



Office for Health
Improvement
& Disparities

OHID London Business Plan (2023/24)

June 2023

Our vision is for London to become the world's healthiest global city and to be the best global city in which to receive health and care services



Our mission is to provide effective public health systems leadership, programme delivery and systems support to improve the health of all Londoners and reduce health disparities.



Our Strategy to achieve our mission

Regional Directors Office:

Raise the profile of OHID London through excellent stakeholder engagement and making it easier to do business. Provide strategic vision & leadership for improving the public's health and tackling health inequalities.

Population Health, Resilience & System Support:

Strengthen the collaboration between London's health and care systems and communities, ensuring everyone has a fair opportunity to live the healthiest life possible.

Alcohol, Drugs & Tobacco

Reduce the harm of alcohol, drugs and tobacco to individuals, families and the community in London.

Workforce Development

Convene the public health workforce, providing leadership, evidence and stewardship, so that it has the necessary skills and capacity to reduce health inequality and increase healthy life expectancy.

Health Improvement

Support all Londoners to start well, live well and age well, working in partnership with NHS, local government, GLA and community partners with a focus on innovation, improvement and impact.

Children & Young People & Healthcare Public Health

Support delivery across the areas of health care public health and children and young people's health and wellbeing

Health Equity, Strategy, Science & Academic Partnerships

Strengthen the collaboration between London's health and care systems, academic partners and communities, ensuring everyone has a fair opportunity to live the healthiest life possible.

Local Knowledge & Intelligence

Working with LKIS to provide expert analysis for local health and care systems



OHID London priorities for FY23/24



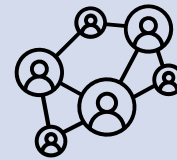
Reducing HIV transmission in London



Reducing infant and child mortality in London and giving every child the best start in life



Promoting a health in all policies approach in the GLA to tackle wider determinants of health



Tackling structural racism as a determinant of racial/ethnic health disparities



Improving air quality in London



Maximising opportunities for Londoners to find good work and remain in employment, with a focus on people with health conditions and disabilities



Tackling the major drivers of morbidity and mortality, with a focus on CVD prevention



Supporting a dynamic, thriving and diverse public health workforce



Working with partners to implement the national Drugs Strategy



Promoting and supporting public mental health and wellbeing



The current landscape

The London Context

- The Covid-19 pandemic had a devastating impact on London which was the region in England with the highest excess mortality ratio (1.23) between March 2020 and July 2021. This exposed existing health inequalities and how different circumstances of our lives ultimately determine our chances of good health
- Over the last decade increases in life expectancy in both London and England have slowed, and in 2021 life expectancy in London was 79.5 years for males and 83.8 years for females
- Gender, geographical, and socioeconomic inequalities are evident. The average gap in life expectancy between the least and most deprived Middle Layer Super Output Areas (MSOAs are areas containing ~7,500 residents) being 4.4 years for males and 6.3 years for females
- Variation exists across London boroughs in healthy life expectancy. This ranges from 58.1 years in Barking and Dagenham to 70.2 years, in Richmond upon Thames for males; and 57.8 years in Tower Hamlets to 70.1 years in Wandsworth for females
- Ethnic inequalities in life expectancy and in health are evident for instance with South Asian and Black people 2-4 times more likely to develop type 2 diabetes mellitus
- High numbers of individuals belonging to inclusion health groups such as rough sleepers, asylum seekers and Gypsy, Roma and Traveller communities live in London. There is limited timely data available on the health of some of these populations, though available data consistently show high health needs and higher prevalence of communicable and non-communicable diseases compared to the general population

- 2 in 5 children in London live in poverty when housing costs are included, while the least deprived decile of Londoners have 10x more income than the poorest
- The cost of living crisis has meant a quarter of Londoners are buying less food and essentials to manage, while the negative impacts of overcrowding, poor quality and unaffordable housing are felt most by those in low income and minority ethnic groups
- Consistently, intelligence shows how low income and minority ethnic Londoners engage less in active travel, have less access to green space, experience the worst of the climate crisis and air pollution, meaning collectively they have less opportunity for good health
- 43% of Black and 33% of Asian Londoners reported being treated unfairly due to their ethnicity compared to 12% for the London population in general
- Smoking prevalence has decreased in recent years to 12.9% in London. However inequalities remain with prevalence in routine and manual occupations (for those aged 18 to 64 years) at 20.7%, twice that of managerial and professional occupations (10.3%).
- In 2020/21, 56.0% of the adult population in London were either overweight or obese, with obesity prevalence lowest in the least deprived (~4%) and highest in the most deprived areas (~10%) of London
- In 2019/20, one in five reception-age children and around two in five Year 6 children in London were classified as overweight or obese, with similar inequalities seen by deprivation



