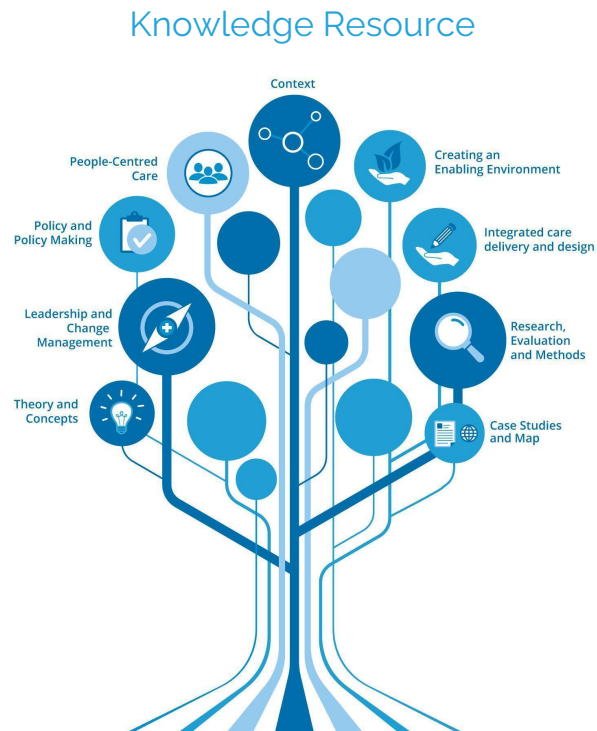


Integrated Care Matters

Personalised Approaches to Population Health



About the information

The information provided in this document is intended to support the Integrated Care Matters webinar series.

Where possible, we select evidence that is published open access, and provided links to the materials referenced. Some are identified as author repository copies, manuscripts, or other copies, which means the author has made a version of the otherwise paywalled publication available to the public. Other referenced sources are pdfs and websites that are available publicly.

Developed in partnership



Batchelor P & Kingsland J (2020) [Improving the Health of the Homeless and How to Achieve It within the New NHS Architecture](#) Int. J. Environ. Res. Public Health 2020, 17, 4100

A key segment of society that suffers from poor health is the homeless. While the potential for the group to benefit from the NHS reform policy programme in England exists, it requires stronger collaborative working between the health and social care sectors. Not least the new arrangements provide opportunities to tackle existing disease as well as the determinants of future ill health. However, if the policy vision is to be achieved, relations between the two sectors must occur and cross sector boundaries be broken down.

[Bea Veayn](#)

Bygrave A, Whittaker K, Aranda Am S (2020) [Assessing the implementation of interventions addressing socioeconomic inequalities in cancer screening in high-income countries](#). J Public Health Res. 2020 Nov 10;9(4):1713

The context of an intervention may influence its effectiveness and success in meeting the needs of the targeted population. Implementation science frameworks have been developed, but previous literature in this field has been mixed. This paper aimed to assess the implementation success of interventions, identified from a systematic review, that reduced inequalities

in cancer screening between people in low and high socioeconomic groups. While some interventions reduced socioeconomic inequalities in cancer screening participation, there have been missed opportunities to integrate the experiences of the targeted population into design and evaluation components. This has limited the potential for transferability of outcomes to other settings.

Cancer Research UK (2020) [Health inequalities: “We have a moral duty to reduce them”](#)

Professor Sir Michael Marmot, who has stood at the forefront of research into health inequality for decades, discusses what health inequality actually is, and what we can do to reduce it.

Catriona Morton (2020) [Health Inequalities in Scotland](#)

Cerner (2020) [Population health, primary care networks and personalisation: Using data to transform care and improve health outcomes](#)

In this short paper, one perspective is provided on how PCNs – a model of care emerging globally within integrated care systems (ICSs) – can make use of population health data and technology to support evidence-based improvement across large health and care systems.

Cockburn Integrated Health [Healthy Outreach Program \(HOP\)](#)

The Healthy Outreach Program (the HOP) was a pilot program offering services and activities to help people wanting to begin healthier lifestyles who may not usually access mainstream services. The HOP provided social, fun, and accessible activities with support in place to help people get closer to reaching their goals.

Deloitte (2019) [Identifying the gap: Understanding the drivers of inequality in public health](#)

Goodwin, N et al (2022) [From People-Centred to People-Driven Care: Can Integrated Care Achieve its Promise without it?](#) *International Journal of Integrated Care*

People-centred care seeks to build the skills and resources that individuals and communities need to be articulate and empowered users of health and care services. It is an approach that supports people to make effective decisions about their own health to achieve the outcomes that matter most to them. It enables communities to become active in partnering with care services and contributing to relevant research, education and healthy public policy. Special attention is often given to tackling inequalities by engaging and supporting the voices of marginalised, vulnerable and disengaged people.

