

# The Long Term Plan and clinical senates

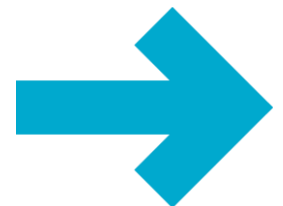
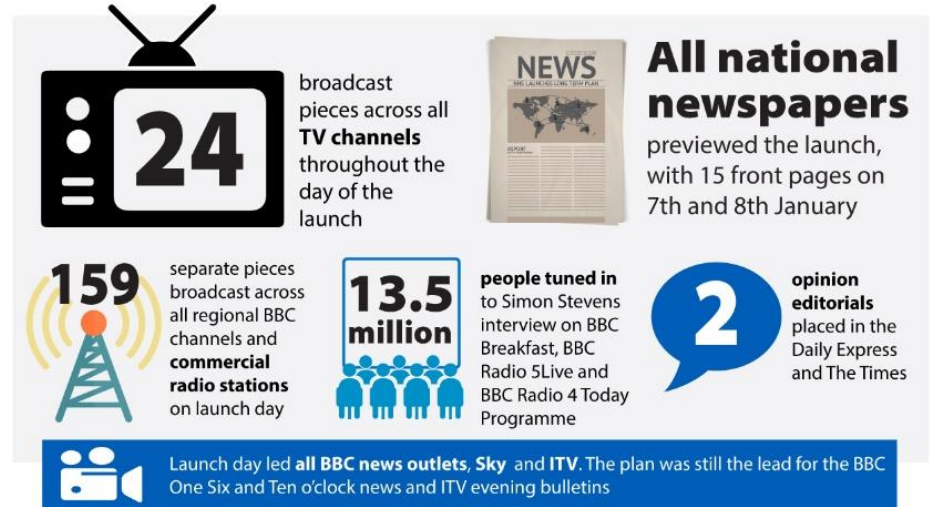
Harnessing Evidence to Deliver  
the Long-Term Plan

7 March 2019



# 1 #NHSLongTermPlan

- Well-trailed from late last year
- Published January 2019
- Widely welcomed
- It's the NHS Long Term Plan – what about public health and social care?



## 2 The vision: an NHS fit for the future

The NHS Long Term Plan will make sure the NHS is fit for the future, providing high quality care and better health outcomes for patients and their families, through every stage of life...

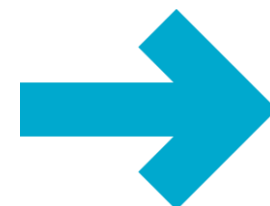
- by giving everyone the best start in life
- by delivering world-class care for major health problems to help people live well
- and by helping people age well



## 3 How the NHS will be fit for the future (1)

To make this ambitious vision a reality...

- **We will join up the NHS so patients don't fall through the cracks**, such as by breaking down the barriers between GP services and those in the community.
- **The NHS will help individuals and families to help themselves**, by taking a more active role in preventing ill-health, such as offering dedicated support to people to stop smoking, lose weight and cut down on alcohol.
- **The NHS will tackle health inequalities** by working with specific groups who are vulnerable to poor health, with more funding for areas with high deprivation and targeted support to help homeless people, black and minority ethnic (BAME) groups, and those with mental illnesses or learning disabilities.



## 4 How the NHS will be fit for the future (2)

To make this ambitious vision a reality...

- **We will back our workforce by increasing the number of people working in the NHS**, particularly in mental health, primary care and community services.
- **We will bring the NHS into the digital age**, rolling out technology such as new digital GP services that will improve access and help patients make appointments, manage prescriptions and view health records on-line.
- **The NHS will spend this extra investment wisely, making sure money goes where it matters most.** The NHS will build on the £6 billion we saved last year by reducing waste, tackling variations and improving the effectiveness of treatments.



# 5 Putting the NHS Long Term Plan into practice

NHS organisations – working together as part of systems, with their local authority counterparts and other partners – are being asked to develop their own STP/ICS-level strategies for the next five years, which set out how they intend to translate the plan's contents into local action.

Staff, patients, the public and other stakeholders should have the opportunity to help each STP/ICS determine what the plan means locally, and how services need to change and improve in the short and medium term.

Each local strategy will set out how it will make the ambitions of the Long Term Plan a reality for the communities it serves.



# Comments on the plan



NHS Alliance chair  
Dr Brian Fisher

## A MANIFESTO FOR Health Creation

May 2017

Supported by



Endorsed by the  
Royal College of  
General Practitioners

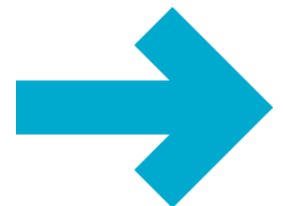
“The New NHS Alliance also recognises that the plan has some good, evidence-based ideas. However, overall we are very concerned that people and community-centred approaches to improving health are absent.

