

Health and Wellbeing Board			
Report Title	Developing an Integrated Approach to Public Health in South East London: Establishing an Institute of Urban Public Health		
Key Decision	No	Information Item No.	7B
Ward	All		
Contributors	Executive Director for Community Services (Director of Public Health)		
Class	Part 1	Date:	24 March 2015

1. Purpose

The purpose of the paper is to update the committee on the progress made in establishing a public health collaborative across Lambeth, Southwark and Lewisham involving all key partners, and proposals to establish an Institute of Urban Public Health.

2. Recommendation/s

The committee is recommended to:

- Note the progress made in the initial two year programme;
- Support the grant application to establish an Institute of Urban Public Health.

3. Policy Context

3.1 There are profound Public Health challenges facing the local population served by the London Boroughs of Lambeth, Southwark and Lewisham, by King's Health Partners (KHP), Lewisham & Greenwich NHS Trust, Primary Care providers, Clinical Commissioners and other stakeholders. There are also tremendous opportunities for these organisations to work with the local population in South East London to develop and deliver innovative interventions to reduce inequalities and improve the quality of care.

3.2 The South East London Collaborative is committed to co-designing, co-evaluating and co-implementing public health interventions specifically aimed delivering the Health and Wellbeing Strategies of Lambeth, Southwark and Lewisham Health & Wellbeing Boards.

4. Background

- 4.1 The current UK health system is unsustainable and it is now accepted that the emphasis has to be on prevention in the population. The recent transfer of public health (PH) responsibility to Local Authorities provides a rare opportunity to harness our relationships, commitment, skills and structures in the south London health and social care sector to develop innovative methods and ways of working in order to enable public health service practitioners and academics to improve health outcomes. Over the past two years we have established an Urban Public Health Collaborative in Lambeth, Southwark and Lewisham that has engaged with local residents, local health care providers, King's College London academics, Borough senior leaders and PH departments, PH England and international collaborators.
- 4.2 To make a really significant impact in reducing premature mortality and health inequalities in urban populations will require PH academics, practitioners, clinicians, clinical researchers, public servants, policy makers and local communities to work together to co-design, co-evaluate and co-implement cost-effective complex public health interventions that are innovative and sustainable to scale.

5. **Application to the Guy's & St Thomas' Charity to establish an Institute of Urban Public Health**

- 5.1 The Collaborative was launched in April 2013 with representation from all three Boroughs (Leaders of the Boroughs, and Chairs of Clinical Commissioning Groups and Health & Wellbeing Boards), KHP and its Clinical Academic Groups (CAGs) as well as Public Health England (PHE). Working relationships with the local partners were agreed which included informal regular updates with the Chairs of the CCGs and Health & Wellbeing Boards as well as formal presentations at the meetings to the Boards.
- 5.2 We aim to build on these unique collaborative foundations and develop new ways of working using co-production and the innovations in our organisations to develop and evaluate PH interventions in local communities that will also have international relevance. The vehicle for this will be an **Institute for Urban Public Health (IUPH)**.

The Objectives of the proposed Institute are to:

1. Develop health needs assessment tools to target inequalities in priority areas (obesity/exercise, alcohol, long term conditions, child health, domestic violence).
2. Develop and evaluate innovative cost-effective prevention strategies and systems service transformations required to deliver them.
3. Develop and deliver training and education programmes to increase capacity in the health and social care system to facilitate this service transformation.

- 5.3 The new Health & Social Care Act places much greater emphasis on preventing disease and improving population health & wellbeing. However, these changes come at a time when the NHS is being asked to generate £30bn of efficiency savings. In Lambeth, Southwark and Lewisham this equates to a £192m funding gap by 2018/19.

At the same time our respective local authorities are expected to save over 30% of their current expenditure over the next 3-4 years. Whilst major transformation programmes are in place locally to deliver more cost effective, integrated health and social care they remain untested and have been set up with traditional governance arrangements between providers, yet not citizen led or academically underpinned.

Integration and transformation of our public health system is needed in order to improve prevention strategies and thereby reduce the demand on care and achieve the scale of savings that will require robust innovative academically driven approaches to ways of working and design and evaluation of PH programmes that we have methodological skills in developing (e.g. systems change; complex interventions in obesity, smoking, alcohol, long term conditions and child health).

