

F5: Reducing health inequalities through
collaboration



International Forum on
QUALITY & SAFETY
in **HEALTHCARE**
COPENHAGEN



Adapting to a changing world: equity, sustainability
and wellbeing for all



 @QualityForum #Quality2023

 Institute for
Healthcare
Improvement

BMJ



CONNECTING CARE FOR CHILDREN:

A partnership between

CCGs, hospital & community health providers, GP federations & networks,
local authority, charity, patients, citizens and more

#Quality 2023, Wednesday 27th May 2023

- Dr Mando Watson @mandowatson
- Consultant Pediatrician, St Mary's Hospital, Imperial College Healthcare NHS Trust
- Clinical Lead, Babies, Children & Young People, NW London Integrated Care System
- co-founder, Connecting Care for Children – *grants from Imperial College Health Charity, Health Education England, West London Clinical Commissioning Group*
- Theme lead, Integrated Care, Centre for Paediatrics & Child Health, Imperial College, London

TODAY'S TAKE-AWAYS

We can reduce inequalities by

- improving access (not more resource)
 - You will get a taste of how specialists can work closely with primary care
- involving patients and the public
 - You will discover an easy tool for engagement
- Starting young, very young
 - You will leave with a resource to share

INTRODUCTIONS

Who are we? Who are you?