Key Achievements from Q1 2023/24

Developed and published a London position statement on vaping for adult smokers

Launched and promoted Every Child a Healthier Weight Delivery Plan

Latest data shows percentage of NHS Health Checks received by the total eligible population highest in London

Physical activity training sessions attended by over 300 healthcare staff in London

Locally, 33 borough drug strategy plans were scrutinised, improved, and submitted for national sign off in a timely fashion.

Co-ordinating review of London ICS strategies to inform future alignment of plans with OHID London and GLA

Launched support for UKPHR specialist portfolio applicants with 30 1:1's provided in first phase

Established the London Tobacco Alliance Board, and working group meeting with NHSE to enhance collaboration



The New National and Regional Public Health System

Local Government

- Directors of Public Health & PH function in local government
- Wider determinants of health, in place
- Critical national and regional relationships with **ADPH UK** and **ADPH London**
- ADPH national policy leads
- Local Government Association
- London Councils

Integrated Care Boards and Integrated Care Partnerships – operating at neighbourhood, place and system

42 nationally, 5 in London

Key purpose includes:

- Improving outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access

Regional Government: GLA

- London Health Inequalities Strategy
- Champion, challenge and collaborate with health & care partners
- Health, children & young Londoners unit and public health team
- GLA Group Public Health Unit, led by a DPH – with professional accountability to Regional DPH/ Mayor's statutory health adviser

Office for Health Improvement and Disparities (OHID)

- National policy on prevention, improving health and tackling inequalities within DHSC and influencing across government
- National to regional to local reach to strengthen and support place-based delivery
- Enable joined-up, sustained action between national and local, improve and level up the public's health, across the life course

UKHSA

- National and regional health protection and EPRR
- Health security
- Acute and emergency response to health protection issues alongside strategic programmes on key health security and inequality priorities and emerging threats eg:
- TB, Sexual health, climate and health

NHS

Each NHS region has a joint Regional Director of Public Health (joint role with OHID).

Public health role & functions of NHS London Region include:

