Draft NCL ICS Population Health Outcomes

Draft v0.18
January 2022

Introduction

✓ The NCL health and care system is transitioning to the Integrated Care System (ICS) by April 2022. The purpose of the ICS is to:
1. Improve outcomes in population health and healthcare
2. Tackle inequalities in outcomes, experience and access
3. Enhance productivity and value for money
4. Help the NHS support broader social and economic development

✓ Population health improvement is core to a successful integrated care system and achieving better population health outcomes is everyone's business.

✓ The health inequalities agenda is broad and we can't 'do it all' immediately.

✓ The NCL Population Health Outcomes Framework provides an overarching view of the outcomes we want our residents to experience, thereby providing a high level sense of where we need to act as an ICS

✓ The NCL framework is meant to be complementary and not replace what is being planned and done at local and place based levels

✓ The framework is based on existing priorities and ambitions at system and place, driven by existing public health evidence, population needs assessment, and work that is underway at local level, as well as the national Core20PLUS5 objectives.

✓ This paper presents the Draft NCL ICS Population Health Outcomes developed with the NCL Population Health and Inequalities Steering Group which includes all five boroughs Directors of Public Health as well as the Executive Director of Borough Partnerships
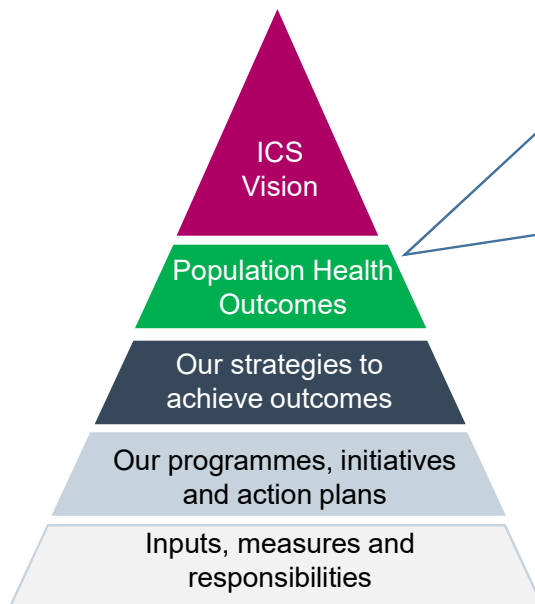
✓ We want the Draft NCL ICS Population Health Outcomes to be further refined and validated through the engagement with Place Based Partnerships and wider system

✓ The agreed NCL Population Health Outcomes will be then taken forward through the NCL Population Health Strategy, in alignment with the local Place Based Partnership strategies

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Delivering improvements in population health outcomes will determine the success of the NCL integrated health and care system

Benefits and requirement of having an agreed NCL ICS Population Health Outcomes Framework

1. The Outcomes Framework provides an overarching view of the outcomes we want our residents to experience, thereby providing a high level sense of where we need to act

2. Links our vision to our mission, strategic aims/objectives and to our programmes of work to ensure that our day to day activities are aligned to our strategic direction

3. Supports the identification of areas where action at a system level, not just at a borough level, will be beneficial

4. Helps prioritise needs and thereby plan where energies and resources need to be utilised.

5. Enables system oversight for tracking progress to reduce health inequalities and to monitor and measure progress and relative success against objectives

ICS Vision

Population Health Outcomes

Our strategies to achieve outcomes

Our programmes, initiatives and action plans

Inputs, measures and responsibilities

Building on local needs and priorities

Our NCL Population Health Outcomes Framework will enable us to identify and focus on where we will make a difference together at a system level.

The Outcomes Framework is informed by:

➤ Population needs and inequalities, including ethnicity and deprivation
➤ Health and Wellbeing Board strategies and priorities
➤ Place and borough priorities included in the system development plan
➤ National driven health inequalities interventions

