


Hastings Local Strategic Partnership

Universal Healthcare update

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Strategic Lead



Making visible the reality of inequalities in service provision, and working through how best to secure services that are designed around health needs.

Background

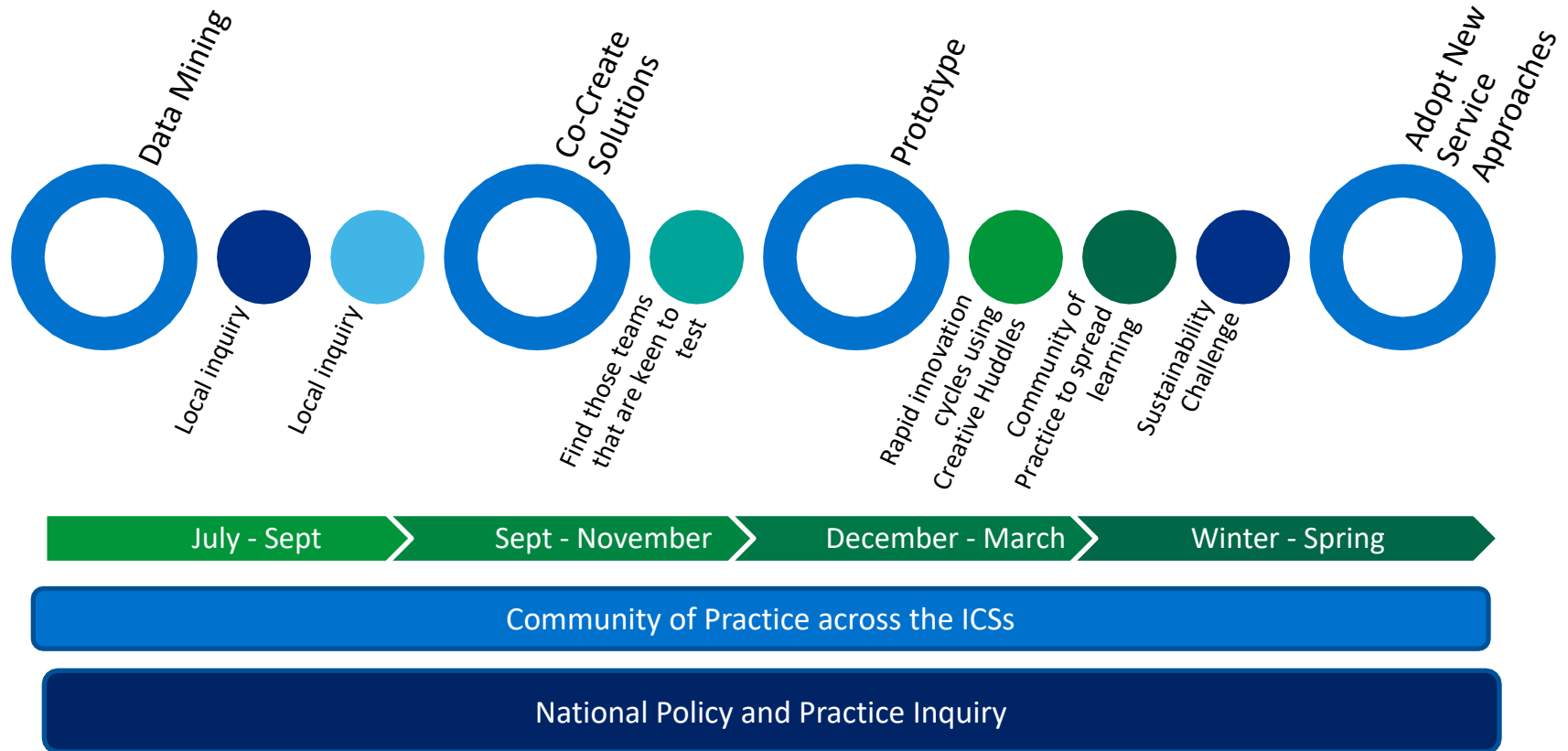
- The Universal Healthcare Proposition is a twelve-month partnership initiative with the London South Bank University and the two Integrated Care Systems (ICSs) of Sussex and West Yorkshire, focusing on two places - Hastings & St Leonards and Bradford.
- To support delivery of the proposition, Innovation and Change Labs have been established in the two places.
- An Oversight and Advisory group, is in place. This group is accountable for the delivery of the Universal Healthcare proposition and is co-chaired by NHS Sussex MD and East Sussex DPH.
- To take forward implementation in the Hastings and St Leonards Innovation and Change Lab, a multi-agency design team has been established.
- We are using three propositions as the basis for what we need to change in order to make healthcare truly universal:
 - Medicalising poverty and providing ‘sticking plaster’ approaches
 - Providing services that are not accessible to all
 - Not being frank and open about the reality of the rationing of services.