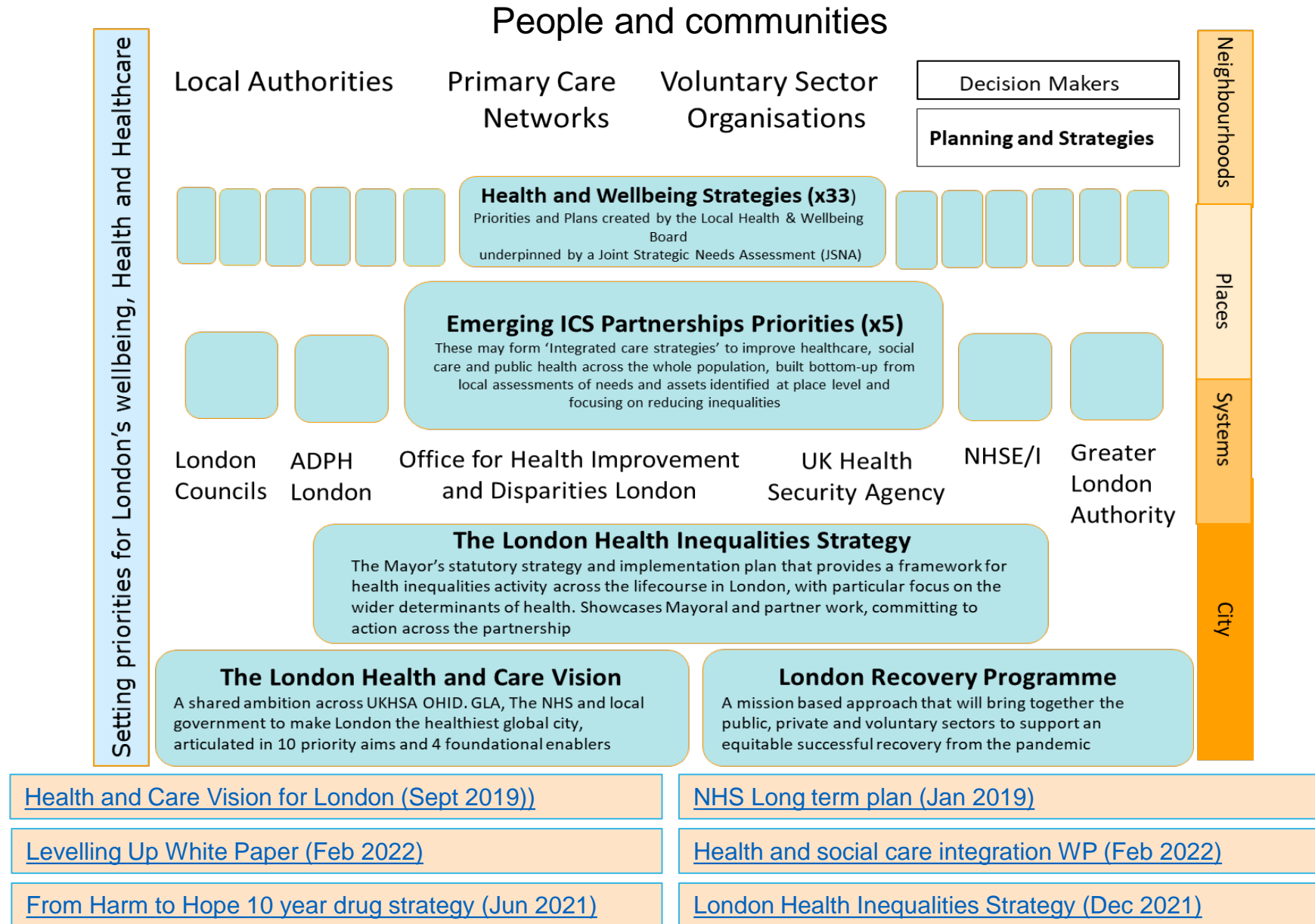
- Specialised commissioning and health care public health
- Health and Justice
- Immunisation and Screening
- Dental Public Health
- Prevention and Population Health
- Health Inequalities



Delivering London's ambitions to become the world's healthiest global city

London's Health and Care Partners have a shared ambition for London to become the world's healthiest global city and to be the best global city in which to receive health and care services.

This ambition will be delivered through the new and developing health, care and public health system structures, nested within the existing structures of local and regional government and the NHS.



Office for Health Improvement and Disparities | FY23/24 Priorities AND Deliverables