The plan asserts that it will produce (with PHE, VCSE & Local Authority partners) a ‘menu’ of **evidence-based interventions** to tackle health inequalities. We call upon NHS England to include the New NHS Alliance’s resident-informed Health Creation framework”



# Harnessing evidence

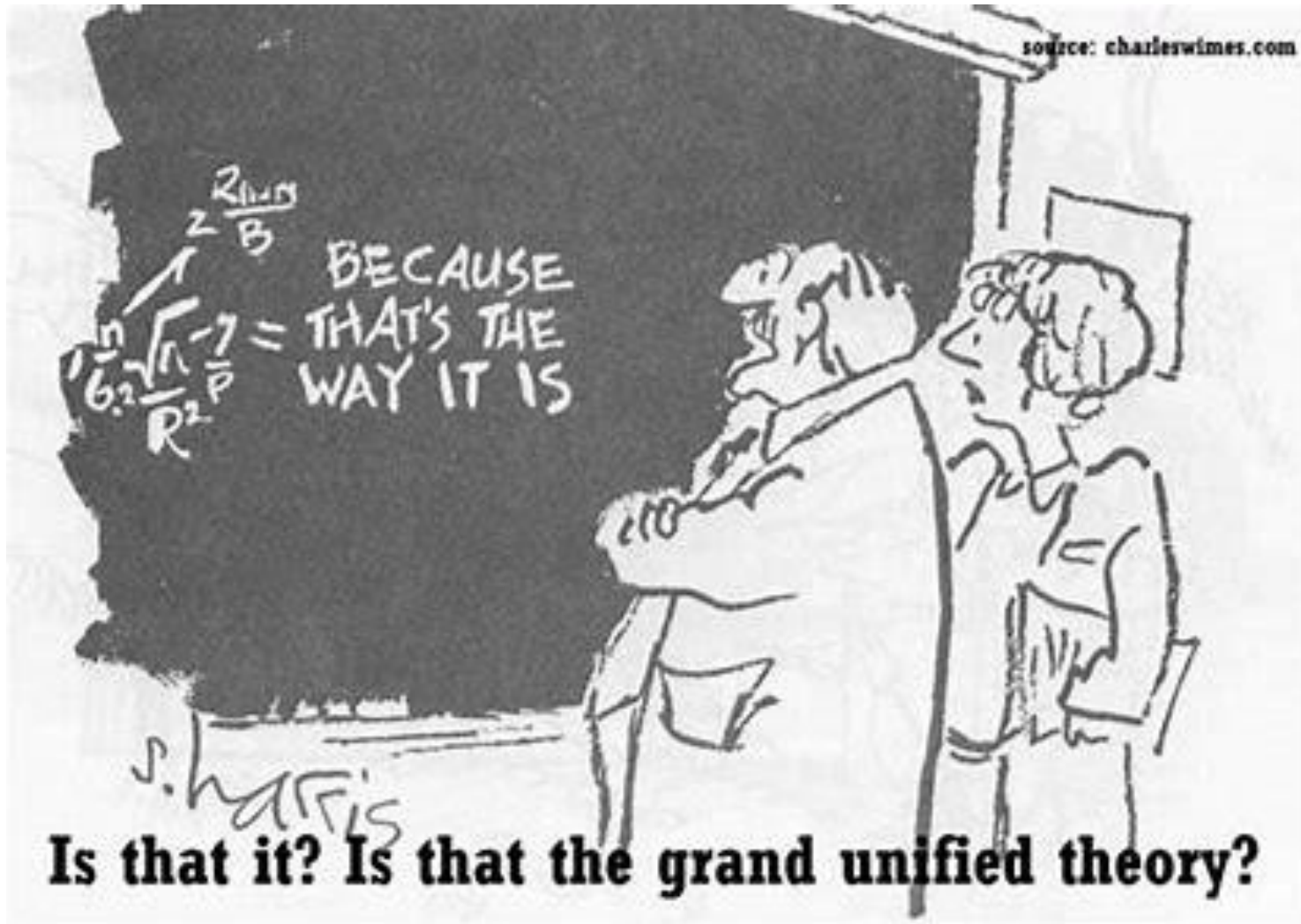
- There is a lot of it
- How do we focus the evidence on what will have the biggest impact on meeting the three key aims of the Five Year Forward view:
  - Improving health outcomes
  - Improving the patient experience
  - Reduce the unit cost of care