LSBU

***The Universal Healthcare
Network Propositions***

Better health and care for all

Innovation and Change Lab process



Progress so far: Data mining – key findings

*Poor communities
have more
emergency
admissions and less
planned admissions*

*Mental health waits for young
people are extreme*

*The life expectancy gap
for people who are
poor has not narrowed*

*Young people and men access
healthcare significantly less*

*Primary care funding
in poorer areas does
not seem to take
complexity into
account*

*20% of future GP
appointments are
already booked by
5% of patients*

*Poorer communities have
fewer GPs and less funding
for primary care*

Progress so far: Incubation & Construction Workshops



Workshop 1: Observe

Insight and Learning about context in which we all work and uncovering local innovation

Really understand the issues and the system

Determine the system choices



Visits

In groups visiting parts of the local health system to deepen understanding of how the system works



Workshop 2: Retreat

Working together on the Vision and the underlying behaviours and conditions we need in place

Work out what needs 'fixing' and how to solve inherent dilemmas

What can we each commit too?

What can we commit too together?



Workshop 3: Act

Through modelling, generate options for prototyping

Commit to the prototypes we will test

Identifying the stakeholders that need to be engaged; and the evaluation criteria for the prototypes.

Sept

Oct

Oct

Nov

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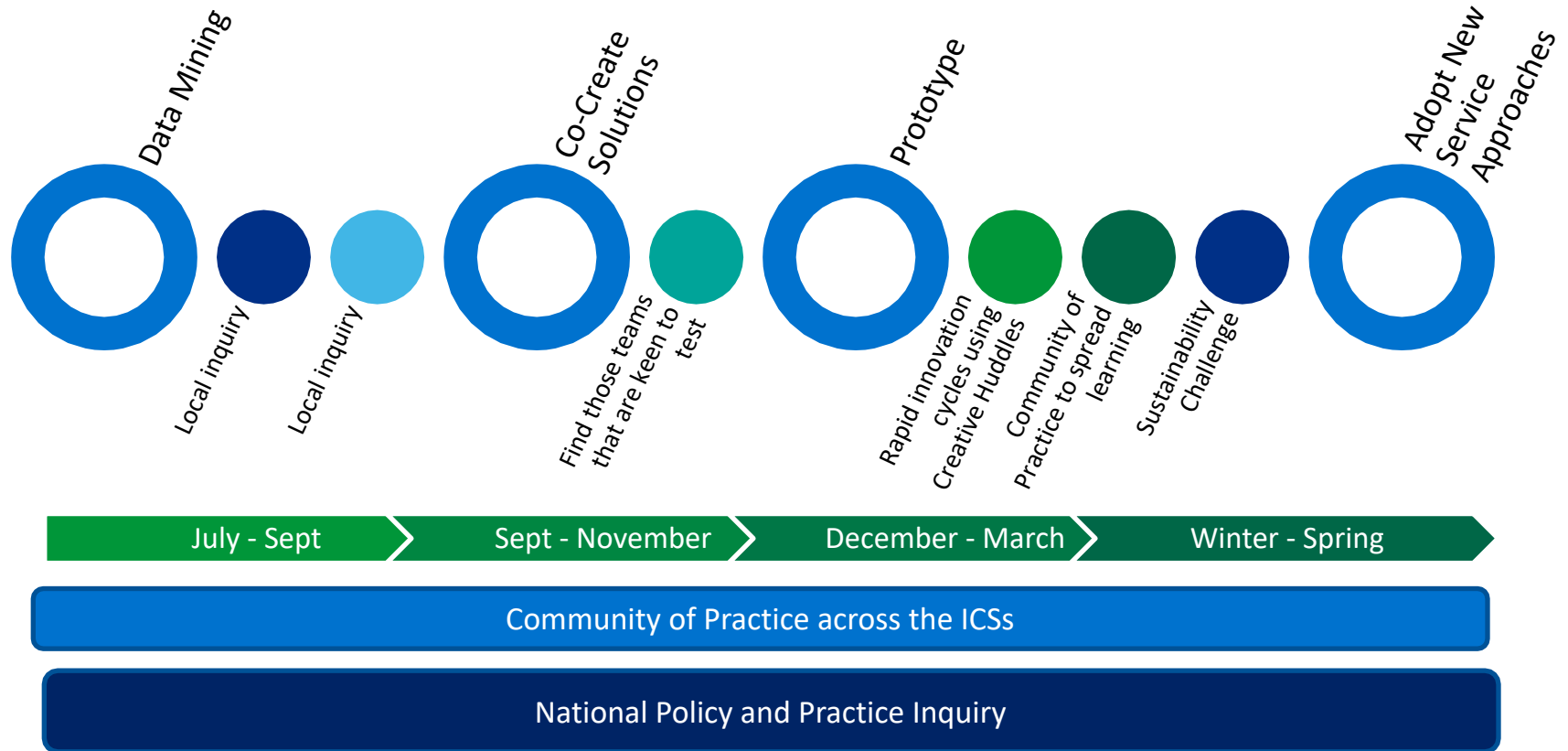
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Next steps



Questions for the LSP:

How can we ensure that
Universal Healthcare is sharing
information and learning from
other pieces of work in
Hastings?

How would you like to be kept up
to date with progress?