NHS Providers

HEALTH INEQUALITIES

Welcome to the Health Inequalities peer learning forum

Board reporting and assurance on health inequalities

Wednesday 15 February – 2.00pm-3.30pm

This virtual event is interactive.

Please ensure your camera is on and that you are ready to participate.

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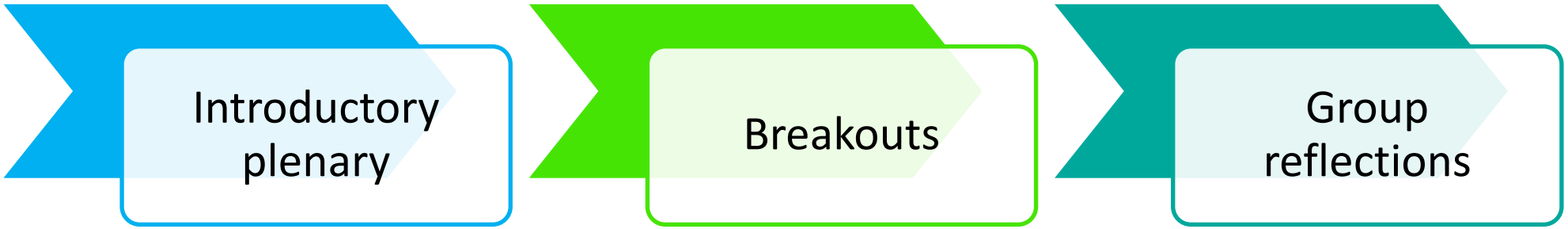
What to expect from today's session

Peer learning forum – a non-judgemental space to:

- Step back and reflect
- Build greater awareness of what is happening across the provider sector
- Consider familiar problems from new angles and gain new perspectives
- Share insights and learning
- Take away practical ideas that might help address your local challenges
- Build ongoing peer connections



Trust-level Board reporting & assurance on inequalities

NHS South, Central and West CSU are working on behalf of the Healthcare Inequalities Improvement Team at NHS England to explore the issues, challenges and solutions for how reporting and assurance on healthcare inequalities are addressed for Trust Boards.

NHS England wants to support Trust staff and has asked SCW to lead collaborative work to explore the problems and share solutions, working in partnership with **NHS Providers** and the **Provider Public Health Network**.

We are here to:

- Listen and understand the challenges you're facing with this new requirement
- Learn more about solutions that have been tried (and whether they were successful or not)
- Identify some Trusts to feature in case studies to show colleagues across the country what they've learnt, what's worked, what hasn't worked, how you're working to overcoming issues and what support you need to do this.

The case-study material, combined with a higher-level thematic summary of key issues and approaches, will be developed for publication early in the new financial year.

Housekeeping

- Please keep your camera on wherever possible
- Chatham house rule applies – participants are free to use the information received but the identity or affiliation of speakers/participants cannot be revealed unless specified, creating a safe space
- If you lose connection, please re-join using the link in your joining instructions or email health.inequalities@nhsproviders.org
- We will come to questions after the plenary session, please keep your microphone muted during the presentation
- Please use the chat box to ask questions and share comments
- During the Q&A, if you wish to ask a question audibly, please use the raise hand function – if you cannot find that, wave or raise your hand on screen and we will bring you in
- Any unanswered questions in the chat will be taken away and answered after the event
- An evaluation form will be sent to delegates after the event, this feedback is important to us and helps us to continuously refine our programmes.

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Peer learning forum board reporting and assurance on health inequalities:

Royal Free London NHS Foundation Trust :

1. Equitable Recovery Programme and
2. Inequalities Data Dashboard

Dr Judith Stanton:
Deputy Director of Public Health, RFL;
Deputy Chair Provider Public Health Network

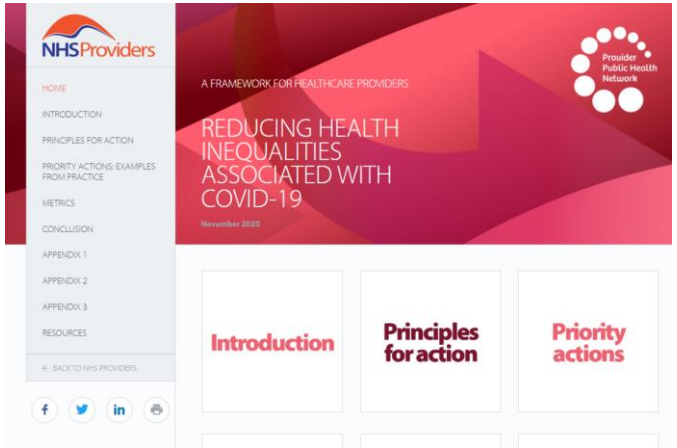
Kulvinder Hira – Group Head of Equality, Diversity and Inclusion (Patients and Carers)