Specialists working with GPs

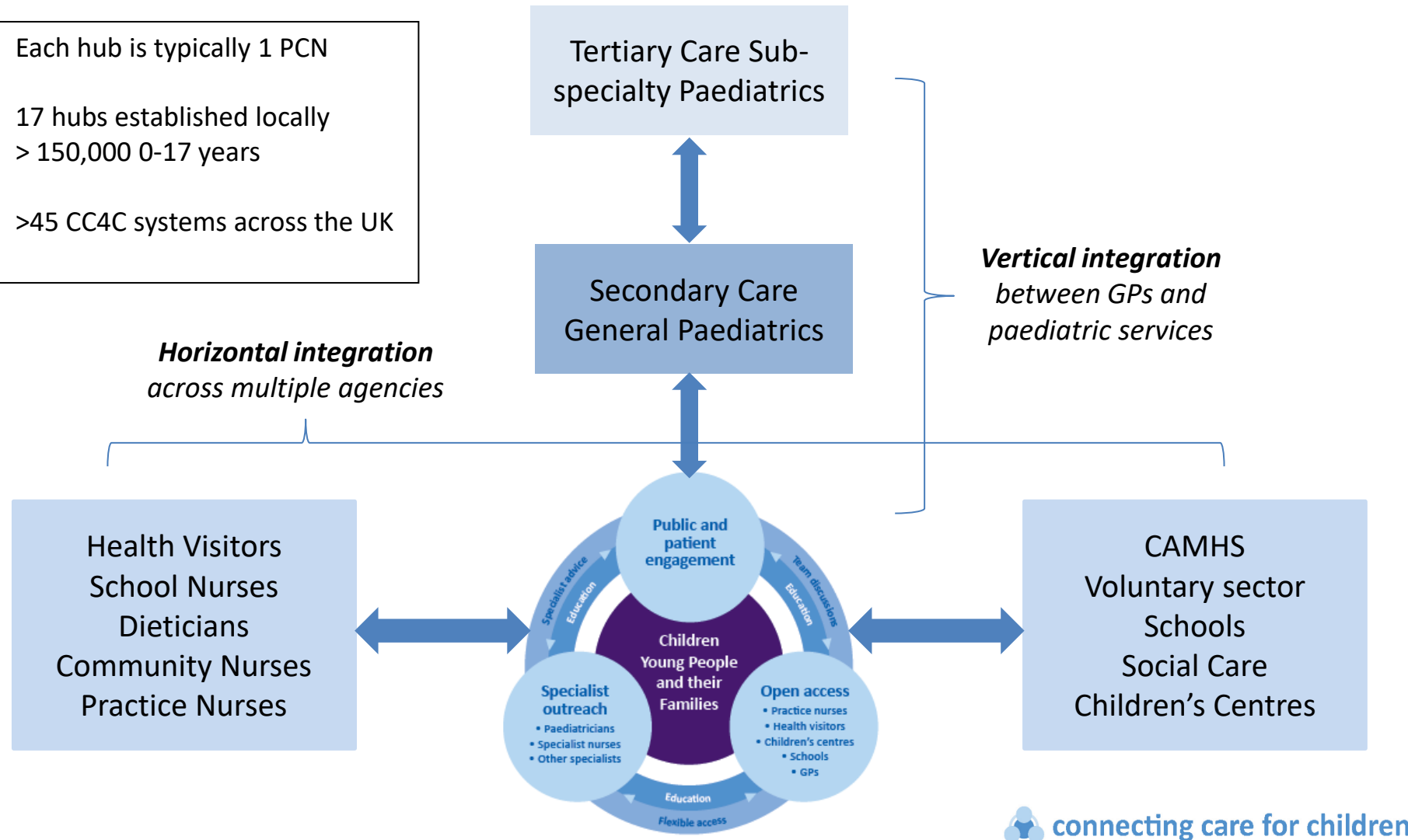
IMPROVING ACCESS

Think of a child with abnormal movements...

CHILD HEALTH GP HUBS

Integrated child health model of care

- Each hub is typically 1 PCN
- 17 hubs established locally
- > 150,000 0-17 years
- >45 CC4C systems across the UK



WE STARTED WITH PATIENTS...

...who built themselves into the model



Volunteer for your local community

become a Practice Champion and
help shape children's healthcare

Your Practice would like to invite you
to join us as a Practice Champion.
We want to improve the healthcare
of children and young adults in our
community. Practice Champions use
their experience, skills and passion
to help design healthcare
services for children and families.
Training will be provided.

For more information please ask
for a volunteer application form
at reception or call/text Bea on
07852176747