OHID P&R Priorities	OHID London deliverables for 2023/24
<p>1 Amplify prevention through the NHS</p>	<ul style="list-style-type: none"> • Support NHS Health Checks programme delivery in London • Develop and champion a London prevention and resilience framework with NHS London and ICB partners • Develop bi-annual prevention and public health priorities framework for London region (Seasonal Plans) • Renew governance for NHS LTP prevention priorities • Support NHS partners in the development and delivery of a London CVD prevention action plan • Work with ICSs on core 20 plus 5
<p>2 Enable OHID's priority programmes (drug strategy, family hubs and BSIL, work & health, mental health, healthy weight)</p>	<ul style="list-style-type: none"> • Promote and support Mental Health Prevention Concordat adoption and implementation • Lead and coordinate networks on Public Mental Health, suicide prevention & CYPMH • Utilise & develop data and evidence packs (e.g. perinatal mental health, suicide prevention, work & health and premature mortality) • Collaborate with DfE to promote and support implementation of whole school approaches to MH&WB • Support Drug Strategy Implementation through data and information dissemination, engagement with the Drugs Forum • Support continuity of care plan for enhanced partnerships including promotion of NDTMS data audit and roll out of national self-audit tool • Management and oversight of the Drug alert system for London • Develop OHID London's role in supporting Family Hub partnerships, alongside DfE and DHSC regional support • Develop a strategic action plan for reducing CYP mortality on behalf of the London Health Board and support dissemination and implementation • Develop data profiles on work and health by ICB, starting with NEL, in collaboration with GLA • Work with OHID W&H team and wider key partners to maximise opportunities for Londoners to find good work and remain in employment
<p>3 Regional Public Health system leadership: a) Improving quality of PH Delivery and Commissioning b) Public Health Grant Assurance</p>	<ul style="list-style-type: none"> • Undertake the London Health and Care Vision refresh collaborating to embed the ambitions in system strategies and delivery plans (e.g. ICS & HWBBs) • Regional Director to support NHS E regional transformation, including the development and strengthening of a NHS regional public health collaborative • Deliver at least three London public health forum whole system network meetings to provide professional support and development • Alongside the Kings Fund, strengthen London's approach to community engagement and participation through webinars, reports and blogs • Undertake annual assurance of the PH grant
<p>4 Surveillance to support and inform OHID's regional priorities</p>	<ul style="list-style-type: none"> • Influence and contribute to high quality research and funding bids as a named partner • Contribute to London LA Public Health research network • Deliver a conference in collaboration with academic partners to establish research into action connections • Progress next stage of research consortium on community centred approach in London
<p>5 Develop Public health Workforce's capacity and capability</p>	<ul style="list-style-type: none"> • Deliver the professional appraisal function to support revalidation for public health GMC, GDC and UKPHR registrants • On behalf of SoS and RDsPH support the recruitment and performance of Directors of Public Health • Work with Workforce Collaborative to implement the regional public health workforce plan • Develop OHID London as a high-quality training location for PH specialty registrars • Increase the number of researchers in residence across OHID London • Develop a centralised learning and development hub for the public health workforce • Scope and commission an initial regional CPD programme to build technical and non-technical public health skills • Develop and support implementation of a regional Public Health Nursing Workforce plan

OHID London Team Priorities

Regional Director's Private Office

Deliverables			Owner
Communications & Engagement	1	Support Regional Director with engagements and events and operational activity, including preparing presentations, speeches and briefings and diary management	Jennifer Watson-Henry & Abby Hand
	2	Support consolidation of governance mechanisms and forums in place across the London health system	Carly Tutty-Johnson & Abby Hand
	3	Produce a Stakeholder Engagement Strategy & communications plan for OHID London	Carly Tutty-Johnson & Abby Hand
	4	Produce and promote shared communications with system partners (including GLA, UKHSA, NHS and ADPH) through the Public Health Communications Network	Abby Hand
Systems and process	5	Create and promote standardised protocols for OHID London to ensure consistency in approach and maximise efficiency	Carly Tutty-Johnson
	6	Oversee OHID London budget and spending process, ensuring finance tracker is up to date	Carly Tutty-Johnson
	7	Maintain oversight of OHID London workforce strategy and recruitment plan	Carly Tutty-Johnson
	8	Ensure compliance with the DHSC Core standards including provision of Business continuity plan, risk register, mandatory training and information assurance.	Carly Tutty-Johnson
	9	Undertake annual PH grant assurance cycle, working with LAs to drive best practice and achieve impact	Julie Billet & Carly Tutty-Johnson
Culture and staff wellbeing	10	Improve internal communication and information sharing across OHID London (e.g. bulletins, rhythm of staff meetings)	Abby Hand
	11	Support OHID National and London's response (staff wellbeing) to the People/Pulse Surveys	Monica Acheampong
	12	Embed processes for promoting learning and development opportunities for staff across OHID London	Carly Tutty-Johnson

