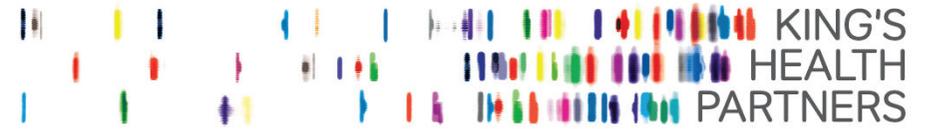


Public Health



An Academic Health Sciences Centre for London

Pioneering better health for all

John Moxham

Director of Clinical Strategy

King's Health Partners



King's Health Partners will:

- **Improve the health and well-being across our ethnically and socially diverse communities and work to reduce inequalities.**
- **Deliver a radical shift in healthcare by indentifying at risk groups, based on lifestyle and genotype, and helping them to avoid illness.**
- **Ensure our mental health services and physical health services work collaboratively to treat the entire individual.**
- **Constantly seek to reduce costs and improve quality for the benefit of patient care across the partnership and the wider health and social care system.**

KHP Strategic Framework 2009

KHP Public Health Strategy

- **Developed by: Charles Wolfe (KCL), Zoe Reed (SlaM), Graham Thornicroft (KCL/IOP – King’s Improvement Science), Matthew Hotopf (KCL/IOP), Anne-Marie Connolly (Southwark), Ruth Wallis (Lambeth), Danny Ruta (Lewisham), Ollie Smith (GSTT Charity).**

Discussed with:

- **Clinical Academic Group Leaders – in depth discussions with Diabetes, Addictions, Women’s Health, Oral Health and Medicine.**
- **Community groups (e.g. Citizens UK, Time Banking UK).**
- **Stakeholder Events: x 4 (Local Authorities, GPs, KCL academics, etc).**
- **Lambeth and Southwark Commissioners.**

Strategic Themes:

- **Developing the culture of CAGs.**
- **Public Health Collaborative for joint working.**
- **Community involvement to improve PH.**
- **Developing academic capacity.**
- **Deliver Public Health Interventions.**

Public Health Strategy	Themes for developing the strategy				
	<i>Developing Academic Capacity</i>	<i>Developing the CAG Public Health culture</i>	<i>Public Health Interventions</i>	<i>Community involvement</i>	<i>Public Health Collaborative</i>
<i>What is the vision and approach to working?</i>	School of PH, Develop tripartite mission for PH, Work collaboratively to identify innovative solutions	Embrace KHP vision	Innovate locally and to scale	Develop civic society and social cohesion	Synthesise KHP strategic framework, grand challenges etc Establish values for joint working
<i>What are the priorities?</i>	Identify drivers to inequalities and health and wellbeing, Increase capacity for evaluation, Improve data integration across sectors	Identify common themes across CAGs	Refer to JCNA but likely to include smoking, obesity, alcohol, drug misuse, exercise. Integrated Care Pilot	Refer to JSNAs Engage different community groups	Refer to JSNAs and developing priorities for the Boroughs Knowledge of what has already been tried
<i>What interventions will deliver these?</i>	Academics to work across themes	Link CAGs to PH community	Evidence on what works and what the gaps are	Highlight practical issues with what has been tried already Identify gaps in access and delivery	Knowledge of what has been tried and is known to work (or not) Highlight practical issues
<i>How will these interventions be delivered?</i>	Funding, environment	Training for CAGs to be a part of wider delivery system. Training in PH, Leadership, Employ Public Health Physician	Develop delivery model(s) Ensure fit with evaluation framework	Community as part of the solution, not being done to	Joint working, Offer of KHP skills to sector, Develop training opportunity for colleagues
<i>How will we know we have succeeded?</i>	Needs milestone objectives based on full Strategy development				

Alcohol

- **Alcohol is top priority of Public Health strategy.**
- **Acute Assessment Unit: rapid access to detoxification and treatment.**
- **CQUIN commissioned for screening hazardous/harmful drinking.**
- **Proposal by Addictions CAG, Medicine CAG at STH and LAS to create a facility to reduce burden of intoxicated individuals on ED (GSTTC)**

Smoking

- **Staff who do not smoke provide better care and are advocates of PH.**

Grant from NHSL to improve staff health – staff smoking cessation advisor, targeting heavy smoking groups.

- **Increasing referral of patients to SSS. Identify smokers, record information, refer to SSS (on EPR), feedback and follow-up (smoking as a chronic disease).**
- **Mandatory field on e-clerking.**

HIV

- **Promoting early, 100% diagnosis and treatment.**
- **Piloting opt-out HIV testing at KCH and GSTT (considering hepatitis B and C).**

Integrated Mental and Physical Healthcare

- **Psychological Medicine CAG (KHP funded).**
- **Improving mental health of patients with chronic diseases.**
- **Identifying depression in clinics (e.g. Diabetes, Rheumatology) and delivering treatment.**
- **Programme is being expanded.**

Value-Based Health Care (VBHC) Integrated Care Pilot

- **KHP believes that the development of Value-Based Health Care can improve quality, efficiency and sustainability of care across our health and social care economy.**
- **“Value” defined as outcomes that matter to patients, divided by the costs of achieving those outcomes, over the full cycle of care.**
- **Development of VBHC Scorecards across primary, social, community, secondary, tertiary care. Increasing value is the common goal. Value will determine investment/disinvestment decisions. Work started in Stroke, MI, Hepatitis B&C and with the evaluation of the Integrated Care Pilot.**
- **Understanding and pursuing value will increase focus on Public Health.**