 connecting care for children

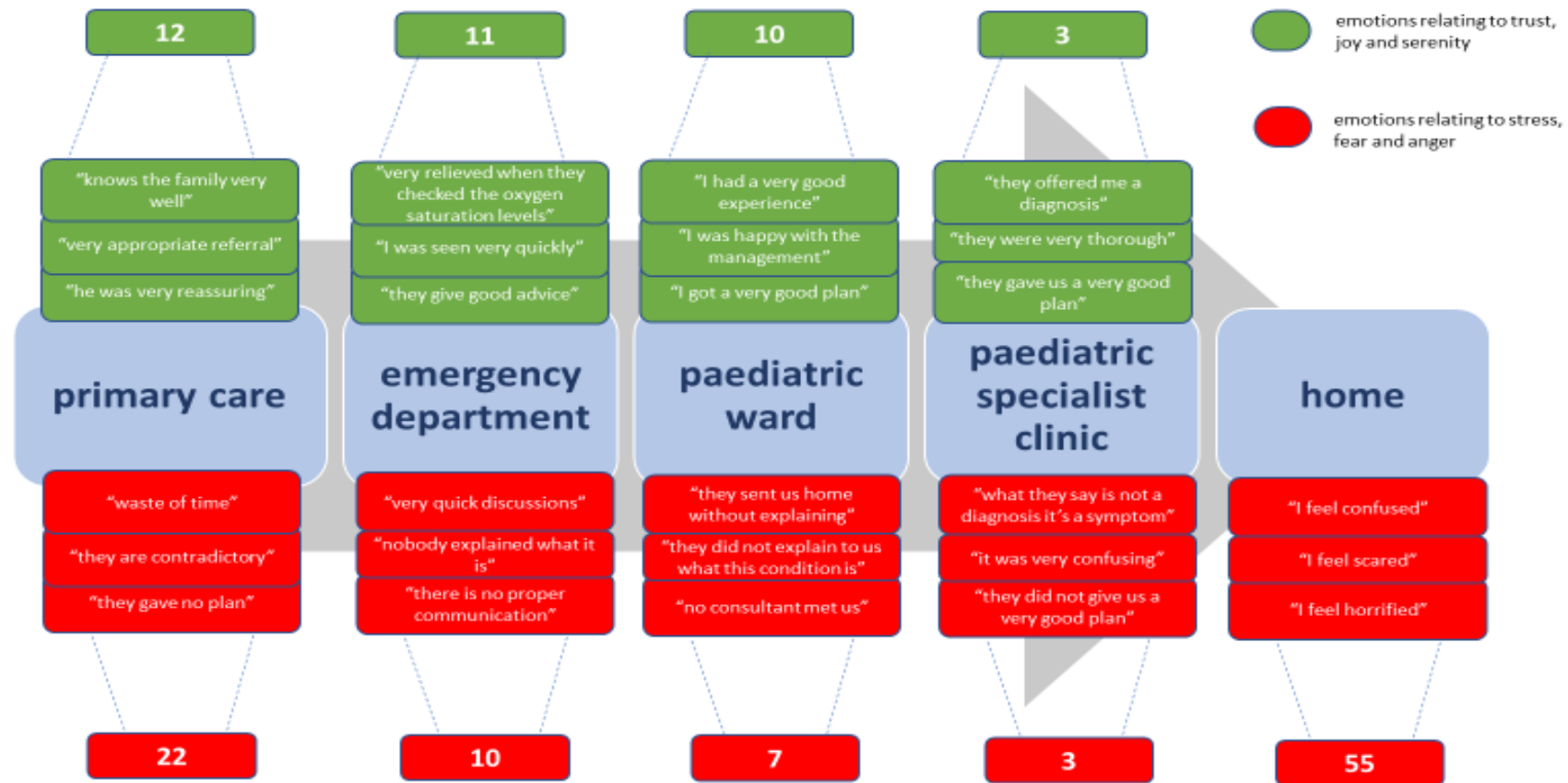


Tools for engagement

INVOLVING PATIENTS AND THE PUBLIC

Think of a child who can't breath...

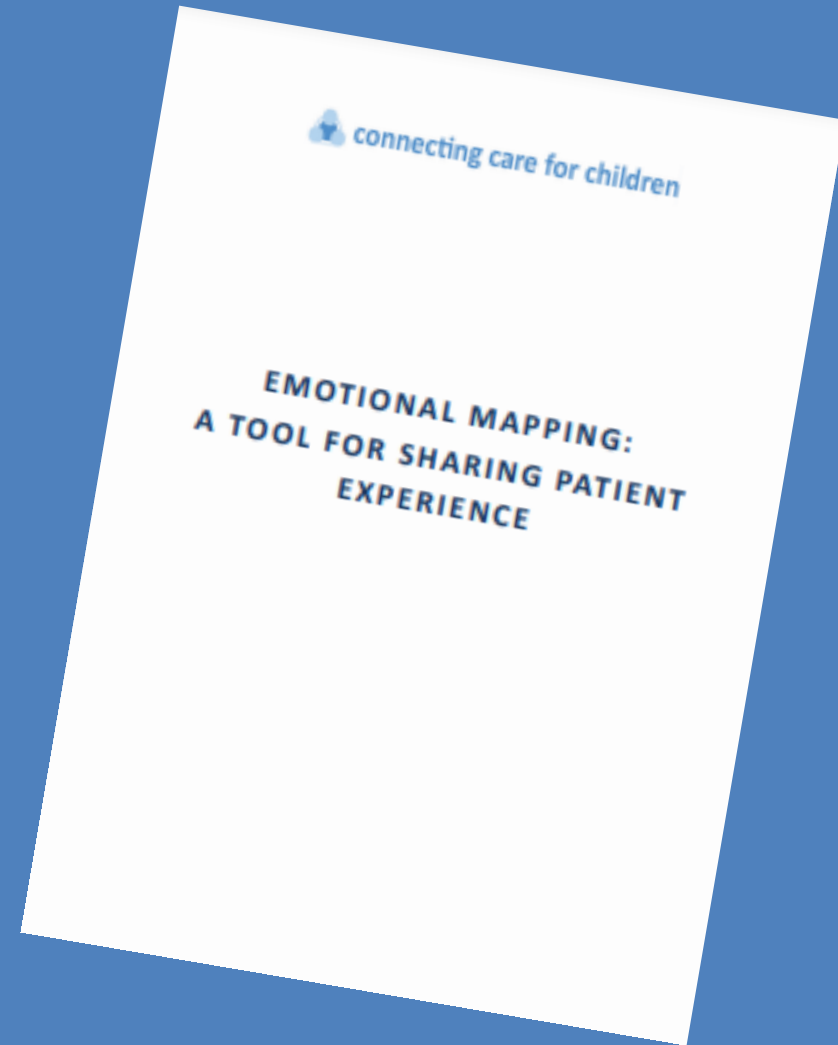
The child/family perspective....



Heidi, M., Emily, K., Benjamin, H. *et al.* Patient reported outcomes for preschool children with recurrent wheeze. *npj Prim. Care Respir. Med.* 29, 7 (2019). <https://doi.org/10.1038/s41533-019-0120-3>

EXPERIENCE MAPPING TOOLKIT

<https://www.cc4c.imperial.nhs.uk/resources/resources-for-professionals>



STARTING YOUNG, VERY YOUNG

Asking the community of an Integrated Care System what matters to them



Asking the community of an Integrated Care System what matters to them



Who participated?