Population Health, Resilience and System Support

Deliverables			Owner
Work and Health	13	Develop data profile on work and health by ICB, starting with NEL, in collaboration with GLA to inform sub-regional and local work and health priorities and intervention opportunities	Elaine Rashbrook & Graeme Walsh
	14	Work with OHID Work & Health team and wider key partners to maximise opportunities and benefits announced in the Spring budget 2023 to enable Londoners with LTCs (including MSK) to find good work and remain in employment	Elaine Rashbrook
	15	Facilitate and expand partnership working, sharing of good practice and resources via OHID London's Work and Health Leads Network	Monica Acheampong
Climate Change, Sustainability – including Air Quality	16	Work with GLA, UKHSA and FPH to support a) the production and dissemination of a JSNA toolkit for ICSs and LAs to assess climate health risks and needs, to inform adaptation plans & mitigate impacts on vulnerable groups and b) the development of a framework/guidance for ICBs on ICB Adaptation Plans	Elaine Rashbrook
	17	Convene and organise the Climate and Health Collaborative Advisory Group for London, and develop a partnership work programme (informed by IHE evidence review recommendations and existing commitments and priority activities of partners) to optimise collaboration, alignment, advocacy and leadership	Elaine Rashbrook
	18	Establish an informal, internal OHID cross-regional network/community of practice on climate change and health	Oliver Rashbrook-Cooper
	19	Co-chair London's AQ and Health Delivery Group and contribute as core member to the delivery of the AQ and Health Programme Office's work programme for 23/24	Julie Billett
	20	Subject to securing funding, work with partners to establish/commission an evaluation of London's Air Quality Alerts system for health and care professionals	Oliver Rashbrook-Cooper
Cross cutting system support	21	Finalise refresh of MECCLink London and continue to maintain and promote this resource across London system and with partners	Danielle Harley
	22	Complete the review of London ICB plans to assess where OHID L and GLA can offer support into and collaborate on ICB priority areas, and use review findings/outputs to inform a proactive programme of ICB engagement and support for delivery (eg to influence future plans, share knowledge and approaches on shared objectives, pursue regional 'do once' opportunities where it makes sense to do so)	Elaine Rashbrook
	23	Together with NHS performance and analytics colleagues, develop and implement a quarterly NHS Prevention and Resilience Dashboard	Oliver Rashbrook-Cooper
	24	Convene London's Asylum and Health Task and Finish group and coordinate and support delivery of London's asylum and health work programme	Julie Billett, Lizzie Walsh
	25	Support ICBs to establish women's health hubs and support with embedding and sustaining a focus on women's health across London	Carly Tutty-Johnson & Danielle Solomon
	26	'Light touch' support and coordination on healthy ageing and dementia prevention actions (the latter as agreed at the London Health Board April 2023)	Elaine Rashbrook

Alcohol, Drugs and Tobacco

Deliverables			Owner
Drugs Strategy implementation	27	Management of the London drugs alert system and access to the National Drug Treatment Monitoring System	Alison Keating/Emma Burke
	28	System leadership including work with the London Drugs Forum and regional partners such as ADPH, DWP, Police, probation etc. to take forward drug strategy ambitions and enhance partner action and London outcomes. Including support for ICS level drug strategy work and attendance at ICS level meetings that consider drugs, alcohol and tobacco	Alison Keating/Emma Burke
	29	Implementation of the Drug Strategy through undertaking planning with and providing advice to 32 London boroughs to include review and completion of local drug strategy plans, ongoing financial oversight and in-year reprofiling of the grant. Attendance at local CDPs tailored to availability and local need	Alison Keating
	30	Delivery of a regional task and finish group to address workforce issues and taking forward of associated actions	Michele Kemp/Margie Van Dijk
	31	Development and delivery of a regional programme to increase London rates of continuity of care including taking action to increase the London wide and local focus, delivery of workshops to specific partnerships, promotion and assessment of NDTMS data audit and roll out of, and assessment of London findings regarding the national self-audit tool	Tracy Beswick/Jo Roebuck/Margie Van Dijk
	32	Development and delivery of a regional programme to increase the number of drug and alcohol users in treatment including working with regional partners to increase profile and enhance pathways and the delivery of improvement support to specific boroughs and partners	Alison Keating/Emma Burke/Michele Kemp
	33	Support access to services, with a particular focus on support for the pan London substance misuse programme supporting homeless drug users and other regional programmes and by working with others to promote mecclink.co.uk, supporting access to a wide range of public health services	Tracy Beswick/Jo Roebuck
Alcohol, Tobacco and Smoking	34	Support NHSE in taking forward NHS Long Term Plan actions associated with tobacco and alcohol (including work with ACTs)	Alison Keating/Jo Roebuck/Michele Kemp
	35	Work with national and regional partners to make London a smoke free city, with a key focus on taking forward government strategies, including those around adult and young people's vaping. Support for the London Tobacco Alliance, promotion of the OHID funded course and taking forward of illicit tobacco actions.	Alison Keating/Michele Kemp/Margie Van Dijk

