North Central London Integrated Care System

North Central London Population Health and Integrated Care Strategy

Short version

Context and ambition

North Central London Integrated Care System

This document sets out our **approach to improving the health of our population.** It describes our vision for an **integrated** system focused on **prevention, early intervention, and proactive care**.

The document brings to life **how we will work together** to achieve our collective ambition:

'As an integrated care partnership of health, care and voluntary sector services, our ambition is to work with residents of all ages of North Central London so they can have the best start in life, live more years in good physical and mental health in a sustainable environment, to age within a connected and supportive community and to have a dignified death. We want to achieve this ambition for everyone.'

The document builds on great work already going on across the system to join up care. We have agreed a **shared set of priorities and outcomes** and we will use these to drive improvements in the health of our population and to **reduce health inequalities**.

We have worked with communities to develop a set of **'I' statements** that define what our new system needs to feel like for the people we serve.

Our ‘I’ statements define what our new system needs to feel like for our residents, our communities and our service users

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A whole person

- I am treated as a whole person and you recognise how disempowering being ill is
- I am listened to and respected

Patient choice and effective self-care

- I am involved in decisions regarding my life, my health and the support or care that I need

Feeling empowered

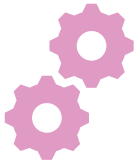
- I have the support that I need to stay healthy, both physically and mentally, and to live as independently as possible
- I am supported by people who see me as a unique person with strengths, abilities and aspirations

Information on services, communication and navigation

- I have the information and advice that I need, when I need it and in a form that I can understand

Housing and community

- I live in a safe place with access to lots of green spaces
- I feel part of a community
- I can easily access and afford local activities / services



Integrated care

- I tell my story once
- My care is coordinated across services
- When I move between services, settings or areas, there is a clear plan and the transition feels seamless

Our key principles for becoming an integrated population health system

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We have identified **ten principles which will guide our news ways of working**, including examples of what that looks like. We will need to make substantial changes to how we work with our residents and communities, and this will involve changing how we prioritise our resources and efforts. The strategy sets out a clear **call to action to our providers** to reflect on how their organisations will look and feel when they align to these principles.

Trust the strengths of individuals and our communities

We listen to our communities and develop care models that are strengths-based and focussed on what communities need, not just what services have always delivered

Break down barriers and make brave decisions that demonstrate our collective accountability for population health

We understand each other's viewpoints and take shared responsibility for achieving our ICS outcomes and our role as anchor institutions

Build from insights

We create digital partnerships and use integrated qualitative and quantitative data to understand need

Strengthen our Borough Partnerships

We build a system approach for local decision making and accountability to support local action on physical and mental health inequalities and wider determinants

Mobilise our system's world class improvement and academic expertise for innovation and learning

We build the evidence base for population health improvement and innovative approaches to improve integrated working

Break new ground in system finance for population health and inequalities

We shift our investment toward prevention and proactive care models and create payment models based on outcomes.

Build 'one workforce' to deliver sustainable, integrated health and care services

We maximise our workforce skills, efficiencies and capabilities across the system

Support hyper-local delivery to tackle health inequalities and address wider determinants

We make care more sustainable by creating local integrated teams that coordinate care around the communities

Relentlessly focus on communities with the greatest needs

We embed Core20PLUS5 in all our programmes with a particular focus on inclusion health to make sure no-one is left behind

Deliver more environmentally sustainable health and care services

We prioritise activity which impacts our communities' health and environment, such as transport