- Children and young people with long term conditions, educational needs and disabilities
- Parents and carers
- Families and young people with English as a second language
- Looked after children
- Young peoples health and wellbeing advocates
- Community volunteers
- Health research teams
- Health and social care champions (HealthWatch)

Asking the community of an Integrated Care System what matters to them



Six priorities emerged:

1. Access to mental health support
2. Mental health support in schools
3. Navigating the system
4. Young people's ownership of their healthcare
5. Pressures on parents
6. Maintaining a healthy weight

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How the NHS works for young people

1

When can I make decisions about my healthcare?

- You can make decisions on your own **before 18 years old** if your healthcare professional feels that you have a good understanding of the situation ([competence](#))



When can I make my own appointment?

- You can make an appointment with a GP **at any age**
- From 16 you can access GP online services, where you can book & cancel appointments, see test results and order repeat medications
- From 16 years, your parent/carer should only make, change or cancel your appointments if you have agreed ([consent](#))

2

3

When can I see a healthcare professional (doctor/nurse) on my own?

- At any age**
- Everything you tell a healthcare professional should stay [confidential](#) unless you give permission to share or your safety is at risk
- You should be told before any information is shared



Can I see a doctor/visit a clinic without my parent/carer being told?

- Yes.** If you don't want your parent/carer to know about a visit, this information should be kept private
- Your healthcare professional might encourage you to speak to your parents (or someone you trust) if they think it would be helpful
- If your healthcare professional is concerned about your safety, they may need to share information with other professionals

4



When can I use a pharmacy on my own?

- From **16 years old** you can collect your own prescriptions and can buy over the counter medications
- Under 16 years you can sometimes collect prescriptions from a pharmacy but this depends on the specific situation

5

6

Can my parent/carer still help me when I'm 16 or older (e.g. book or accompany me to appointments)?

- Yes, when you turn 16 **it's your choice** how much to involve them

More tips...

- Involving your parents, or someone you trust, can be helpful at any age
- You can bring a friend or parent/carer to an appointment or request a chaperone (chaperones have been trained to provide unbiased support for patients)
- As you get older, it can be really valuable to start seeing healthcare professionals alone for the whole or part of your appointment
- It can help to **write down** any concerns and questions, or make a diary of your symptoms, and take this to your appointment
- If you're unsure about something a healthcare professional has said, **ask them to explain again**
- Some people find it helpful to write important information down during/after an appointment
- Try to be as **open and honest** about your worries/concerns so that the healthcare professional can help
- If you are unhappy with the care you have received, it is important to **feedback** (find out [how to feedback](#))
- For young people, your **healthcare documentation** should be addressed and sent to you – speak to your healthcare professional if this is not happening
- Keep the **contact details** for your GP, school nurse and other healthcare professionals and a reminder of your appointments **in your phone**
- If there is not time to cover all your questions in one appointment ask about **booking a follow up**



“Own It”

1

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- If your healthcare professional is concerned about your safety, they may need to share information with other professionals

5

When can I use a pharmacy on my own?

- You can ask your pharmacist for advice at any age
- From **16 years old** you can collect your own prescriptions and can buy over the counter medications
- Under 16 years you can collect some prescriptions, ask your pharmacist for more information



6

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Spread it!

Back to...TODAY'S TAKE-AWAYS

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GETTING IN TOUCH

WEBINAR: 27th July , 3:00-4:30 PM

EMAIL: mando.watson@nhs.net
imperial.cc4c@nhs.net

TWITTER: @CC4CLondon

WEBSITE: www.cc4c.imperial.nhs.uk

WORKSHOPS: imperial.cc4c@nhs.net

Extra materials

SPREAD

North West London Child Health Hubs:



Child Health Hub development across the UK:

A map of trusts, CCGs and other organisations now involved with the CC4C programme



 connecting care for children

Opportunity

Design

Patient and public
involvement

Evaluation

Spread

#2035

Serena Simon

Bob Klaber

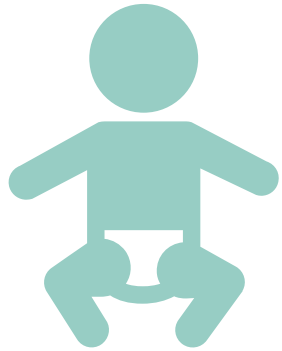
Objectives of this session

After this session, participants will:

- Understand the need for health and care systems across the globe to think differently about how they approach improving the wider determinants of health
- See the value of building local place-based partnerships in order to drive improvements to the health, wealth and wellbeing of local communities
- Understand more about an approach that starts with need, involves a blend of quality improvement and community engagement and is clear about the need to cede power