The Health Foundation (2022) [A framework for NHS action on social determinants of health](#)

In this long read, we outline a framework to understand potential approaches for NHS organisations seeking to address social factors that shape health, focusing on the role of local and regional action – for instance, in the new ICSs. We review existing frameworks, examples from NHS policy and practice, and evidence on interventions often promoted in the NHS in England. We highlight gaps in knowledge that must be addressed to clarify the role of the NHS in addressing social needs, and identify policy priorities for the future.

Imagined Futures [A collective impact approach to solving complex social issues](#)

The Imagined Futures approach recognises that complex social issues are beyond the capacity of any single organisation to resolve.

National Services Scotland (2022) [Addressing health inequalities by reforming screening engagement and collaborating across health and social care](#)

Documents from the recent project exploring reform of health inequalities.

NHS Health Scotland [The role of Health and Social Care Partnerships in reducing health inequalities](#)

Office for Health Improvement and Disparities (2020) [PHE Screening inequalities strategy](#)

Office for Health Improvement and Disparities (2022) [Community-centred practice: applying All Our Health](#)

Community-centred ways of working can be more effective than more traditional services in improving the health and wellbeing of marginalised groups and vulnerable individuals. For this reason, they are an essential way of reducing health inequalities within a local area or community.

Inclusion health

Cheallaigh CN, Lawlee AM, Sears J, & Dowds J (2018) [The Development of an Inclusion Health Integrated Care Programme for Homeless Adults in Dublin, Ireland](#).

International Journal of Integrated Care, 18(s2), p.184

We sought to develop and pilot a person-centred, multi-disciplinary approach to care delivery through an Inclusion Health Integrated Care Programme for homeless people attending St James's Hospital. An Inclusion Health Integrated Care Programme is feasible and acceptable and offers benefits to patients and health care providers, with evidence

of reduced need for costly unscheduled healthcare during the pilot programme.

The King's Fund [Inclusion health at scale: beyond pockets of excellence](#)

The King's Fund (2022) [If integrated care cannot tackle inclusion health, we should all be worried](#)

NHS England [Inclusion health groups](#)

Inclusion health is an umbrella term used to describe people who are socially excluded, who typically experience multiple overlapping risk factors for poor health, such as poverty, violence and complex trauma. This includes people who experience homelessness, drug and alcohol dependence, vulnerable migrants, Gypsy, Roma and Traveller communities, sex workers, people in contact with the justice system and victims of modern slavery.

Pathway (2018) [Homeless and Inclusion Health standards for commissioners and service providers](#)

The purpose of this document is to set clear minimum standards for planning, commissioning and providing healthcare for homeless people and other multiply excluded groups.

Public Health England (2021) [Inclusion Health: applying All Our Health](#)

This guide is part of 'All Our Health', a resource that helps health and care professionals prevent ill health and promote wellbeing as part of their everyday practice. The information below will help front-line health and care staff use their trusted relationships with individuals, families and communities to take action on inclusion health.

Personalised and holistic care

Department of Health & Social Care (2019) [Advancing our health: prevention in the 2020s](#)

The report suggests that a new personalised prevention model offers the opportunity to 'build on the success of traditional public health interventions' and tackle new health challenges.

Jani, A et al (2021) [Health inequalities and personalised care in England April 2017-March 2021](#)

NHS England (2018) [Comprehensive model of Personalised Care](#)

The comprehensive model of personalised care helps to establish a whole-population approach to supporting people of all ages and their carers to manage their physical and mental

health and wellbeing, build community resilience, and make informed decisions and choices when their health changes.

Nuffield Trust (2019) [Age UK's Personalised Integrated Care Programme: Evaluation of impact on hospital activity](#)

Detailed analysis concludes that it has almost certainly not been able to reduce costs or emergency admissions. While in some areas there was no apparent impact on hospital activity, overall there was a higher than expected use of emergency and outpatient services, and a corresponding increase in costs. These effects were detectable from the very start of the service and persisted for more than a year after. However, the results suggest that the scheme may be identifying unmet need in the population, which manifests in greater use of hospital care. This might be to the ultimate benefit of the older people in the longer term.

Office for Health Improvement and Disparities (2015) [All Our Health: personalised care and population health](#)

A framework of evidence to guide healthcare professionals in preventing illness, protecting health and promoting wellbeing.

Personalised Care Foundation [What is personalised care?](#)

Personalised care represents a major practical change to the NHS and is a key part of the NHS Long Term Plan. It is a

whole system approach that enables a variety of services across the health, social care, public health and community spectrum to be integrated around the individual in order to deliver better outcomes and experiences. It has also led to the creation of a range of new roles that further improve the quality of care that patients receive.