- 5.4 If for example south east London reduced premature deaths, that are substantially lifestyle driven, from cardiovascular disease, cancer, and Chronic Obstructive Pulmonary Disease to the levels of the best quartile boroughs in England would lead to an annual reduction of 245, 164 and 211 premature deaths respectively.
- 5.5 Although research suggests that such reductions could be achievable through lifestyle and behaviour change, making this happen in practice has proved challenging to implement in different population settings and more evidence about the most cost-effective approaches to achieving behaviour change are required, building on our developments over the last 2 years in the South London Public Health Collaborative. Even where such evidence exists, we lack innovative sustainable approaches to initiate successful implementation of public health interventions on a large scale.
- 5.6 To make a significant impact in reducing premature mortality and health inequalities within our communities will require us to build upon the collaborations and development and evaluation of complex PH interventions established in the last 2 years with further funding from the Guy's & St Thomas' funding. This will require academics, public health practitioners, clinicians in primary and secondary care, researchers, public servants, policy makers and local communities to develop new ways of working and learning together. Central to this approach will be the integration of the various local and national information systems that collect data on health and social service and patient characteristics in order to better target and personalise prevention and treatment programmes in priority areas for the three Local Authorities' Health & Wellbeing Strategies.

5.7 The proposed Institute will have three overarching programme objectives that are distinctively different from current PH practice in the three boroughs:

1. Develop and undertake targeted local needs assessments in priority areas in order to design and develop a range of responses to the health challenge.

This approach will involve harnessing the power of local and national information sources and state of the art intelligence and analysis to target inequalities in health and to undertake refined needs assessments (e.g targeting at risk groups) and develop measures of health outcomes. This will involve liaising closely with local NHS primary and secondary care information projects (eg Lambeth DataNet) and similar patient-level primary care databases (for which the infrastructure exists in Southwark and Lewisham) and current initiatives e.g. alcohol activities within the Collaboration for Leadership in Health Research and Care (CLAHRC), Health Innovation Network (HIN) and Centre for Implementation Science (CIS).

2. Develop new methods and approaches to co-design, co-evaluate and co-implement innovative complex public health interventions.

This will be an underpinning theme to the innovations required to improve prevention interventions and sector wide approaches to service transformation more generally. Work in South London has already begun using such an approach in obesity, exercise, child health and integrated care. We will take a Medical Research Council approach to developing complex interventions that will require the data from Objective 1, ethnographic work with the local population and group engagement that require targeting, testing the feasibility of the intervention and piloting them in different settings.

It will also be important to the credibility of the Programme and Institute's brand as well as the evidence used for future commissioning that we ensure such developments are externally funded and the results published in peer reviewed journals and contribute to NICE Public Health guidance. This model has been successful locally in the areas of bariatric surgery, health checks and smoking cessation and alcohol (funding from NIHR, Wellcome and MRC).

3. Develop and provide public health and health improvement education and training opportunities to front line staff across the south east London health and social care economy to ensure everyone has the knowledge and skills to participate.

As part of the current Collaborative funded by the Charity we have designed an education programme based on the requirements of local public health and clinical professionals and their daily challenges using distance learning, peer support and project supervision approaches. Service organisations will sponsor local staff to work together with academic staff to address local problems as part of their education.

The first course is currently running with 20 professionals involved and web based materials available.

- 5.8 A gap in the Collaborative model to date has been the lack of academic and local authority capacity to respond to issues raised by the commissioning requirements of the boroughs and Clinical Commissioning. Hence, we propose funding evaluation capacity to support service redesign and transformation of local service organisational structures. This will take the form of dedicated qualitative and quantitative researchers and analysts based at KCL, and secondment and back fill of local authority public health staff to collaborate on the co-production of intervention design and evaluation.

6. Financial implications

- 6.1 It is proposed to submit a grant application in early 2015 to the Guy's & St Thomas' Charity for £1.7m for three years to establish the Institute.
- 6.2 It is anticipated that if the Institute demonstrates value in achieving public health outcomes for the populations of Lambeth, Southwark and Lewisham, that local authority, CCG and the University partners will continue to provide core funding for the Institute, with additional funding obtained from research grants. Any ongoing funding from the Council will be from base budgets.

7. Legal implications

- 7.1 There are no legal implications

8. Equalities Implications

- 8.1 All public health interventions will be designed specifically to reduce health inequalities. A co-production / community development approach will underpin all the Institute's work; this will ensure a focus on addressing the needs of the most disadvantaged in our communities.

9. Conclusion

It is hoped that a successful bid to the Guy's & St Thomas' charity will allow us to establish a collaborative Institute of Urban Public Health in South East London would allow us to:

- Build world class research capacity to develop and evaluate complex public health interventions;
- Provide the education and training opportunities necessary to equip all our local stakeholders with skills to engage in the design, evaluation and implementation of complex public health interventions;

- Provide a forum and resources for partners across Lambeth, Southwark and Lewisham to work together to design, evaluate and then implement large scale complex public health interventions across the populations and communities of South East London;
- Create the world's first Institute of Urban Public Health founded on the principles of co-production.

If there are any queries on this report please contact **Dr Danny Ruta**,
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