Health Inequalities Strategy (HIS) Delivery plan 2015-2018

Laura Austin Croft
Maddy Gupta-Wright
Health Inequalities

• Differences in health between social groups or populations.

  - Demographic
  - Social
  - Environmental
  - Structural
  - Political
  - Economical
  - Behavioural

Categories of factors that can result in health inequalities

• Interaction of factors make health inequalities complex
• Mayoral responsibility to consider & reduce HI
Determinants of health

Dahlgren and Whitehead (1991)
The Mayor’s Health Inequalities Strategy (2010)

Five strategic objectives
• Empowering individuals and communities
• Equitable access to high quality health and social care services
• Income inequality and health
• Health, work and well-being
• Healthy places

Taken forward by influence, working collaboratively with others and sharing expertise. [http://www.london.gov.uk/priorities/health/tackling-inequality](http://www.london.gov.uk/priorities/health/tackling-inequality)
HIS delivery plan 2015-2016

Recognise the work we have done (and its strengths)

Describe the new health and social care landscape and opportunities for reducing health inequalities

Developing a way of describing and tracking HI over time

Respond to the London Health Commission recommendations – where the Mayor is best placed for strategic leadership
Achievements narrative

Demonstrating achievements from the first few years of Strategy delivery

Identifying a pattern of what the GLA can uniquely do (and the breadth of action)

Part of the narrative that supports the delivery refresh (i.e. what we are going to build on going forwards...)
## Six delivery strengths

<table>
<thead>
<tr>
<th>Strength</th>
<th>Example</th>
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<tbody>
<tr>
<td>1. Coordinating collaborative action</td>
<td>Well London, Healthy Schools, Healthy Workplaces, Volunteering</td>
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<td>2. Instigating pan London leadership</td>
<td>The London Health Board; the London Health Commission</td>
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<td>3. Building the case for action</td>
<td>The economic case for investing in early years</td>
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<td>4. Communication campaigns</td>
<td>HIV national testing week; cancer awareness pop up shops</td>
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<td>5. Integrating action across plans and strategies</td>
<td>Improving the health of Londoners transport action plan</td>
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<tr>
<td>6. Supporting the health needs of vulnerable groups</td>
<td>Commissioning healthcare support for rough sleepers, children leaving care in the Mayor’s education plan</td>
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Questions

Do you feel this summary of strengths is accurate?

What have we missed?

What other ways could the Mayor’s role be used to reduce health inequalities?
The new health and social care landscape

Highlights new duties on reducing health inequalities

Updates the role of the GLA and its scope for reducing health inequalities across London

Supports conversation about how the new duties are being/can be used to support a reduction in health inequalities
Levers for reducing health inequalities

Clinical commissioning groups & NHS providers
Access, outcomes, integration of services

GLA and the GLA Group
TfL; London Enterprise Panel; London Housing Board; London Plan; London Health Board; Mayor’s Office for Policing and Crime.

Local authorities
Health and well-being boards; Joint Strategic Needs Assessments; Health and well-being strategies

Public Health England
Public Health Outcomes Framework; PHE-London.

Other: Social Value Act 2013; Equality Duty Act 2010

Health inequalities in London
Questions

How best do the new structures and functions support action to reduce health inequalities?

Are there examples of action on health inequalities being taken forward as a result of the 2012 Health and Social Care Act?

What would help you in terms of engaging with the new structures?
Indicators need to be...

1. Meaningful to stakeholders in terms of relevant health issues and determinants
2. Easy to understand and to communicate to a range of health and non-health stakeholders, and to the general public
3. Relevant to the rapidly changing and future policy context
4. Span the life-course for London’s population
5. Able to be tracked over time
6. Useful as levers for action within regional & local authorities
7. Uses the most accurate and valid data sources, available for both London as a whole, and for London borough levels, collected on an annual basis
8. Manageable in number i.e. maximum of 12.
Indicators for health inequalities – Plan so far

1. ‘Late’ antenatal care
   NHS England

2. School Readiness
   PHOF

3. Educational achievement
   Department for Education

4. London Living Wage
   Office for National Statistics

5. Unemployment rates
   Department for Work and Pensions

6. Statutory Homelessness
   Department for Communities and Local Government

7. Influenza vaccination
   Public Health England

8. Self-reported well-being
   Office for National Statistics

AND

9. Healthy Life Expectancy
   PHOF

AND

10. Slope Index of Inequality for Life Expectancy
    PHOF
Next steps

<table>
<thead>
<tr>
<th>Stakeholder engagement on levers on reducing health inequalities and the proposed set of metrics.</th>
<th>September to November 2014</th>
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<tbody>
<tr>
<td>Publication of London Health Commission (LHC) recommendations</td>
<td>October 2014</td>
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<tr>
<td>Developing draft delivery plan in light of LHC recommendations</td>
<td>November to December 2014</td>
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<td>Consulting with the London Assembly on the draft plan</td>
<td>January 2014</td>
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<tr>
<td>Publication of the Delivery plan for 2015-2018</td>
<td>February 2014</td>
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