

## **NORTH LINCOLNSHIRE COUNCIL**

Health and Wellbeing Board

### **A briefing on Population Health Management Approaches**

#### **1. OBJECT AND KEY POINTS IN THIS REPORT**

- 1.1 This paper provides a short briefing to provide insight into some of the core principles and objectives of population health management, as it features in the strategic integration intentions of the NHS and local partnerships.
- 1.2 It briefly describes the priorities for population health management development in North Lincolnshire and outlines progress to date.
- 1.3 Developing approaches to population health management is a key responsibility of Integrated Care Systems (ICSs) and there is a great deal of work underway in national service and academic circles to define and operationalise it.
- 1.4 As this would suggest, there are a range of definitions and models in place or under development. There is therefore some leeway for the local ICS and its places to design and develop approaches which support local aspiration, within some clear parameters.

#### **2. BACKGROUND INFORMATION**

- 2.1 The accepted parameters which need to be in place for a local approach to population health management to be effective could be summarised as:
  - Population Health Management (PHM) needs to be applied to a clearly defined population, by place or other common characteristics.
  - It is dependent on deep insights into the defined population selected for the approach.
  - These insights should drive actions, singly or in partnership, by service commissioners; providers, and people within the target populations to improve health outcomes.

- The actions should affect health outcomes in the immediate term by improving interventions and in the longer term by improving determinants of health.
- 2.2 Population Health Management is an approach to using data insights to improve health and wellbeing now and in the future and not a structure.
- 2.3 Its effectiveness does require structures which facilitate shared data and insights, including information from the defined population.
- 2.4 It needs resources aimed at health outcome improvement to be deployable in evidence based, flexible and person rather than service centred ways.
- 2.5 The Board has seen proposals, endorsed by the North Lincolnshire Place Partnership, which begin to set some of the conditions for PHM to become an established approach.
- 2.6 Amongst these are the intention to move to models of neighbourhood working for primary and community services. A step towards this will be the organising of communities into 'neighbourhoods', providing the defined populations required for PHM.
- 2.7 The prioritisation of Integrated Neighbourhood Team (INT) development will begin to develop different ways of orientating appropriate resources towards these neighbourhoods. The initial priorities for these being the 'now' time frame, building outwards to longer term determinants of their future health state.
- 2.8 Further development work is being/needs to be scoped to ensure the richness of insights from shared data and the experiences of local people are available to inform both timelines.
- 2.9 Following the publication of the NL Health & Wellbeing Strategy in 2021, the Public Health team in NLC was tasked with setting up a PHM partnership group to engage partners in developing North Lincolnshire's approach to Population Health Management. The NL Population Health & Prevention Partnership has identified priority areas to explore a PHM approach utilising data, intelligence and insight to identify those groups and individuals who are at the greatest risk of the worst health and wellbeing outcomes and proposals to reduce risk. Current areas being explored are teenage pregnancy, respiratory disease, housing and health and Scunthorpe North.

### 3. **OPTIONS FOR CONSIDERATION**

- 3.1 Population Health Management (PHM) is a generic term, which requires some conditions to be in place to increase its likelihood of success. It's implementation by ICSs is current NHS policy, but in implementing it some options should be considered.
  - 3.1.1 Option One would be maintenance of the status quo, leaving current systems of management in place. This option would see the maintenance of systems

which do not lend themselves to meeting the strategic integration goals of North Lincolnshire.

3.1.2 Option Two would be the implementation of a single system or approach to population health management for all populations, however defined, bringing a uniformity of approach across North Lincolnshire.

3.1.3 Option Three would be implementation of a framework for PHM, which all place partners would adopt, and would allow flexibility in approach to meet local needs and operating arrangements.

#### **4. ANALYSIS OF OPTIONS**

4.1 Option One would put North Lincolnshire partners at odd with national health and care policy. If pursued it would need to be justified on the basis that existing systems were capable of delivering national and local strategies for prevention and service integration. Analysis of the performance of local systems, whilst benchmarking well with other systems indicates there are gains to be made from further integration. It is unlikely therefore that there is an evidence-based case to be made to pursue Option One.

4.2 The needs of different populations in North Lincolnshire have significant variation and the organisation of support to some defined populations is already evidencing success. It is unlikely therefore that the implementation of a single system of PHM for all defined populations, as described in Option Two, would be acceptable or effective. For example, the organisation of PHM for older adults is on track to be organised in defined 'neighbourhoods' whilst the organisation of PHM for children may be better organised on existing networks, based on hubs.

4.3 Option Three enables the development of some of the conditions for the implementation of PHM, such as integrated data systems, once for North Lincolnshire, enabling efficiencies. The products and tools can then be utilised to inform the work of integrated teams and services organised differently to fit the target population and existing footprints of delivery. This option is the most appropriate for North Lincolnshire, as well as enabling some economies across Northern Lincolnshire without hindering place sensitive delivery solutions.

#### **5. FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

5.1 Detailed organisational development work is needed to implement some of the conditions for PHM to be effectively implemented. They will need to cover the whole range of due diligence duties of the partners in each of the elements. These will include, not exclusively: data sharing and integration; engagement with key staff and stakeholders to agree organisational and operating models.

5.2 A set of organisational development frameworks have been in development by the relevant Place groups and are now nearing completion. Leaders of the main areas of activity will begin the detailed work required once agreed.

5.3 Developing the data integration and analytical tools which will provide the 'deep insights' requirement will require investment in analytical capacity across the North Lincolnshire partners.

6. **OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

6.1 These issues will be addressed in the decision making, in due course, of the model of PHM to be delivered and the arrangements to enable its implementation.

7. **OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

7.1 These issues will be addressed in the decision making, in due course, of the model of PHM to be delivered and the arrangements to enable its implementation.

8. **OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

8.1 These issues will be addressed in the decision making, in due course, of the model of PHM to be delivered and the arrangements to enable its implementation.

9. **RECOMMENDATIONS**

9.1 The Board should note this briefing and the initial steps being taken in local strategic frameworks and partnerships to create the ambition and conditions for PHM to be successful in improving health in North Lincolnshire

9. The Board should endorse the recommendation to develop PHM capability in North Lincolnshire using the approach described in Option Three.

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**Background Papers used in the preparation of this report:**

None.