

# Improving the health of the population of the City of London and Hackney

Describing how the City and Hackney (C&H) Population Health Hub (PHH) works and how it contributes to improving the health of the population

updated 27 June 2022



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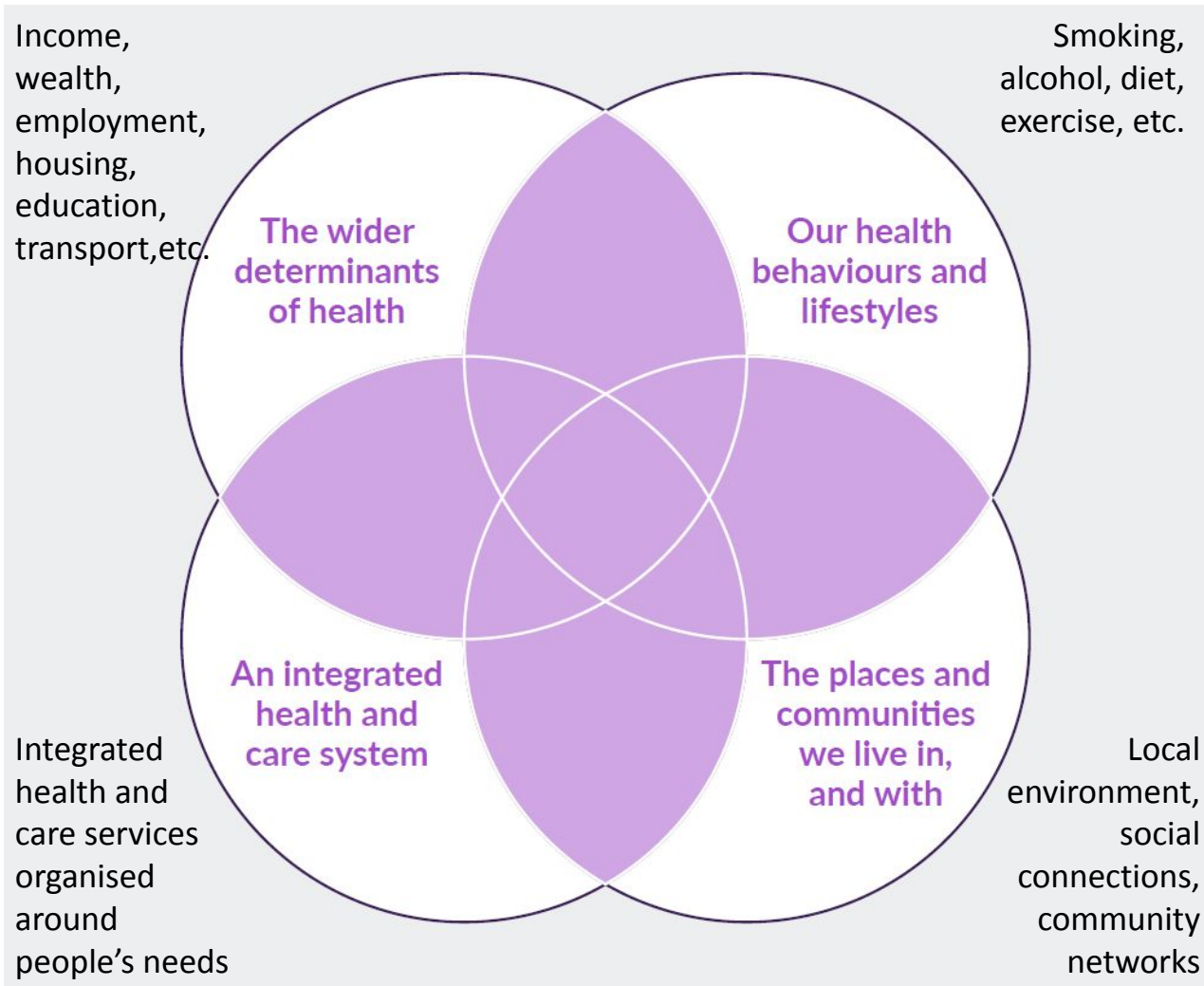
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# What do we mean by ‘population health’?



\*This figure represents the four pillars as indicated in the four circles.

Source: [King's Fund](#)

Population health is described by the King's Fund as...

*"...an approach that aims to improve physical and mental health outcomes, promote wellbeing and reduce health inequalities across an entire population. Improving population health and reducing health inequalities requires action across all 'four pillars'\* of a population health system."*

Taking a population health approach means:

- rebalancing investment across the four 'pillars'
- focusing attention in the areas of overlap and intersection (the 'rose petals') - where there are the greatest opportunities for impact
- system partners taking shared responsibility for improving population health.