# It would be great to know the answer to these questions by harnessing the evidence we have

- How much does the NHS spend on services which do and do not improve outcomes or improve the quality of care?
- How easy would it be to stop ineffective services and redirect resources to areas that do really improve outcomes?
- How do we (or can we?) define outcomes?
- Can we define the drivers of poor outcomes and how do we segment them so we can use evidence based decision making in the most effective way.
  - Inequity drivers
  - Genetic drivers
  - Environmental drivers
  - Lifestyle choices
  - The impact of poor mental health on physical health and vice versa.
- What are the root causes of an individuals disposition and what should we spend our money on to get best value for the limited public purse?
- Can we combine an approach which both impacts on overall population health and recognises the need of the individual?





# A lot of material on social determinants



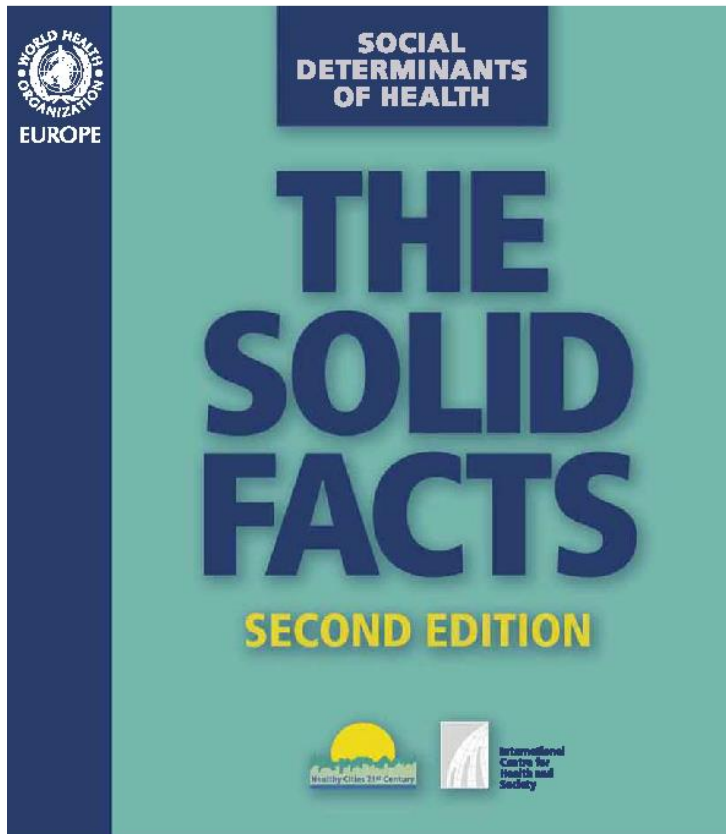
In November 2008, Professor Sir Michael Marmot was asked by the then Secretary of State for Health to chair an independent review to propose the most effective evidence-based strategies for reducing health inequalities in England from 2010.

The final report, '**Fair Society Healthy Lives**', was published in February 2010, and concluded that reducing health inequalities would require action on six policy objectives:

1. Give every child the best start in life
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill-health prevention.



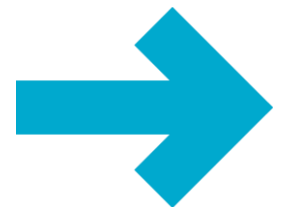
# A lot of material on social determinants



## *The Solid Facts*

The WHO Regional Office for Europe asked a group at University College London to summarise the evidence on the social determinants of health, published as *The Solid Facts*. It has ten messages on the social determinants of health based on:

- the social gradient
- stress
- early life
- social exclusion
- work
- unemployment
- social support
- addiction
- food
- transport



# A lot of material on first 1001 days



## Baby Brain Facts

### Babies:

- hear at around 24 weeks of pregnancy,
- recognise familiar voice at birth, and
- prefer faces to other shapes.

**We are hardwired for relationships!**



In the first years of life, more than 1 million new connections are formed every second in a baby's growing brain.

**The way babies' brains develop is shaped by their interactions with others.**

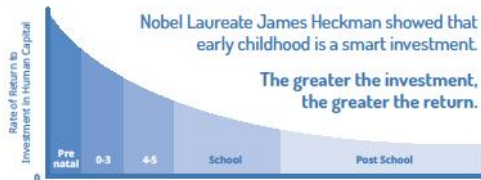


A range of research shows that **the way parents interact with their babies predicts children's later development.**



**Family income and education is strongly related to children's development.** Babies in higher income families are more likely to have frequent caregiver-child conversations. By age 3, babies with university educated parents have been found to have vocabularies 2-3 times larger than those whose parents had not completed school.