Provider Public Health Network

- Advocates and supports specialist public health practice in NHS settings
- Network of >120 public health consultants and trainees work directly for (or with) NHS provider trusts and ICBs
- Collaborates with NHS Providers, NHS Confederation, RCP, NHS Health Inequalities and Prevention teams
- Shares evidence and best practice on issues relating to public health in provider trusts
- Provides a forum for mutual support and CPD
- Collates learning from public health work delivered in provider trusts

Membership enquiries: via NHS England Public Health Team at https://forms.office.com/r/rcCzZYrB0e

Provider Public Health Network

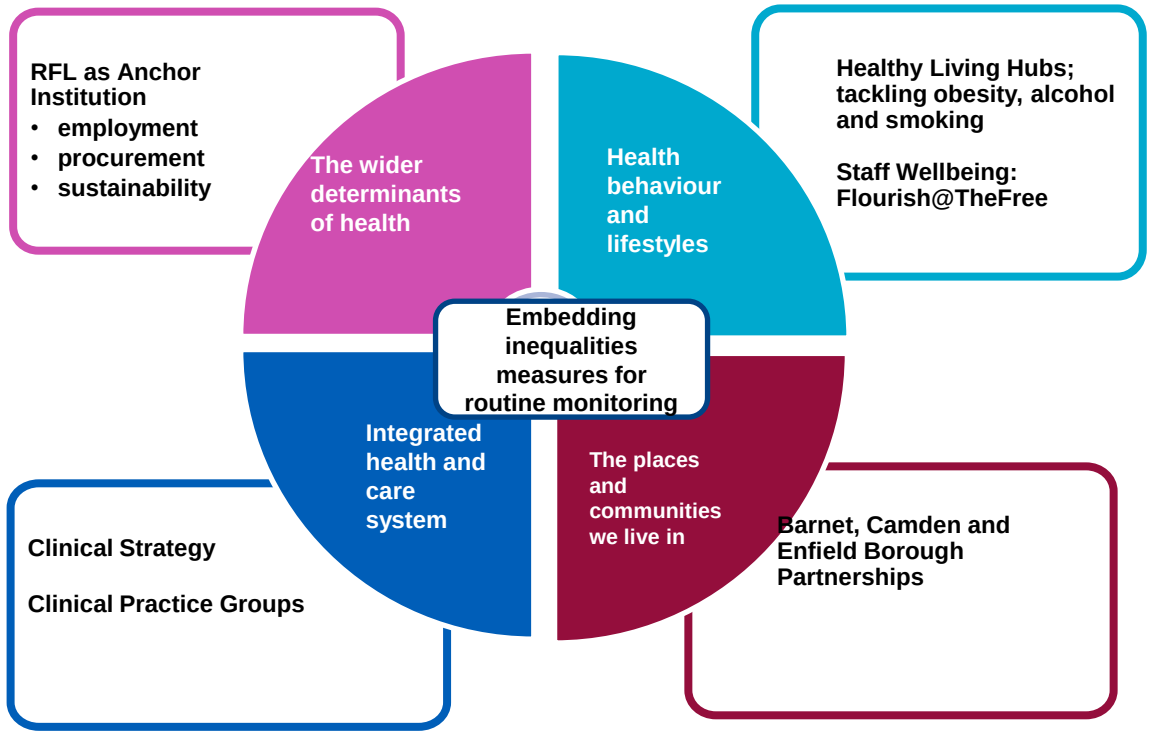


Framework for Healthcare Providers on Reducing Health Inequalities Associated with COVID-19

Population Health Approach at the Royal Free Group

POPULATION HEALTH To improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population, within and beyond the hospital walls

APPROACH AND ACTIONS



GOVERNING OBJECTIVES: Excellent health outcomes, outstanding experience of care, outstanding experience for our people, be a sustainable organisation

GOVERNANCE: RFL NMUH Joint Population Health Committee in Common; RFL People's Committee