We have a shared vision: we want to reduce the gap in life expectancy by 50% by 2035

A baby boy born in Westbourne in the north of the borough has an average life expectancy of 76

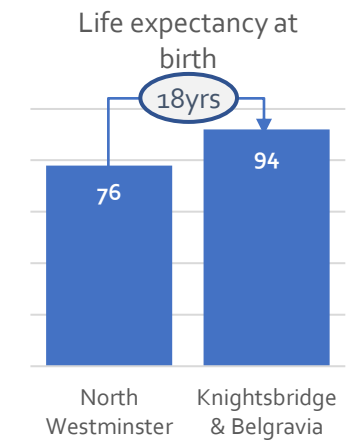
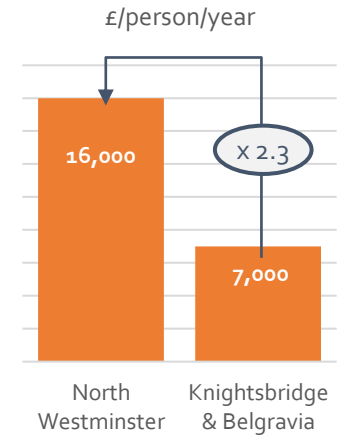


Despite there being spending of £16k per resident per year in this area

A baby boy born at Knightsbridge and Belgravia has a life expectancy of almost 94



Compared to an average of £7k per resident per year in other parts of Westminster



This is a life expectancy gap of 18 years! Despite spending over double in resources.



Time for a new community conversation

“Change will not come if we wait for some other person or some other time. We are the ones we’ve been waiting for. We are the change that we seek”

Barack Obama

#2035 – listening, connecting, accelerating & amplifying change

The starting point for this different approach was asking our local communities “What would it take to thrive around here?”

North Westminster programme trained Community Development Officers in research techniques and approaches to utilise their languages skills and high standing in communities.

Existing council outreach initiatives were used to recruit participants and successfully conducted 37 telephone/face to face/videocall interviews with 39 residents, 3 rapid street research sessions speaking to approx. 110 passers by and Informal interviews in Queen’s Park Children’s Centre with 11 parents during child play sessions.

01

To understand residents’ in-depth experiences and views of their local communities in North Westminster

02

To understand the unmet needs of residents in North Westminster and the nature of the community that residents want to live in

03

To begin identifying priority areas to help form the building blocks of the North Westminster Programme

04

To build trust with residents and create a network of people to join us on the full journey of this programme

Local people described the things they were most concerned about and the changes that would best meet their unmet needs



#2035 in a nutshell



One Vision

We - a wide group of organisations - will work with residents and staff in new and empowering ways to change futures and **half the gap in life expectancy for people living in Westminster by 2035**
But by listening to residents, not just focusing on health interventions: this started when residents told us that their health is driven by housing, money, community, neighbourhood, crime & safety, and structural racism



Four principles

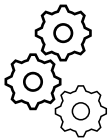
#2035 is about...

- **Focusing on health inequalities** through systems thinking, levelling-up to create a fairer Westminster
- **Putting residents at the centre** and working together on the challenges they prioritise
- **Creating proper partnerships in place**, working with residents and across agencies to solve problems and adapt solutions to local conditions
- **Mobilising a movement** for change where we all teach one another, and all learn from one another



Four methods

In doing this work together we will apply #2035 tools to **listen** more effectively, **connect** initiatives proactively, **amplify** what works, and **accelerate** for specific localities.



Three work packages

This is a big change to how we have traditionally done the day job. We will organise some defined 'reprogramming' work to **build it, do it and communicate it**. This means we will describe methods and build capability (all teach all learn); we will put this into practice in place-based partnerships; and we will collect the stories of how this is changing lives, changing futures, and creating lessons for improvement.