**Children's development in the early years sets them on a positive trajectory,** although what happens next also matters. Children's development at just 22 months has been shown to predict their qualifications at 26 years.



**8,300 babies under one** in England currently live in households where domestic violence, alcohol or drug dependency and severe mental illness are ALL present.

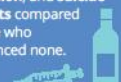
Rigorous long term studies found a range of returns between £4 and £9 for every pound invested in early intervention for low income families.



When parents experience problems in the first 1001 days it can have long term impacts on their children. One study showed that children whose mothers were stressed in pregnancy were twice as likely to have mental health problems as teenagers.



Adults who reported four or more adverse childhood experiences had 4- to 12-fold increase in **alcoholism, drug abuse, depression, and suicide attempts** compared to those who experienced none.

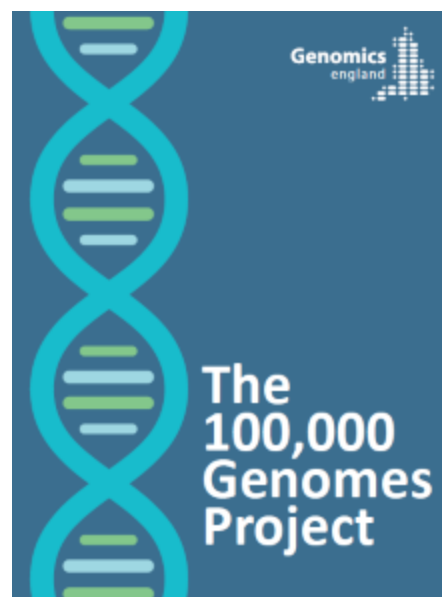
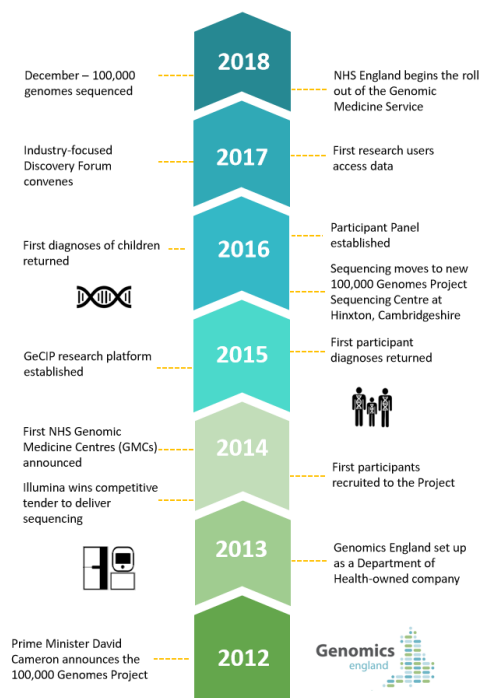


**Tackling adversity + supporting early relationships  
→ healthier brains + better futures**

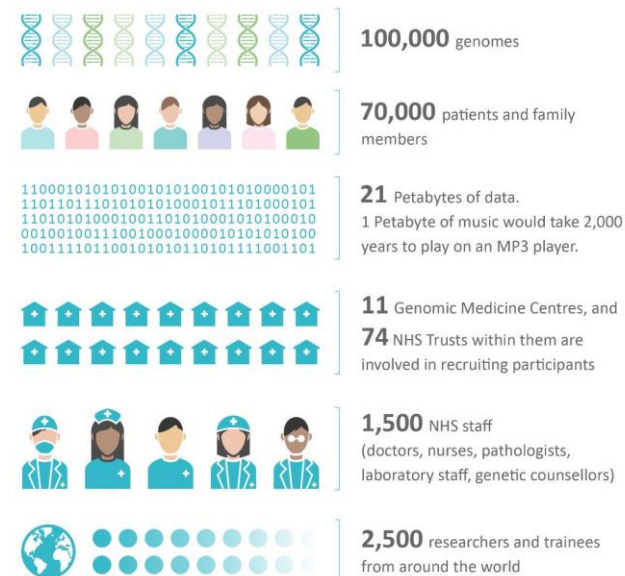
References and further information can be found on [www.1001criticaldays.co.uk](http://www.1001criticaldays.co.uk)