Workforce Development

Deliverables			Owner
Building capacity	37	Deliver the professional appraisal function to support revalidation for public health GMC, GDC and UKPHR registrants	Marilena Korkodilos
	38	On behalf of SoS and RDsPH support the recruitment and performance of Directors of Public Health	Julie Billett
	39	Together with Public Health Workforce Collaborative partners, oversee and drive forward implementation of the regional public health workforce plan	Robert Pears
	40	Deliver at least three London public health forum whole system network meetings to discuss workforce issues, briefings on priorities and provide professional support	Robert Pears
	41	Work with Workforce Collaborative to start tackling structural inequality in the workforce, through EDI research and developing associated action plan	Robert Pears
	42	Develop OHID London as an attractive, high quality training location for PH specialist registrars (min of two per year)	Robert Pears
	43	Develop and commission a regional support offer for applicants applying to UKPHR via Specialist Registration by Portfolio Assessment	Louise Holden
	44	In partnership with FPH, develop and launch in September 2023, a centralised learning and development hub for the public health workforce	Louise Holden
	45	Scope and commission an initial regional CPD programme to build technical and non-technical public health skills	Louise Holden

Health Improvement

Deliverables			Owner
Mental Health	46	With ADPH, Good Thinking, GLA, NHS London and Thrive LDN, champion and support implementation of the Mental Health Prevention Concordat and public mental health programmes, including reducing premature mortality for people with severe mental illness	Jackie Chin
	47	Provide system leadership on Public Mental Health, Suicide Prevention & CYPMH by using, developing and sharing data and evidence and convening communities of practice to share learning, innovation, and foster partnerships.	Jackie Chin
CVD and Risk factor reduction /Healthy Weight	48	Support LAs to maintain continued recovery and improvement of NHS Health Checks programme delivery in London and nationally by: coordinating and supporting the London health check leads network; reviewing and maintaining an overview of quarterly and annual programme delivery and performance metrics; and supporting sharing, learning and improvement activities.	Monica Acheampong
	49	Support NHS partners in the delivery of the NHSE CVD Prevention Recovery Plan and London's CVD prevention ambitions and work with ICSs on core 20 plus 5 delivery	Robert Pears/ Nayab Nasir
Physical Activity & Tackling obesity	50	Promote and support system partners to adopt whole systems approach to tackling obesity and increasing physical activity, working with London Sport and Physical Activity Clinical Champions	Jackie Chin
Healthy Places	51	Contribute OHID regional input to NSIPs and coordinate with relevant London partners (UKHSA, LAs) as required, and facilitate learning, knowledge exchange and good practice on reducing harm from gambling	Jackie Chin

Children & Young People & Healthcare Public Health

Deliverables			Owner
Start for Life & Family hubs	52	Support implementation of Start for Life, Family Hub programmes and integration of CYP services in London, working alongside DfE and DHSC regional support leads	Robert Pears/ Nicky Brown
	53	Provide system leadership on perinatal mental health and whole school approach for mental health and wellbeing by convening and / or contributing to communities of practice (eg Start for Life/Family Hubs Network) to share learning, innovation, and foster partnerships and through the ongoing promotion of national support and resources	Jackie Chin
	54	Working with borough commissioners, providers and NHSE, support implementation of the London Public Health Nursing action plan	Nicky Brown
	55	Working with borough CYP leads, commissioners and providers, support the commissioning and delivery of the Healthy Child Programme (HCP) by maintaining an overview of regional HCP delivery metrics and providing quality improvement advice and support	Nicky Brown
Every Child a Healthy Weight	56	Support and coordinate implementation of Every Child a Healthier Weight Delivery Plan to include:- systems leadership, sharing good practice, innovation and fostering partnerships on whole systems approaches, breast feeding, reducing maternal obesity, NCMP and improving uptake of healthy start vouchers	Jackie Chin and Leah de Souza
Reducing Child Mortality	57	Develop a London strategic action plan for reducing child mortality and work with system partners to champion and support implementation of the agreed Action Plan	Robert Pears/ Nayab Nasir