364,000 life years saved

By working like this we aim to have gained 364,000 life years for residents in the north of Westminster
[18yrs in boys & 10yrs in girls; halved x 52,000 people in North Paddington & Church Street]

#2035 is a fundamentally different approach, designed to get different results

What #2035 is:

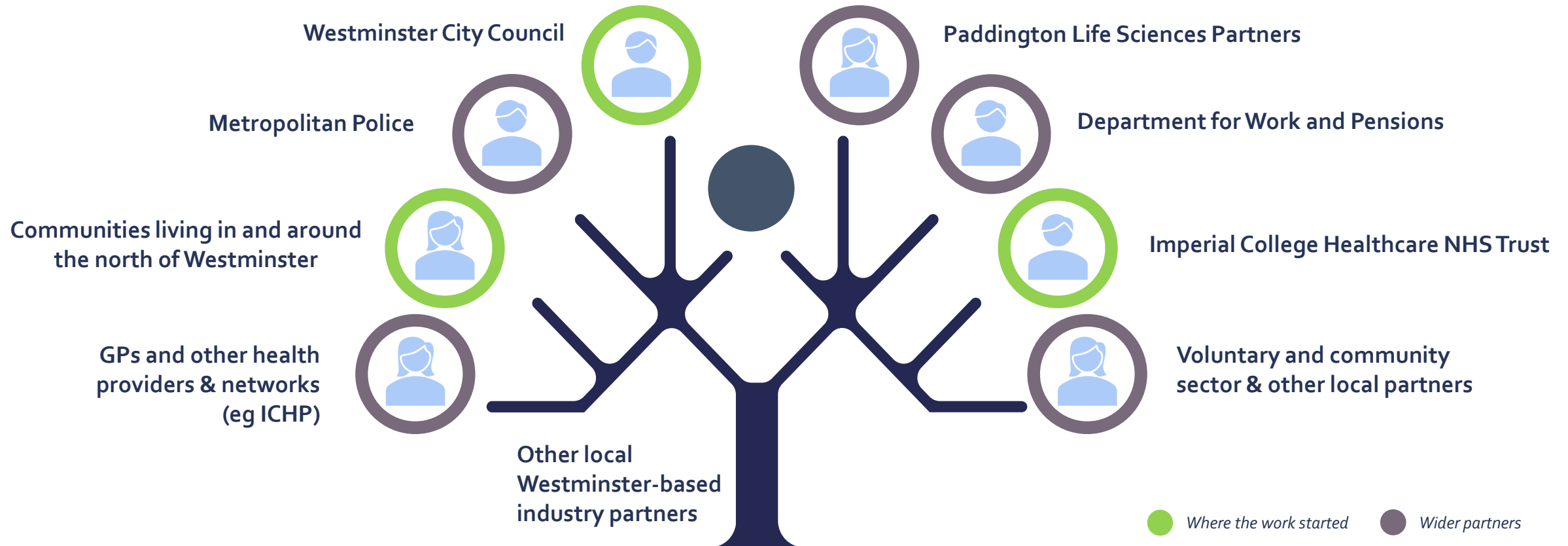
1. A call to action - and a then a practical approach - for all of us working with communities in Westminster to work together in new ways - specifically at the level of neighbourhoods and places
2. A programme of learning and support to develop new capabilities and mindsets in our organisations and within our communities
3. An approach that keeps going back to listen to our communities to understand and then act on the things that matter most to them

What #2035 is not:

1. A council initiative or NHS run programme
2. A set of projects
3. Something additional that people working in the council, the police, the NHS, the voluntary sector etc need to take on
4. A short term programme that can be usefully measured by traditional council, NHS, police etc measures and targets