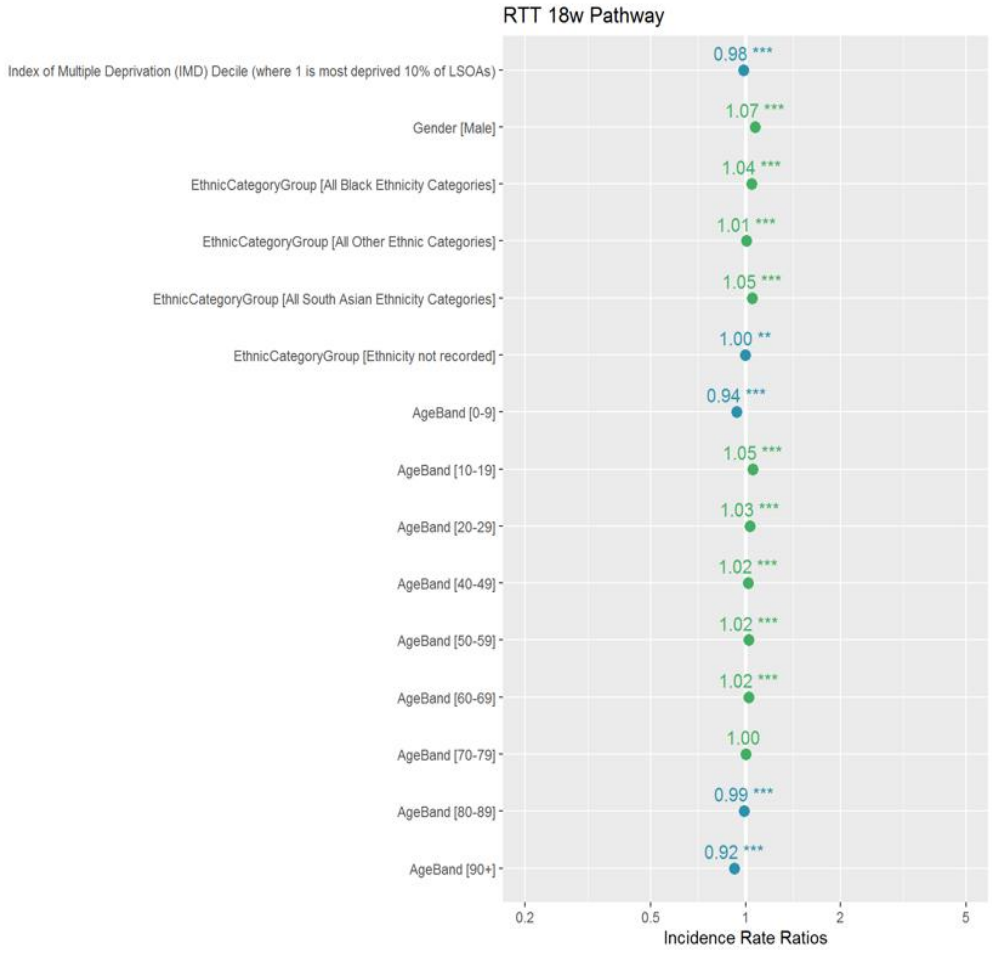
Exploratory analysis & testing our findings

We needed to test whether the findings from the first report were significant and “true”, i.e. an accurate reflection of our population.

We conducted a multivariate logistic regression, displaying this as graphs showing the incidence rate ratio and the asterisks indicate level of significance.

In the case of RTT shown on the right, the following were significant:

- Male patients wait 7% longer than female patients
- There is a 5% additional wait for south asian patients and a 4% additional wait for black patients.



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We found unwarranted variation: now what?

Now we knew that significant unwarranted variation in waiting times existed across RTT, cancer, ED and length of stay, the challenge was how to tackle improvement at scale.

By this time, the equitable recovery group had been formed and we were able to hypothesise potential drivers, focussing on those that were easiest to measure in the system. We decided on DNA (non attendance without notice) rates, hospital cancellation rates and patient cancellation rates.

As well as showing the high level graphs, we also produced a breakdown by specialty with summary columns and a colour coded heat map to enable the Health Inequalities Access Support team to pick out the outlier areas which were most in need of improvement.

Equitable Recovery programme

Aim:
To reduce health inequalities and improve equity of access in RFL waiting times and improve patient experience.