Ruggeri K, Benzerga A, Verra S, & Folke T (2023) [A behavioral approach to personalizing public health](#) *Behavioural Public Policy*, 7(2), 457-469 (paywall)

Behavioral policies are increasingly popular in a number of health care contexts. However, evidence of their effectiveness, specifically in low-income and highly disadvantaged populations, is limited. Some positive effects have been found for adaptive interventions, which merge more personalized approaches with advances in data collection and modern analytical methods. These approaches have only recently become feasible, as their implementation requires a confluence of large-scale datasets, contemporary machine learning, and validated behavioral insights. Such methods have considerable potential to improve outcomes without requiring substantial increases in effort on the part of individuals. Using examples from health insurance choice, clinical attendance rates, and prescription of medicines, we present an argument for how adaptive approaches, especially those considering disadvantaged populations explicitly, offer an opportunity to generate equity in public health.

Scottish Government (2018) [Practising Realistic Medicine: Chief Medical Officer for Scotland annual report](#)

The Chief Medical Officer's third annual report on applying the personalised, patient-centred realistic medicine approach across Scotland.

Wong E, Mavondo F, Horvat L et al (2022) [Healthcare professionals' perspective on delivering personalised and holistic care: using the Theoretical Domains Framework](#) *BMC Health Serv Res* 22, 281

This study reports on the development and testing of a questionnaire to identify perspectives of healthcare professionals' personalised and holistic care behaviours based on the Theoretical Domains Framework. This study identified the specific behaviours and the factors associated with performance of personalised and holistic care among healthcare professionals. The findings suggest several interventions and policy functions may be taken to improve personalised and holistic care.

Population health

Delgado P, Binzer K, Shah A, Ekberg J, Arrieta J, Allwood D et al. (2021) [Accelerating population health improvement](#) BMJ 2021; 373 :n966

Key messages: Improvement methods traditionally used in healthcare can also be used by other actors outside healthcare working to improve population health; The adoption of improvement methods by stakeholders working to improve population health has the potential to catalyse their joint efforts; Using common implementation tools and language can help to achieve shared aims
Population health improvement learning is likely to exponentially increase in months and years to come

Deloitte (2019) [The transition to integrated care](#) [Population health management in England](#)

Implementing a PHM approach and moving the mind-set from reactive care to a model of proactive care for the population's health is a big challenge. It requires a significant change in culture, and the deployment of new financial incentives and performance metrics. It will also require 'smart' investment in technology and new skills and talent. The solutions and enablers discussed in this report provide a framework and a set of tools that STPs and ICSs can utilise in the design and implementation of PHM programmes.

The King's Fund (2021) [The road to renewal: five priorities for health and care](#)

Sets out five priorities to help guide the approach to renewal across health and care:

- putting the workforce centre stage
- a step change on inequalities and population health
- lasting reform for social care
- embedding and accelerating digital change
- reshaping the relationship between communities and public services.

The King's Fund (2022) [What is a population health approach?](#)

This explainer sets out what the term means and looks at what is involved in improving population health.

LSE (2022) [The Promise of Population Health Management in England: From Theory to Implementation](#)

The objectives of this study are to firstly to gain a greater understanding of the nuances of population health (PH) and PHM; and secondly, to understand the current state of PHM implementation in the English context, as well as the enablers, challenges and ways forward. A scoping review, supplemented by six one-hour interviews with key English experts and PHM stakeholders, was used to inform this

report. An analytical framework was developed utilizing PHM's four critical building blocks: infrastructure, insights, interventions and impacts. The authors built on these four critical building blocks and identified the key components for successful PHM through identifying the key objectives of PH and PHM. The framework was used to analyse the state of PHM within the English context.

McShane, M. and Kirkham, K. (2020) [Making it personal – population health management and the NHS](#) *Journal of Integrated Care*, Vol. 28 No. 3, pp. 243-252

Population health management is a major change in the way health and care systems look at the challenges they are facing. It makes what is happening to individuals, across the continuum of care, the essence for insight and action. The NHS has the components for success and the potential to become world leading in delivery of population health management as part of its integrated care agenda.

NHS Confederation (2020) [Getting a head start on population health management](#)

Exploring the role of population health management in helping to understand patients' needs.

NHS England [Population Health and the Population Health Management Programme](#)

Population health is one of our core strategic aims for integrated care systems (ICSs); to improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population, with a specific focus on the wider determinants of health (things like housing, employment, education). Population Health Management is a way of working to help frontline teams understand current health and care needs and predict what local people will need in the future. This means we can tailor better care and support for individuals, design more joined-up and sustainable health and care services and make better use of public resources. PHM uses historical and current data to understand what factors are driving poor outcomes in different population groups. Local health and care services can then design new proactive models of care which will improve health and wellbeing today as well as in future years' time.

SCIE (2022) [Integrated care research and practice: Population approaches](#)