Key delivery areas

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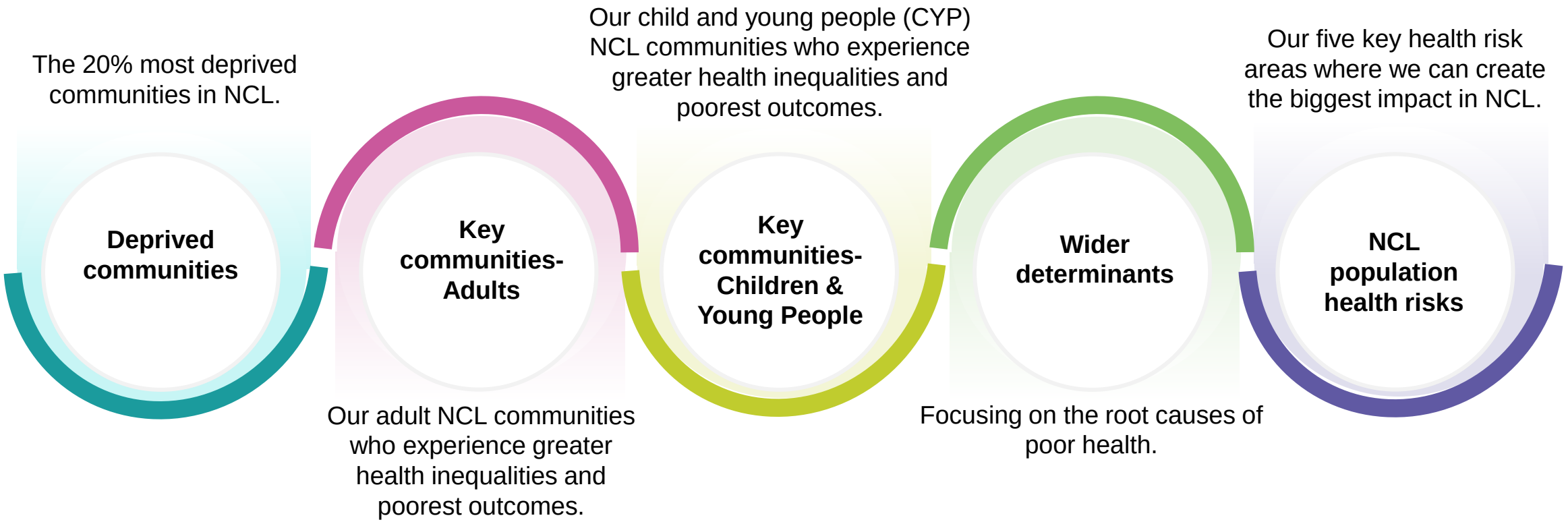
We have agreed **delivery areas** where we can make the greatest impact and continue learning about joining up care and reducing health inequalities, working in local neighbourhoods across our borough partnerships and as a whole integrated system.



Levers for change

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To deliver on our ambition, there are six levers for change that will help us create the right conditions for sustainable delivery. We will need to work across the integrated partnership to make these real.

Making population health everyone's business

Developing and improving system-wide access to population health insights and embedding the fundamentals of population health at all levels of our system, including our front-line teams

Strengthening integrated delivery

Further developing our approach to integrated delivery in the Borough Partnerships by creating the context and conditions for success and support building our local integrated teams

Collaborating to tackle the root causes of poor health

Creating a better context for good health and well-being for everyone in NCL by collaborating to address the root causes of poor health outcomes and investing locally and responsibly in our communities

Aligning resources to need

Transforming how we make decisions about the use of resources by understanding where we have variation in outcomes and creating the frameworks and measures that redirect resources to close the gap

Becoming a learning system

Working with NCL's world-leading research and improvement expertise to become a system that is evidence-based and evidence-generating to deliver impact, value, scale and spread

Creating 'one workforce'

'One Workforce' across our health and care providers to provision a sustainable model that enables us to pivot towards a model that focuses on population health improvement

Moving forward to delivery

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The levers and delivery areas in this document, alongside our existing programmes of work, allow us to frame delivery of this strategy around clear actions and key communities.

We will plan across three horizons that cover the 5 year period of this document. In the first horizon, our focus is on tangible action for our delivery areas and getting our other outputs into priority order to help us deliver our ambition.

Horizon 1 – 0-18 months

- Tangible action plan and progress for each delivery area
- Prioritisation and sequencing of the deliverables under each of our levers
- Ensure progress on foundational deliverables are in place to make the progress on delivery areas sustainable

Horizon 2 – 18-36 months

- Our intermediate pieces of work that build on the foundations and early learning
- This horizon will require updating and further detailed planning in the first annual refresh.

Horizon 3 – 36+ months

- Our longer-term pieces of work which are dependent on deliverables in horizons 1 and 2.
- These will reflect consolidation of learning and greater depth of system partnership and collaboration.

Horizon 1 future state

Horizon 2 future state

Horizon 3 future state

We will establish oversight and monitoring arrangements that will use our outcomes framework to guide our work

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Oversight and monitoring arrangements
Ensuring all parts of the system are clear about their role in delivering the strategy, the outcomes and indicators that they support, how they will track progress and how that will contribute to the overall system view. This will help support mutual accountability for population health outcomes.

NCL Population Health Outcomes Framework

All population outcomes are baselined and prioritised, and we have agreed ambitions to drive improvements and reduce inequalities.

Delivery cycle
Working at system, borough partnership, neighbourhood and providers

Identifying opportunities for intervention
Assessing variation and need to identify where we can make a difference by working together as a system, and areas which require focus at borough and neighbourhood level.

Discussing, learning and unblocking

Discussing key outcomes shifts, as well as opportunities and challenges, across all levels of our system to allow us to come together for learning and solutions.

Insights, dashboards and tools

Ensure insights are feeding in at NCL, borough, neighbourhood and provider level which can also be viewed through the lens of key communities