation through its BLAST project. MESMAC also runs several support projects, such as ReachOUT for LGBT refugees and asylum seekers.

The objectives set out at the start of the placement ensured I participated in a wide range of tasks. Research was done about pre and post exposure prophylaxis to HIV. These are vital anti HIV drugs if taken before or after exposure to HIV and can significantly reduce the risk of acquiring the virus. This is crucial information that should be communicated to the LGBT community, which is why I was told to study it.

The placement involved observing ‘testing times’ sessions. These are free, confidential HIV testing sessions with results available after 20 minutes. These sessions mean that service users do not need to access local medical services for this test and have peace of mind that the results will not be stored on their medical records. It was surprising to learn how many people said they would not get HIV tested if they could not do so at MESMAC, as they did not feel comfortable doing the test at their GP practice.

Outreach work was performed which involved distributing safer sex packs out in the LGBT bars and at known public sex environments such as cruising spots where men go to have sex with other men. The aim of this is to promote better sexual health and inform the community of the work MESMAC does. Not knowing that cruising places existed, it was eye opening to see the lengths some men would go to, as the weather was extremely cold and wet and the areas were pretty dark. It did not seem the most convenient of ways to meet men for sex.

Whilst being at the charity, I joined in with condom packing parties held by MESMAC. These are informal social events, where volunteers give a few hours of their time to make the safer sex packs containing two condoms and two sachets of lube. Making these packs is vital to the work MESMAC does in trying to promote better sexual health in the LGBT community. As well as being freely available in LGBT bars, they are posted out to service users who can request them via the MESMAC website.

The volunteers each had their own reasons why they gave up their free time. The majority feeling they wanted to give something back to MESMAC for the help and support the charity has given to them. This could be through possible HIV diagnosis or situations where families have responded negatively to someone declaring themselves as lesbian, gay, bisexual or transgender.

Spending time with MESMAC, it was obvious to see the importance of the work carried out by them. Without the support they offer to the LGBT community, many of the service users would not know where to go for sexual health advice specific to their LGBT needs.

Sakander Sultan Mahmud
INTRO TO CAP
This December I spent two weeks with Christians Against Poverty (CAP), an international charity committed to supporting people in uncontrollable financial difficulty. They operate in the community from over 200 local churches (known as ‘Debt Centres’). As a result they can offer a free, unique face-to-face, service to all of their clients. CAP helps everyone, regardless of age, gender, faith or background. Their comprehensive strategy aims to clear debt within 5 years. There are a number of different teams within CAP, which work together to offer support from the initial contact with a client, right through to the complete alleviation of debt.

LINKS TO HEALTH AND MY FUTURE PRACTICE
My experience showed me that financial problems are intimately linked to a person’s health, particularly in people with low income. CAP’s research shows that 69% of clients visited their GP in relation to their debt - 42% of these were prescribed medication as a result. CAP work to relieve a client of as much of the debt responsibility as possible; which results in positive health benefits, this is also clear from the client’s point of view. Debt is something I have very little experience of, my time here has developed my understanding of poverty in the UK, as a result of financial difficulties. This will be invaluable once I have qualified. It has highlighted for me how important it is that in healthcare we work intimately with community organisations and charities such as this, to produce a holistic approach to patient care.

MY EXPERIENCE
I was immediately struck by the welcoming nature of all of CAP’s staff and the extent to which they are looked after as a team. Over the two weeks I had the opportunity to work with a number of different people in a variety of roles; one team I worked particularly close with was ‘CAP Money’. I helped with basic admin tasks and phoning – which I thoroughly enjoyed due to the variety of people I spoke to. Whilst there I developed some of my core skills, but I also learnt a great deal about effective teamwork and the practical steps to achieve it. I also spent time with a Debt Centre Manager, which gave me the opportunity to chat to current and ex-clients, all of whom offered a wealth of information and experience of the benefits offered by the debt free scheme. While with the Debt Centre Manager I was also able to appreciate how the food bank and CAP complement each other in the services they provide. Finally I spent time with CAP’s new initiative to help support the unemployed, helping to generate interest for their launch next March.

CAP AND THE COMMUNITY
My time at CAP has been both encouraging and challenging, their Christian ethos can clearly be seen in the way they care for clients, which I believe is an added benefit. Not only do they offer holistic care for all of their clients, it’s also evident that the work they do counteracts the negative effect financial difficulty can have on an individual’s health.

Daniel Drayton
Deaf START (Support Training and Resource Team) is part of Leeds City Council’s Sensory Service. It is a great organisation that helps with the appropriate high quality support to individual Deaf/Deafened/Hard of Hearing learners in accessing their Post 16 course through British Sign Language, English support, Note-taking or Radio Aids. Deaf START is made up of 17 members which include interpreters, English Support tutors and Educational Interpreters.

Looking Forward
We thoroughly enjoyed our two weeks on the BSL course and we hope to take the skills forward with us into our medical careers and in everyday life! As a clinician we will undoubtedly be involved in consultations using interpreters and knowing more about how these work will allow these consultations to run more smoothly. I think a lesson learned by us all was the importance of still directing attention to the patient and just using the interpreter as a communication means. In addition, if we can retain our basic BSL skills this will also allow us to communicate with Deaf patients personally, which will hopefully build patient rapport.

By Ellie Cheah and Hannah Weston
USEFUL WEBSITES

Men Against Violence
http://www.menagainstviolence.co.uk

New knowledge Hub about childhood obesity
http://www.chimat.org.uk/obesity

Commission on the future of local government
www.civicenterpriseuk.org

Irish survivors of institutional abuse
www.irishsurvivorsinbritain.org

Leeds Irish Health & Homes
www.lihh.org/

Leeds Dual Diagnosis website
www.dual-diagnosis.org.uk

Reduce stigma/discrimination- mental health and young people
www.listenupleeds.org.uk

Healthwatch England
www.healthwatch.co.uk/about-us

Upbete – online support for diabetic children
http://www.upbete.co.uk/

Alcohol Concern
www.alcoholconcern.org.uk/

Alcohol Learning Centre
www.alcohollearningcentre.org.uk

Drinkaware Trust
www.drinkaware.co.uk

Down Your Drink – Are You Drinking Too Much?
www.downyourdrink.org.uk

Leeds Wellbeing Centre
www.leedswellbeingcentre.org.uk

Wellbeing Services in Leeds
www.wellbeingleeds.com

Don’t forget Barry’s blog at
http://communityppd.blogspot.com