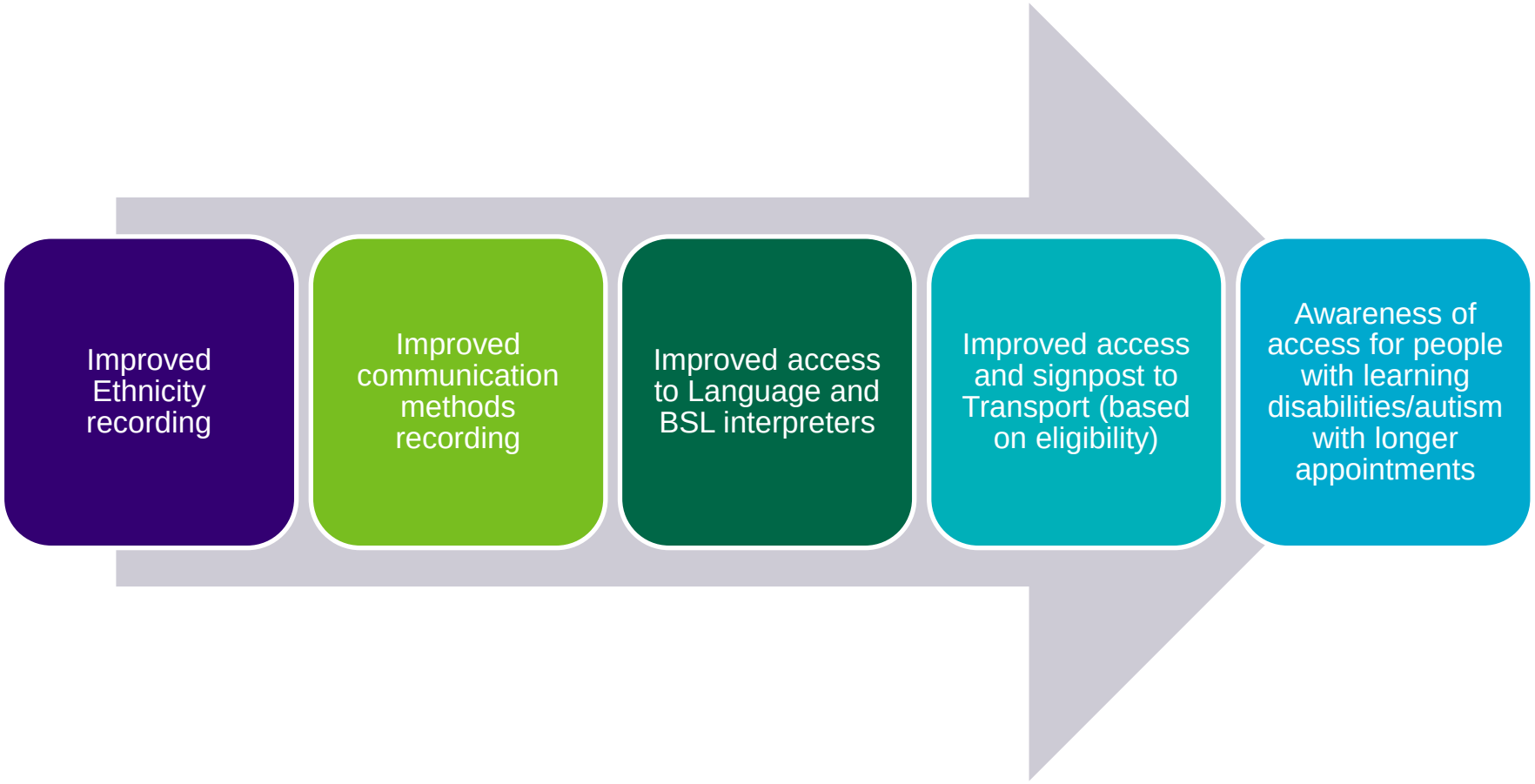
Desired outcomes:
- Reduced inequalities in waiting times in ethnic minority and deprived communities
- Reduced DNA rates
- Equitable access to secondary care
- Improved ethnicity recording
- Improved patient experience

Metrics:
- Number of patients reached by patient navigators
- DNA rates in targeted services
- Patient surveys
- Reduced discharges to GPs