# Exponential increase in knowledge of genetics



## The 100,000 Genomes Project in numbers

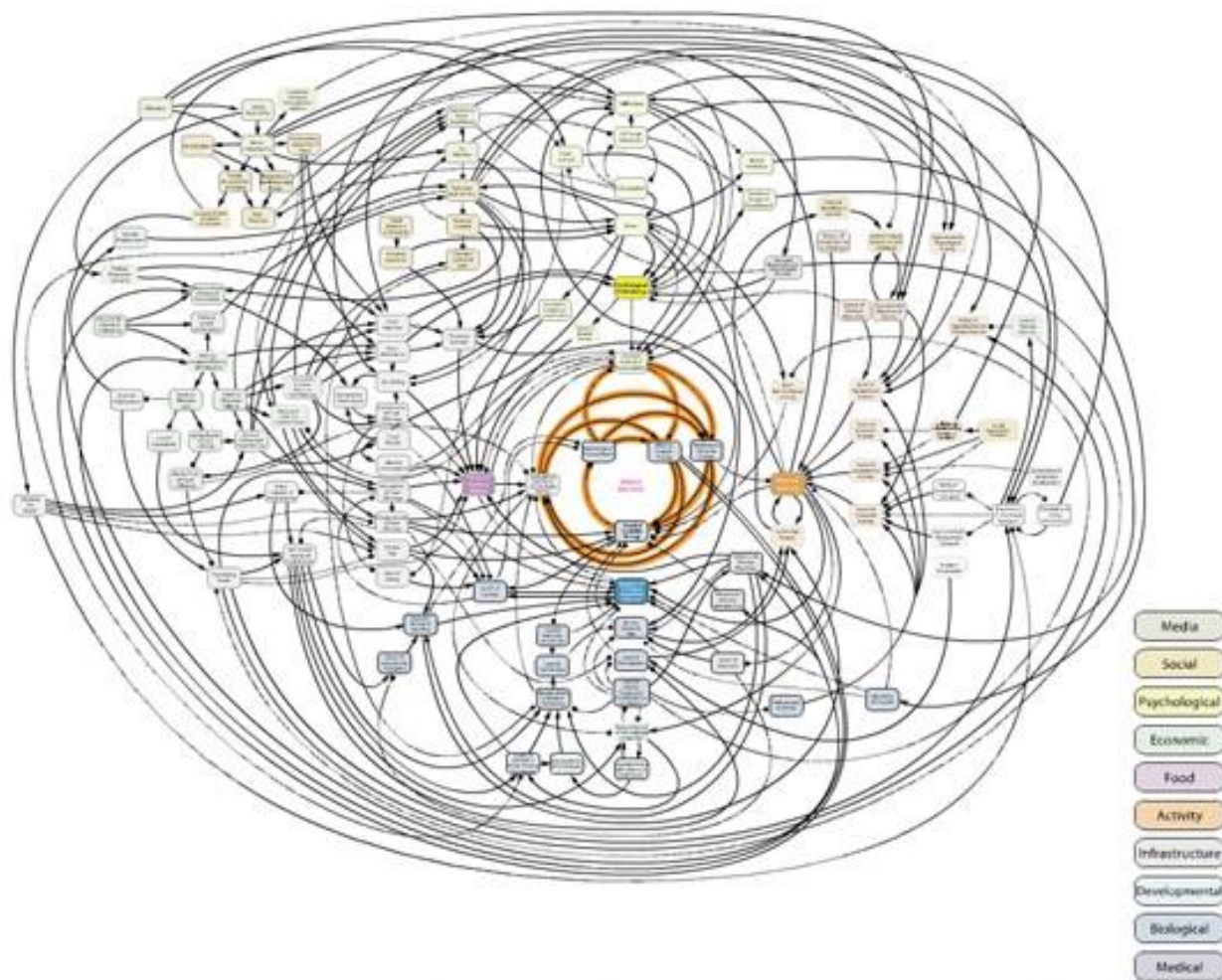


## And new ways of looking at evidence

### Building a new system for the generation and use of public health evidence

- The Health Foundation has commissioned a project to further the development and building of a new system for the generation and use of public health evidence. This will build on recent work by Dr Harry Rutter moving from a description of the problem to identifying and implementing practical responses in research funding and policy action.
- Due to complete April 2019





# So in conclusion

- The Long Term Plan is not a panacea
- ....but it does provide a good framework for progress
- ....and probably the best way of securing resources!
- It probably doesn't matter what lens we look through
- Provided we focus on using evidence in a positive way to meet the overall vision
- ...and we step back to continually look at the population and the individual
- Understanding health and well being is an incredibly complex issue .....but we can make a difference....





*Thousands of starfish washed ashore.  
A little girl began throwing them in  
the water so they wouldn't die.*

*"Don't bother, dear," her mother said,  
"it won't make a difference."*

*The girl stopped for a moment and looked  
at the starfish in her hand.*

*"It will make a difference to this one."*