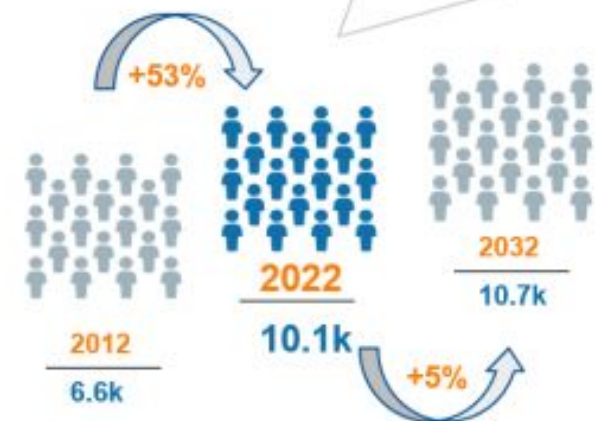
Effective, system-wide action requires a common understanding of population health drivers, outcomes and effective interventions.

# Population in City of London

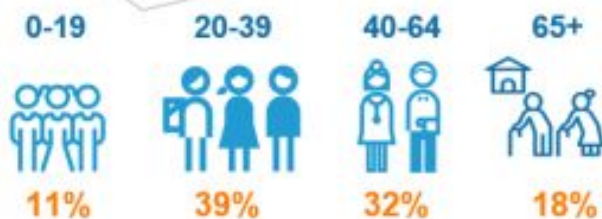
Further information and data can be found on the [City and Hackney health and wellbeing profile](#)



The past ten years has seen a notable population increase, but the rate of growth is expected to reduce by more than ten times in the next ten years. Daily, an additional estimated 513,000 people work in the City.



The majority of City of London's population is composed by working age adults, around **71%** residents aged 20-64, compared to 64% in London.



Life expectancy (LE) in City of London is **better** than in England. However the gap between male and female remains.



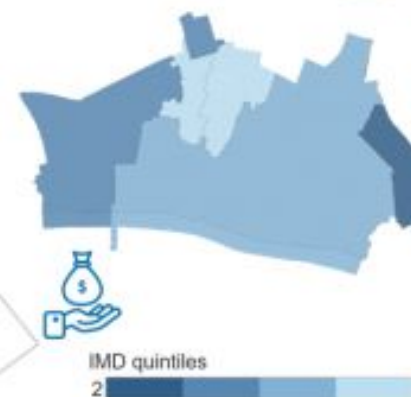
Around **24%** of City and Hackney adult (18+) population have 2 or more **long term conditions**.



The City is among the least deprived areas in England, ranking **126 out of 151** local authorities, where 1 corresponds to the most deprived.

Around **7%** of children under 16 and **8%** of all adults aged 60+ live in low income households.

In the map opposite, where the darker blue areas are the most deprived, shows that Porksken is the most deprived area within the City.

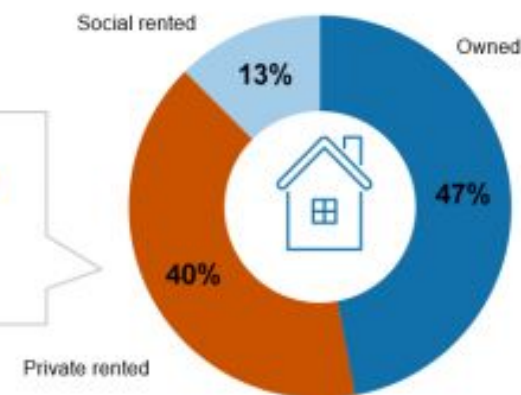


Long term claimants of Jobseeker's Allowance (2021): **1.2 per 1,000 population**

London: 2.3 per 1,000  
England: 2.1 per 1,000

As City have small numbers, it's not possible to see significant difference in unemployment conditions compared to London and England. It ranks 10 among the 33 areas in London.

The proportion of **private and social rented tenures** in the City was **53%**, compared to 50% in London in 2020.

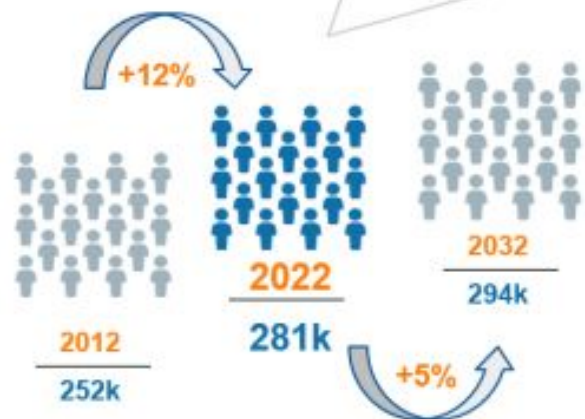


# Population in Hackney

Further information and data can be found on the [City and Hackney health and wellbeing profile](#)



The past ten years has seen a notable population increase, but the rate of growth is expected to reduce by more than a half in the next ten years.