Achievement of the outcomes will be dependent on delivery at all levels and with all system partners.
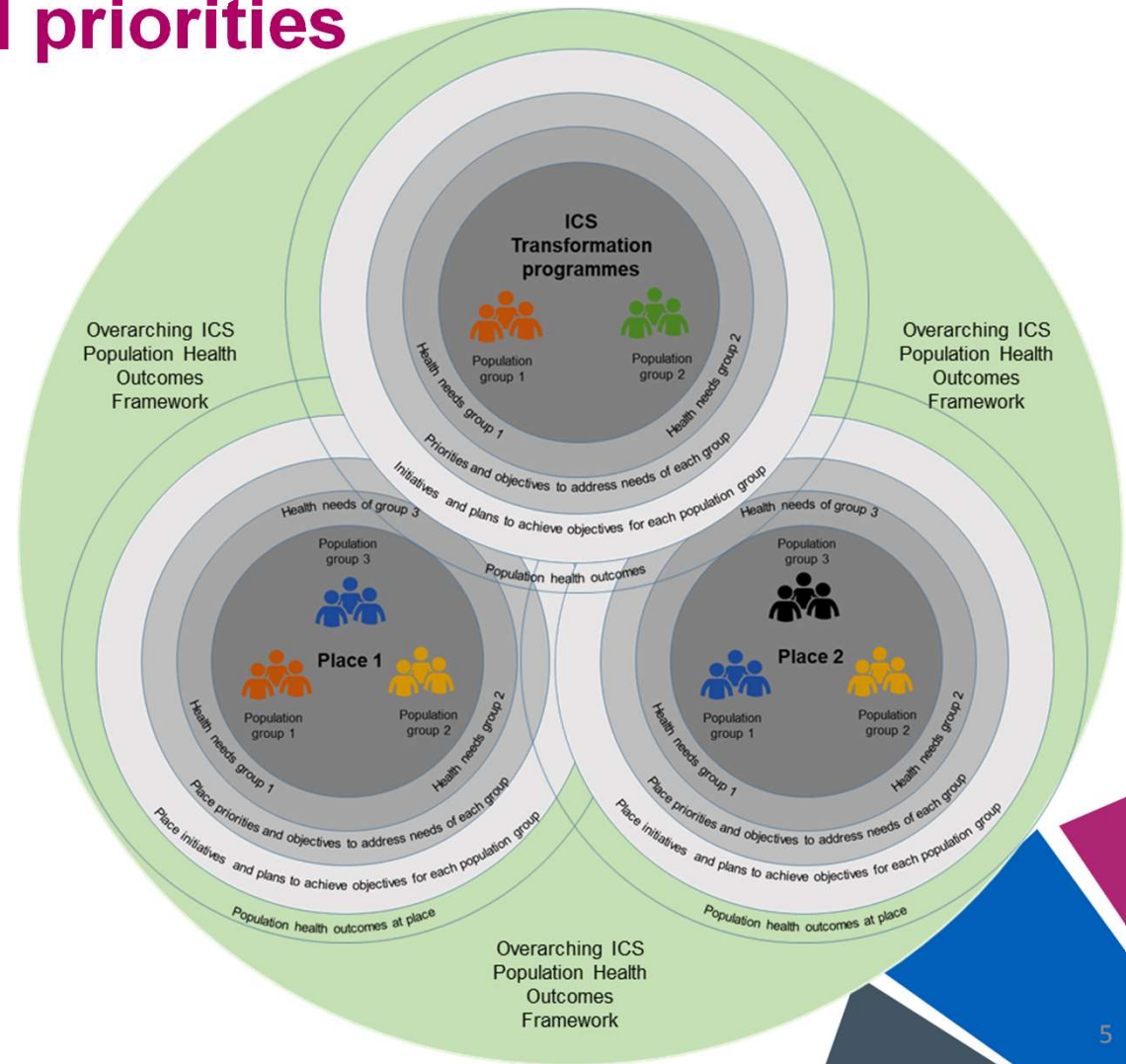
Proposed principles to developing the NCL Population Health outcomes and strategy

Tackling health inequalities

Prioritising prevention and early intervention

Empowering communities

Co-production and personalisation

High quality of and equitable access to services

Adding value

Integration and doing things differently

Sustainability and greener NHS

Subsidiarity

Sharing responsibility and accountability

Maximising use of enablers: finance, workforce, digital, anchor institutions, Population Health Management

Our approach to developing the NCL Population Health Outcomes

We have worked closely with our Directors of Public Health to develop an approach to developing the outcomes that will reflect our key population needs and inequalities and be achievable. The proposed outcomes are driven by existing public health evidence and work that is underway at local level, as well as aligned to the CORE20Plus5 approach.

Evidence-based

We looked at all the available data and information, including:

- ✓ Population needs and inequalities, including ethnicity and deprivation
- ✓ Health and Wellbeing Board strategies and priorities
- ✓ Place and borough priorities included in the system development plan
- ✓ National driven health inequalities interventions

Pragmatic and realistic

We needed to ambitious but realistic and achievable:

- ✓ Identified pragmatic priorities that would allow flexibility of interventions and build in more social and wider determinants of health over time
- ✓ Looked at where we can make an impact at a system level, but recognising initial levers will be NHS / health driven