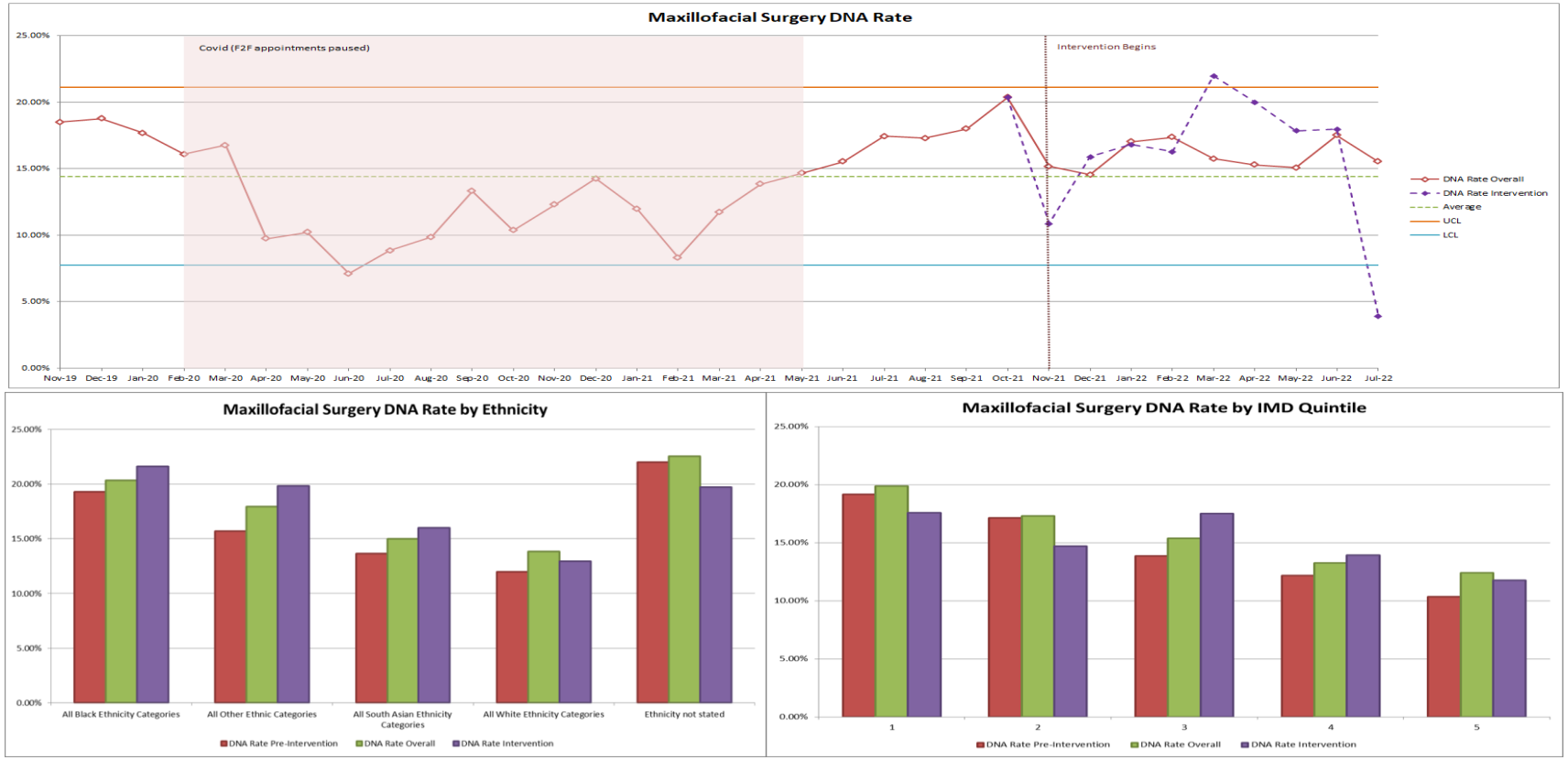
Achievements :
Data analysis complete
- Team recruited plus a pool of volunteers
- Electronic systems developed
- Governance arrangements in place
- Alignment with other programmes and strategies
- Buy-in from specialties that show disparities in access to services based on ethnicity and deprivation levels
- A model for a new way of working developed
- Resources and tools developed
- Training packages developed