Health Equity, Strategy, Science & Academic Partnerships

Deliverables			Owner
Foster Academic Partnerships	58	Deliver and support knowledge exchange activities in collaboration with academic partners to establish research into action connections including webinar and a conference by Q3 and establish and evolve Researchers in residence programme	Jennifer Yip
	59	Establish and evolve Researchers in Residence Programme	Jennifer Yip
	60	Contribute to LA Public Health research network by advising and supporting on research bids, evaluation and implementation activities	Jennifer Yip
	61	Progress research consortium with City and NEL to mobilise community assets to reduce health inequalities with funding bid submission by Q3	Jennifer Yip
Support progress towards health equity	62	Advise and contribute to the Institute of Health Equity (IHE) evidence reviews to support the HIS	Jennifer Yip/ Danielle Solomon
	63	Establish and convene the London Health Equity Group (HEG) (Apr-23) and support the 23/24 workplan	Lizzie Walsh
	64	Support the London Health and Care Partnership to deliver the London Vision refresh	Abby Hand & Kevin Fenton
	65	Support the RDPH as NHS London Health Inequalities SRO and statutory health advisor to the Mayor of London to lead future development and monitoring of the Health Inequalities Strategy.	Jennifer Yip/ Lizzie Walsh
	66	Facilitate delivery of NHS Core20+5 by supporting the London Health Equity Delivery Group to identify opportunities for pan-London collaboration and knowledge sharing between ICSs.	Jennifer Yip/ Lizzie Walsh
	67	Build an overview of Inclusion Health activity across the London region by producing a regional governance map, and maintaining existing links with national and regional networks.	Lizzie Walsh
	68	Develop and Influence regional and national strategy and action towards community-centred approaches, and embedding participation in decisions, design, delivery and evaluation to reduce health inequalities and duplication in efforts; and maximise value and outcomes for the public	Lizzie Walsh/ Danielle Solomon
London wide Anti-racism approach	69	Publish the London anti-racism strategic approach and theory of change, and support ICS implementation of strategic approach by Q3 through HEG and practice hub	Jennifer Yip
	70	Deliver and promote the anti-racism practice learning hub in collaboration with the GLA, through our partnership networks and the HEG	Jennifer Yip



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Appendices: London Priorities

May 2023

OFFICIAL-SENSITIVE

Mayor's Priorities for London

1. Building thousands of more genuinely affordable homes to buy and rent
2. Making transport more affordable, better and greener
3. **Tackling air pollution to make the air we breathe safe for everyone**
4. Making sure Londoners from all walks of life can enjoy arts and culture
5. Fighting for London's economy – **supporting business, protecting jobs, boasting skills provision and increasing the standard of living for all Londoners**
6. Ensuring the safety and security of London
7. **Encouraging London's diverse communities to come together**



The London vision

A shared ambition to make London the world's healthiest global city, and the best global city in which to receive health and care services.



Reduce childhood obesity



Improve the emotional wellbeing of children and young Londoners



Improve mental health and progress towards zero suicides



Improve air quality



Improve tobacco control and reduce smoking



Reduce the prevalence and impact of violence



Improve the health of homeless people



Improve services and prevention for HIV and other STIs




Support Londoners with dementia to live well



Improve care and support at the end of life



Health Inequalities Strategy Key Commitments 2021-24

Commitment	Key target
 Healthy Children	Up to 50 School Superzones supported by 2025 – Healthy Weight Healthy Place Mission
 Healthy Minds	By 2025 London will have a 250,000 wellbeing ambassadors , supporting Londoners where they live, work and play - Mental Health & Wellbeing Mission
 Healthy Places (1)	London will have the cleanest air of any major world city , meeting legal and health requirements by 2050. In the interim, we want to be on a path to zero pollution, meeting the WHO's interim target for PM2.5 (10ug/m3) by 2030
 Healthy Places (2)	London is a Living Wage City Region - An additional 1,600 employers joining the Living Wage movement, lifting 48,000 people onto the real Living Wage and bringing £635m of increased pay
 Healthy Communities	Tackling ethnic Inequalities and structural racism – developing an anti-racist learning practice hub for London
 Healthy Living	By 2041, all Londoners will do at least the twenty minutes of active travel each day (e.g. walking, cycling) to stay healthy

SEEKING SUPPORT

ANTI-RACISM IN LONDON'S HEALTH AND CARE SYSTEMS

Our Vision

London's Health and Care partners recognise that racism in its systemic, structural, institutional, and interpersonal forms is an urgent threat to public health, the advancement of health equity, and a barrier to excellence in the delivery of medical care.