Approach to developing the NCL Population Health Outcomes

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NHS
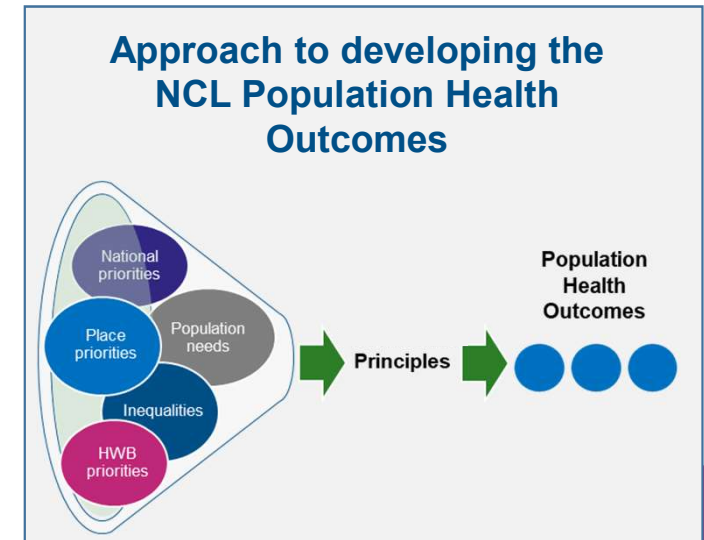
Proposed NCL Population Health impact and outcomes

We want our population to live better, healthier and longer, fulfilling their full potential over the course of their entire life, reducing inequalities and the gap in healthy life expectancy

To realise the impact we need to achieve the outcomes below in each of our NCL strategic aims

Start well

Every child has the best start in life and no child left behind

All children and young people are supported to have good mental and physical health

Young people and their families are supported in their transition to adult services

Live well

Reduction in early death from cancer, cardiovascular disease and respiratory disease

Reduced unemployment and increase in people working in good jobs

Parity of esteem between mental and physical health

Age well

Older people live healthy and independent lives as long as possible

Older people are connected and thriving in their local communities

We will look to develop further outcomes for each enabler (workforce, Population Health Management, finance, etc.) as part of the Population Health Strategy, as this will be crucial to address the "how" we will achieve our NCL ICS Population Health Outcomes, alongside initiative delivery.

Proposed outcomes: Start Well

Every child has the best start in life and no child left behind	All children and young people are supported to have good mental and physical health	Young people and their families are supported in their transition to adult services

Improved maternal health and reduced inequalities in perinatal outcomes

Reduced inequalities in infant mortality
Increased immunisation and new born screening coverage

All children are supported to have good speech language and communication skills

Early identification and proactive support for mental health conditions

Reduction in the number of children and young people who are overweight or obese

Improved outcomes for children with long term conditions

All young people and their families have a good experience of their transition to adult services

Proposed outcomes: Live Well

Live well

| **Reduction in early death from cancer, cardiovascular disease and respiratory disease** | **Reduced unemployment and increase in people working in good jobs** | **Parity of esteem between mental and physical health** |

Reducing prevalence of key risk factors: smoking, alcohol, obesity

Early identification and improved treatment of cancer, diabetes, high blood pressure, cardiovascular disease and respiratory disease

Support people to stay in jobs, including mental health and musculoskeletal services

Anchor institutions to employ local people including those with mental health illness, physical disability, and learning disabilities, and to buy locally including by using social value-based commissioning and contracting

Reducing racial and social inequalities in mental health outcomes

Improved physical health in people with serious mental health conditions

Reducing deaths by suicide

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NHS

Proposed outcomes: Age Well

Age well

Older people live healthy and independent lives as long as possible

Older people are connected and thriving in their local communities

Ensure that people get timely, appropriate and integrated care when they need it and where they need it

Older people have fulfilling and meaningful social life

Prevent development of frailty with active aging

Older people are informed well and can easily access support for managing financial hardship

Improved outcomes for older people with long-term conditions, including dementia

Immediate next steps

1. Work with the NCL Place Based Partnerships & wider system forums to refine the outcomes and build on the local priorities

2. Work with the NCL Place Based Partnerships & wider system to develop indicators and model of delivery to achieve the outcomes

3. Take a refined framework back to PHI Committee for endorsement

4. Continue work to support both the development of the Outcomes Framework and the Population Health Strategy, including:

   • Map all the existing programmes to the agreed outcomes

   • Understand what it is already in progress contributing to the outcomes and identify gaps

   • Prioritise interventions and focus areas within each outcome

   • Identify specific population cohorts (e.g. where significant inequalities / poor outcomes exist in NCL)

5. Identify core indicators and build a baseline for the Outcomes Framework

Considerations / potential next steps for Place Based Partnerships

1. Local review & mapping of local priorities, outcomes, objectives, etc. with NCL ICS Population Health Outcomes:

    *   Where is there strong alignment?

    *   Are there any significant gaps?

    *   Where are there complementary local outcomes, etc. that address local population needs?

2. Consideration as to how the local partnership can continue to evolve and develop to support the delivery of the outcomes:

    *   What are the approaches that the partnership will use to "shift the dial" in delivery?

    *   What are the new ways of working? What will be different about the journey to be followed?

    *   How do we build the system and local narrative about what needs to be "new" to deliver the outcomes?

3. Consideration as to effective joint system & place based delivery:

    *   How can the feedback / dialogue between all the different levels within the ICS continue to develop and support delivery?

    *   What tools / resources / activities would place based partnerships like support with?

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