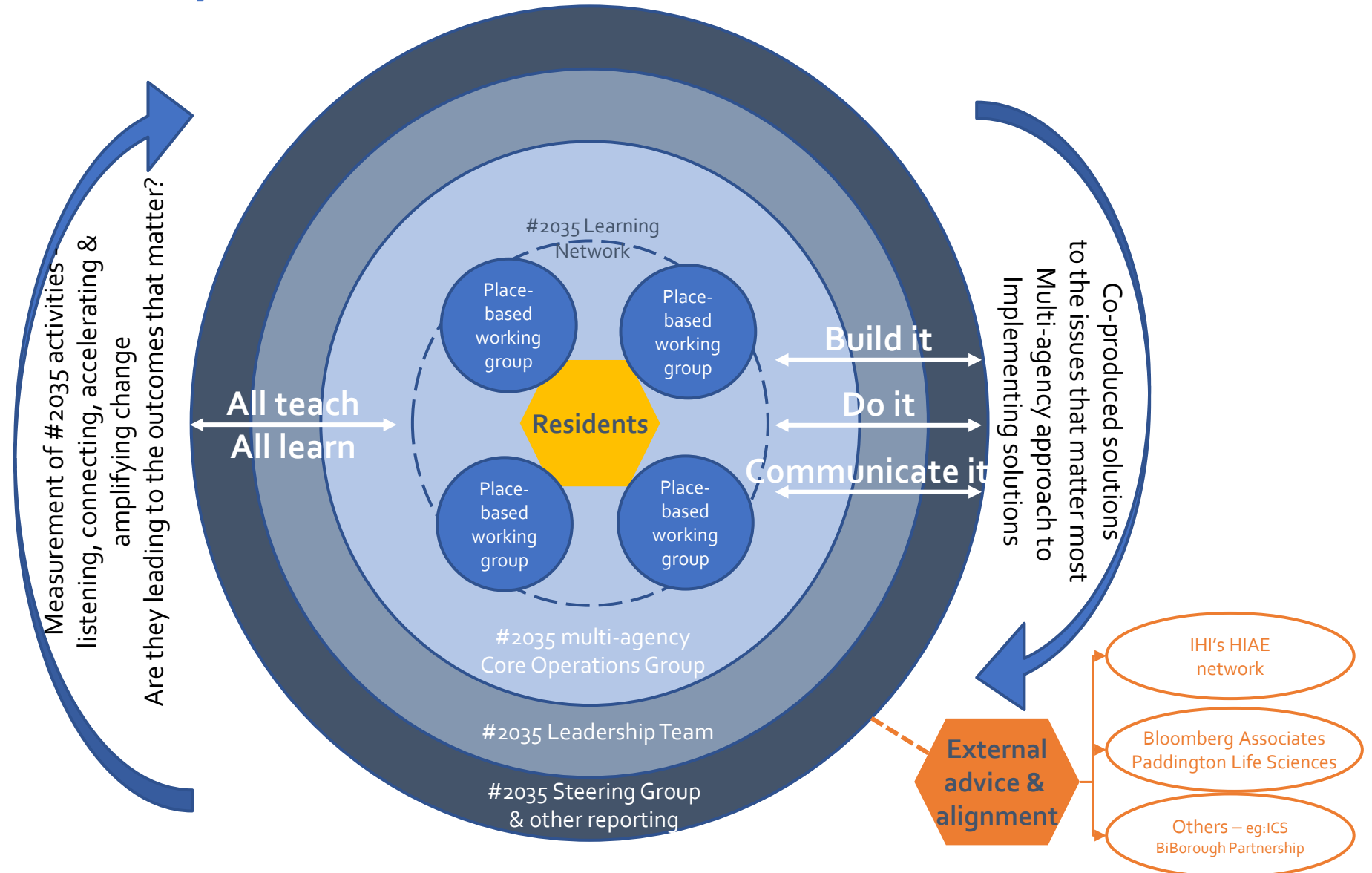
#2035 is not a council project or an NHS initiative – it is an approach, a way of working, where multi-agency partners are coming together as place-based action teams to work in partnership with local people to tackle key issues that are the things that our local communities are telling us matter most to them

Growing together in partnership



We are organising #2035 around place-based working - with and for residents; enabled by an all teach all learn for all of us

We are organising our approach to governance as a multi-agency learning system



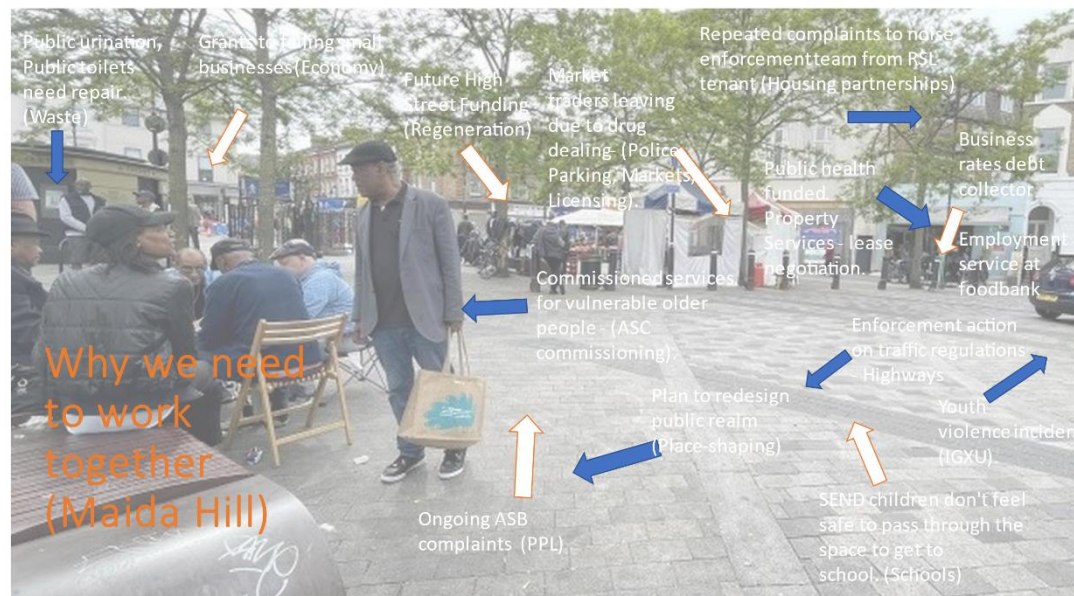
The #2035 design principles that run through everything