Continuous evaluation through the **Quality Improvement** lens

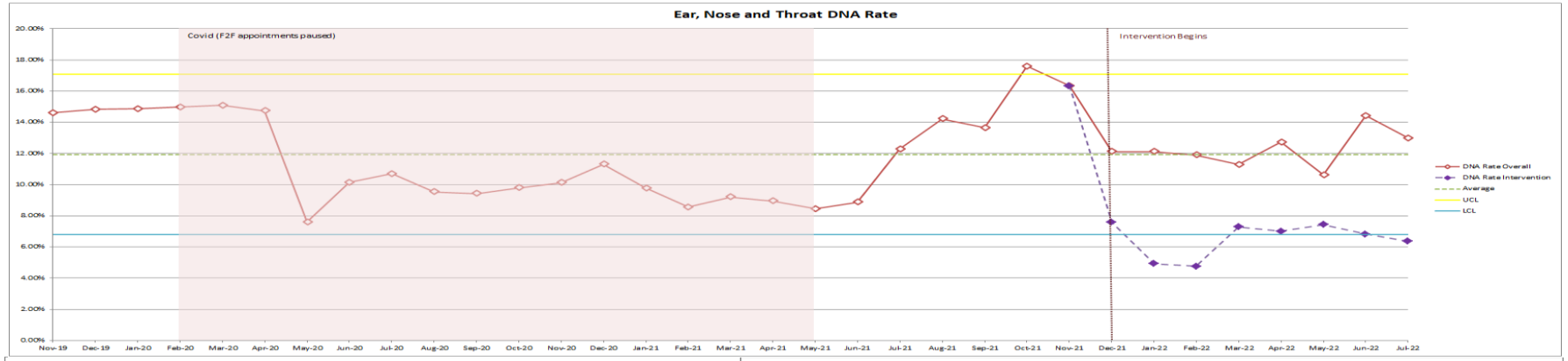
Equity of access

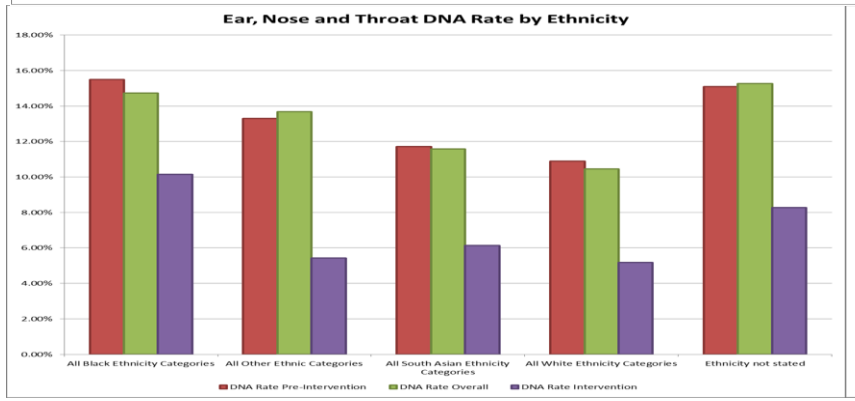


Specialty 1


Maxillofacial Surgery DNA Rate
Covid (F2F appointments paused)
Intervention Begins
25.00%
20.00%
15.00%
10.00%
5.00%
0.00%
Nov-19 Dec-19 Jan-20 Feb-20 Mar-20 Apr-20 May-20 Jun-20 Jul-20 Aug-20 Sep-20 Oct-20 Nov-20 Dec-20 Jan-21 Feb-21 Mar-21 Apr-21 May-21 Jun-21 Jul-21 Aug-21 Sep-21 Oct-21 Nov-21 Dec-21 Jan-22 Feb-22 Mar-22 Apr-22 May-22 Jun-22 Jul-22
DNA Rate Overall
DNA Rate Intervention
Average
UCL
LCL
Maxillofacial Surgery DNA Rate by Ethnicity
All Black Ethnicity Categories
All Other Ethnic Categories
All South Asian Ethnicity Categories
All White Ethnicity Categories
Ethnicity not stated
DNA Rate Pre-Intervention
DNA Rate Overall
DNA Rate Intervention
Maxillofacial Surgery DNA Rate by IMD Quintile
1
2
3
4
5
DNA Rate Pre-Intervention
DNA Rate Overall
DNA Rate Intervention

Specialty 2


Ear, Nose and Throat DNA Rate
Covid (F2F appointments paused)
Intervention Begins
DNA Rate Overall
DNA Rate Intervention
Average
UCL
LCL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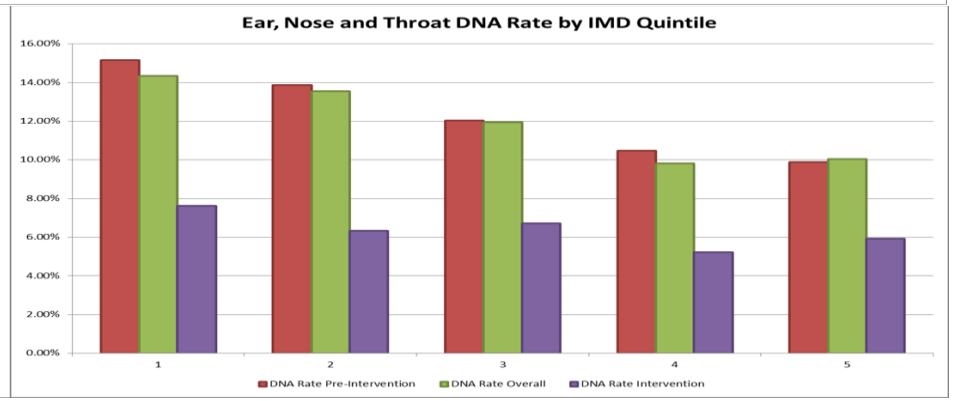
DNA Rate Overall
DNA Rate Intervention


Ear, Nose and Throat DNA Rate by IMD Quintile
DNA Rate Pre-Intervention
DNA Rate Overall
DNA Rate Intervention