Our organisations oppose all forms of racism and will actively work to dismantle racist and discriminatory policies and practices across all of health and care.

1. We commit to being anti-racist health and care systems and organisations: We will work together as system partners to clarify our organisations' position on anti-racism and discrimination. We are committed to combating, dismantling and eradicating racism including at the interpersonal, structural and institutional levels. This starts with the recognition and acknowledgement that racism and anti-Black racism exist in all institutions. Our goal is to be intentional and accountable, and develop and implement anti-racism strategies geared towards opposing and eliminating racism in all its forms.

2. We will support our staff and create enabling workplaces: London's employers commit to maintaining a zero-tolerance stance on racial discrimination in the workplace as per the Equality Act 2010, and the organisation's employees, partners, suppliers and the broader public need to be aware of this stance. London's partners will take a leading role addressing systemic racism and discrimination when found to exist within our institutions and in public policies, programs and services.

3. We will prioritise and deliver evidence informed, culturally competent interventions to narrow the gap. This will form the cornerstone of our plan to tackle the barriers people from ethnic minorities face in access, uptake, experiences and outcomes of our health and care services, ensuring our organisations better represent and meet the diversity and needs of our city's communities. Data and evidence are indispensable tools for identifying and addressing inequities, and enabling corrective action toward the elimination of racism and discrimination. We need to identify what works, and foster understanding of racism and discrimination and their impacts among all Londoners

4. We will leverage our positions as anchor institutions to tackle the wider determinants of inequality: We understand the financial, social, cultural transformative power of our organisations, working in place, to address and improve the wider determinants. We denounce all forms of discrimination, and the perpetuation of inequality of any form, and are committed to improving the health, safety and wellbeing of the marginalized communities that we serve through collaboration and community capacity building.

5. We will work with our communities to build trust, confidence: We need to increase awareness of the historical roots of racism and discrimination, and their impacts on our communities. London's diverse communities have expertise in addressing various forms of racism and discrimination must be supported. Funding for projects and capacity building at the community level recognises and enhances their expertise. It allows them to draw on their lived experiences to tailor initiatives to their particular circumstances.



ICB priorities

1. Improve outcomes in population health and healthcare
2. Tackle inequalities in outcomes, experience and access
3. Enhance productivity and value for money
4. Help the NHS support broader social and economic development

North Central

1. Childhood immunisations
2. Heart health
3. Cancer
4. Lung health
5. Mental health and wellbeing

Enablers

Streamlining care and advice
 Personalised Care
 Prevention

North East

1. Babies, Children and young People
2. Long term conditions
3. Mental health
4. Local employment & workforce

Enablers

Tackling Health inequalities
 Prevention
 Personalised Care
 Co-production
 Creating a high trust environment
 Operating as a Learning System

North West

1. Support health and well being for our population
2. Address unwarranted health inequalities
3. Improve access to care
4. Keep people at home wherever possible and ensure far more integrated/joined up services, particularly for our older people
5. Support babies, children, and young people will lead happy and healthy lives, and become happy and healthy adults
6. Ensure our health and care system is as productive and high quality as it can be

And a section on working with communities.

South East

1. Health and Wellbeing
2. Convenient and responsive care
3. Whole-persona care
4. Tackling health inequalities
5. Partnership with our staff and communities
6. Securing our sustainability
7. Cross-system priorities
8. Prevention and wellbeing
9. Ensuring a good start in life
10. Children's and young people's mental health
11. Adult mental health
12. Primary care and long term conditions

South West

1. Prevent ill health
2. Support people to thrive, live more independent lives and manage their health to stay well
3. Reduce the health inequalities that exist
4. Improve health, wellbeing and outcomes for residents
5. Provide the very best health and care services by working together to provide seamless care to those who need it
6. Get the best value from its resources.