1. **Start with need.** Concentrate on and stay true to what matters most to our local communities in the north of Westminster. Keep the voice of the local community at the heart of co-design, improvement work and decision making. This needs us to **cede power**.
2. **Work in a different way – *listen, connect*** people and build trust and relationships to ***accelerate*** and ***amplify change***. Move away from running project after project to foster a different way of working together in partnership and tackling things jointly. No one organisation or agency 'owns' #2035; it is a genuine collaboration and partnership.
3. **Find the right blend of community engagement and improvement method** to address the issues that local community members highlight as barriers to them and their family thriving – apply this to each of the three work packages within #2035
4. **Continually learn from each other and from elsewhere**
5. **Use improvement method** to (a) articulate a logical link between aims, activities and expected outcomes (b) support tests of change and (c) evaluate the work and measure impact

Change is needed now

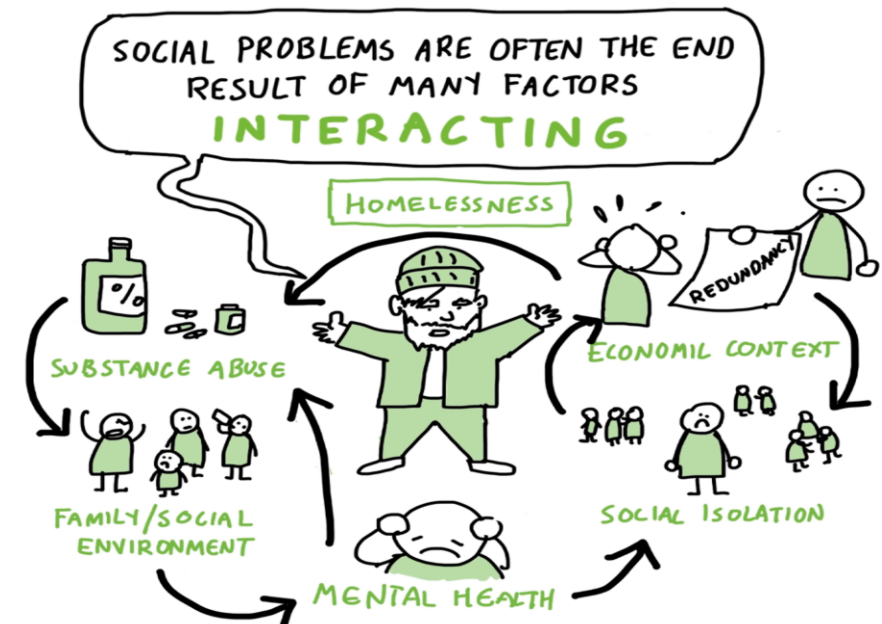
e.g., We might want to reduce obesity, but residents have told us that they can't easily increase physical activity because they are unable to use the park safely because of fear of crime, relationships with the police, no benches to rest on, no ball games and the toilets being broken. There isn't a pill we can prescribe- we need a different response.

Complex community and client needs, require new ways of working from council and partners, including our communities...Complexity needs to be embraced through systems-thinking approaches.....



...engaging with, and responding through a **place-based approach**

westminster.gov.uk/fairer-westminster



*images taken from www.humanlearning.systems

...seeing, and responding to, the **'whole person'**

#FairerWestminster

#2035 how? – the essence of #2035 is around doing things very differently to how organisations like local authorities, the NHS, the police etc traditionally operate

**#2035 – listening,
connecting,
accelerating &
amplifying change**

Some homework for the train / plane home

From everything you have heard from Mando, Keira, Serena, Dominique over the last 55 minutes is there something you could take home with you and do something with?

It might be to:

- Share something with a colleague
- Test something
- Pick up the telescope from the other end and look through it
- Write something
- Be an advocate for something
- Stop doing something
-or something else....

Spend 60 seconds now thinking about what it might be....then commit to doing it