RFL and NMUH:
Joint Health Inequalities & Population Health Reporting Workgroup

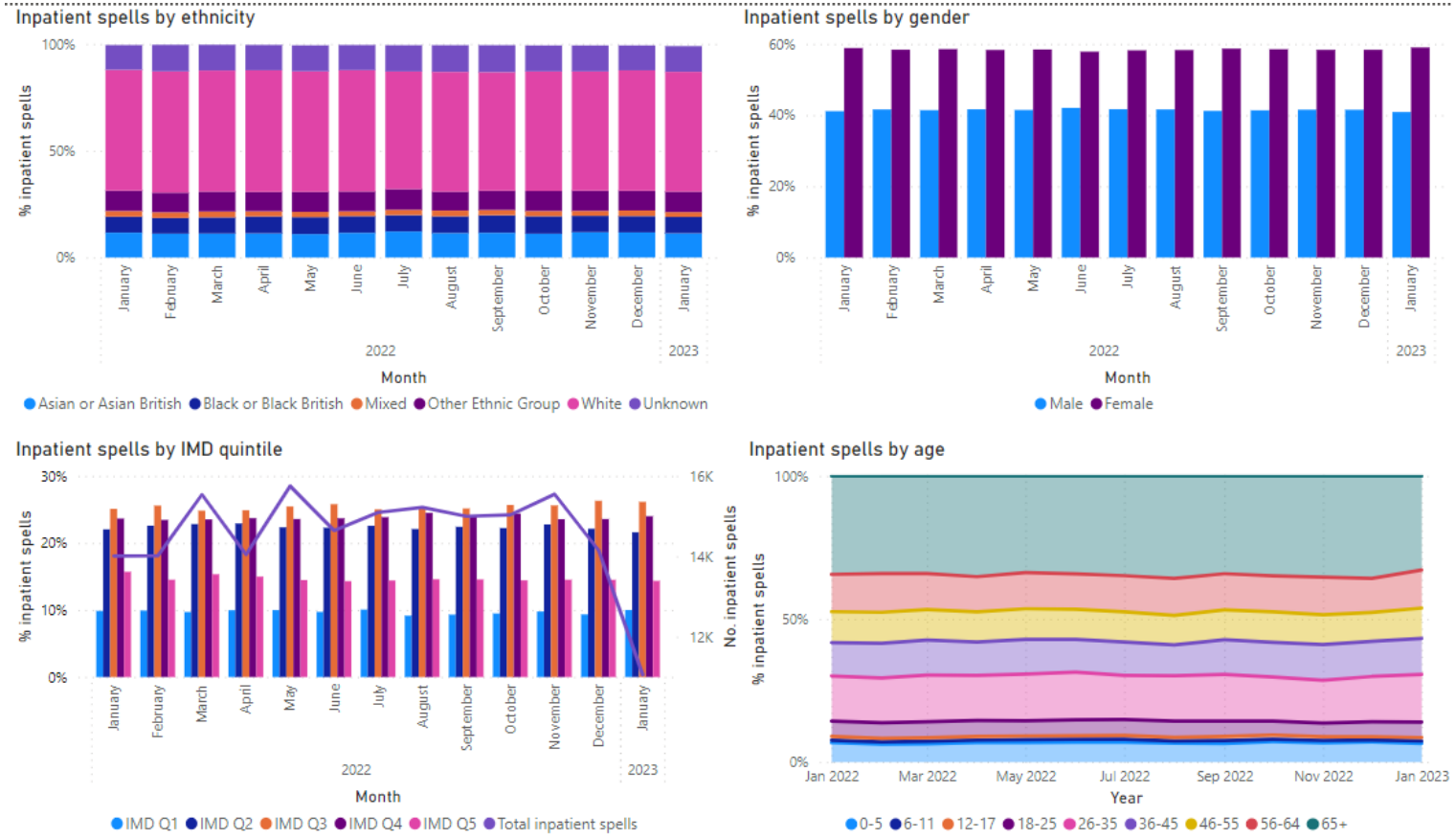
Aim :

To scope, agree and produce joint data reporting systems on population health metrics across Royal Free London and North Middlesex University Hospital Trusts

Objectives :

- To produce a health inequalities dashboard allowing reporting of key performance targets by protected characteristics by department across both trusts, aligned with reporting needs for Core20PLUS 5
- To provide reporting by lifestyle health factors (initially smoking, alcohol and BMI)
- To review the completion of key HIE and population health fields within electronic patient records (EPR) and where needed identify strategies to improve completion (e.g. staff training, education, amendments to EPR)
- To monitor developments in health inequalities & population health reporting requirements locally, regionally and nationally
- To undertake discreet analysis on health inequalities where needed

Data Dashboard….moving from R to Power BI



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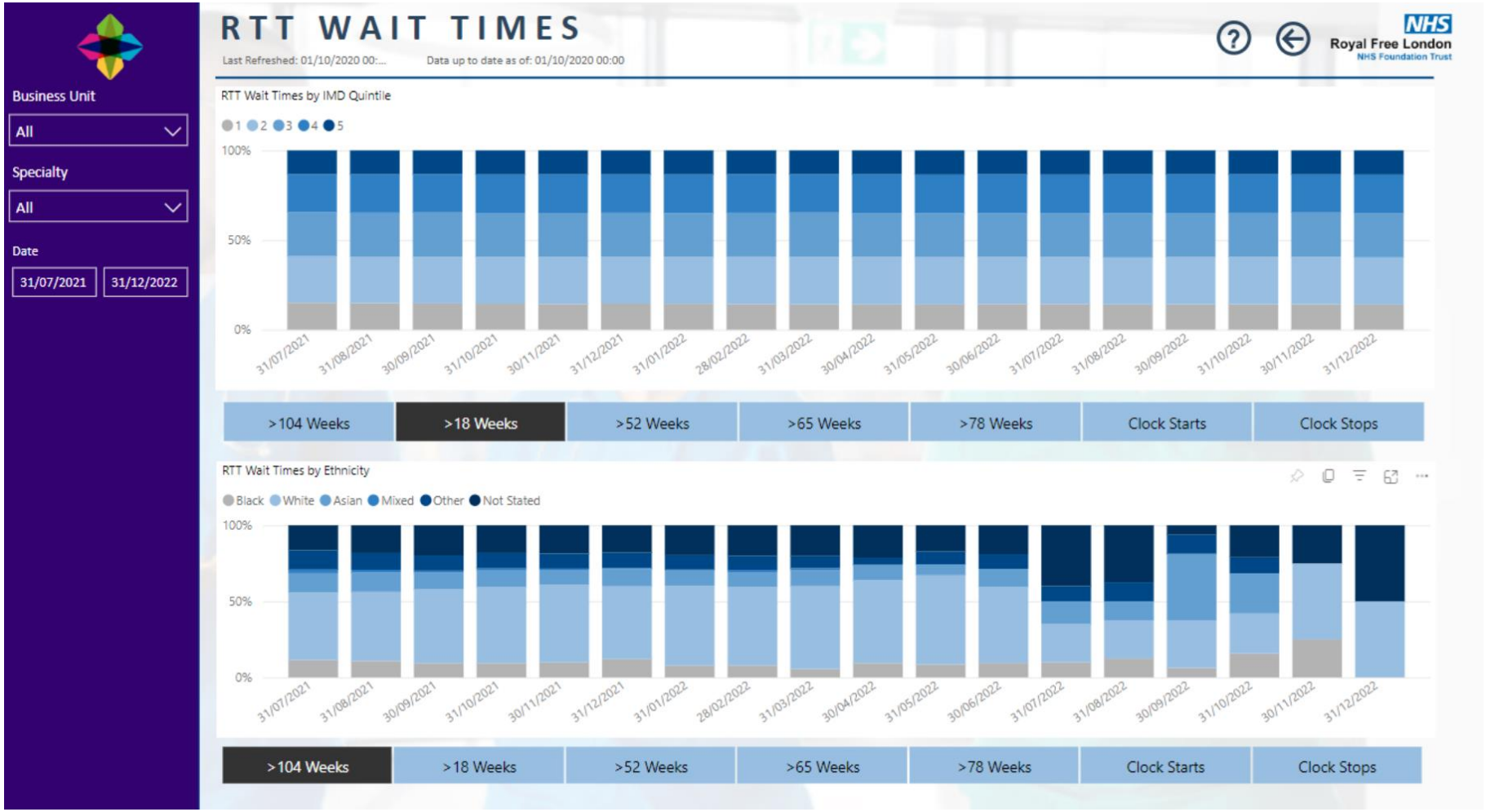
RTT WAIT TIMES
Last Refreshed: 01/10/2020 00:...
Data up to date as of: 01/10/2020 00:00
NHS
Royal Free London
NHS Foundation Trust
Business Unit
All
Specialty
All
Date
31/07/2021
31/12/2022
RTT Wait Times by IMD Quintile
1 2 3 4 5
100%
50%
0%
31/07/2021
31/08/2021
30/09/2021
31/10/2021
30/11/2021
31/12/2021
31/01/2022
28/02/2022
31/03/2022
30/04/2022
31/05/2022
30/06/2022
31/07/2022
31/08/2022
30/09/2022
31/10/2022
30/11/2022
31/12/2022
>104 Weeks
>18 Weeks
>52 Weeks
>65 Weeks
>78 Weeks
Clock Starts
Clock Stops
RTT Wait Times by Ethnicity
Black White Asian Mixed Other Not Stated
100%
50%
0%
31/07/2021
31/08/2021
30/09/2021
31/10/2021
30/11/2021
31/12/2021
31/01/2022
28/02/2022
31/03/2022
30/04/2022
31/05/2022
30/06/2022
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31/12/2022
>104 Weeks
>18 Weeks
>52 Weeks
>65 Weeks
>78 Weeks
Clock Starts
Clock Stops

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Contact: Judith.Stanton@nhs.net

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Q&A

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Breakout discussions

1. What models of board reporting and assurance on health inequalities are currently working well in your trust and why?

Plenary feedback

1. What are your reflections?
2. Are there any actions you are going to take back to your trust?

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HEALTH INEQUALITIES

Thank you for attending the peer learning event today

Please complete our evaluation form by scanning this QR code or click on the link in the chat.

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