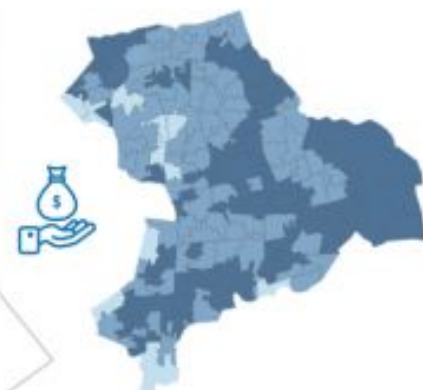
Around **62%** of Hackney residents aged under 40 years old, compared to 56% in London.



Hackney is among the most deprived areas in England, ranking **18 out of 151** local authorities, where 1 corresponds to the most deprived.

Around **25%** of children under 16 and **41%** of all adults aged 60+ live in low income households.

The map opposite shows how areas of high deprivation are spread across the borough, where the darker blue areas are the most deprived.



IMD quintiles 1 3 5

**Life expectancy (LE)** has increased in Hackney over the last ten year for both males and females, however the gap between male and female LE as well as between the LE and the number of years residents are expected to live in good health remains. LE in Hackney is **worse** than in London.

**Life expectancy at birth: 83.7 years**  
Number of years in good health: **61.5 years**  
=> on average **22.2 years** in poor health

**Life expectancy at birth: 79.3 years**  
Number of years in good health: **60.2 years**  
=> on average **19.1 years** in poor health

Around **24%** of Hackney adult (18+) population have 2 or more **long term conditions**.



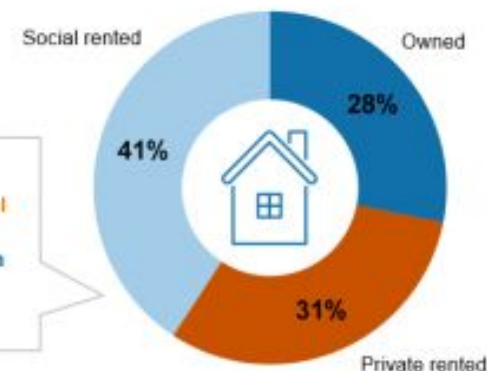
Long term claimants of Jobseeker's Allowance (2021): **5.8 per 1,000 population**  
London: 2.3 per 1,000  
England: 2.1 per 1,000

While the rate of unemployment has improved over the past nine years, Hackney rate is still significantly higher compared to London and England averages. Significant **inequalities** remain with young people, residents from global majority ethnicities and disabled people more likely to be unemployed.



There is a rich ethnic and cultural mixture in Hackney, however the diversity is not always captured by the existing labels.

- 36% white-British
- 21% white non-British
- 20% black
- 10% Asian
- 8% mixed
- 5% other ethnic groups



The proportion of **private and social rented tenures** in Hackney was **72%**, compared to 50% in London in 2020.

\*Global majority ethnicities refers to people who are black, Asian, brown, dual-heritage, indigenous to the global south, and/or have been racialised as 'ethnic minorities' (Rosemary Campbell-Stephens, 2020)  
Sources: GLA 2020-based housing led population; GLA 2016-based ethnicity housing led population; UKHSA Fingerprints; Ministry of Housing, Communities & Local Government, 2019; Hackney JSNA website; ONS 2020.

Liaising with partners beyond City and Hackney to support delivery of our key priorities (including East London Health and Care Partnership, the Greater London Authority, London Councils, NHS England).

Supporting City and Hackney place based partnership to take a population health approach in the design and delivery of health and care services for local people; enabling more efficient use of system resources and improving outcomes.

Supporting the development and implementation of Neighbourhood population health plans, and both the City of London and Hackney's Health and Wellbeing Strategies.

## How does the Population Health Hub support the City and Hackney system to improve population health?

The Population Health Hub (PHH) is a **shared, system resource** which aims to:

- lead specific projects to influence and support system partners to be more aware of what impacts population and their role in improving population health and reducing [health inequalities](#).
- develop practical tools to support this
- provide timely and actionable intelligence

Working with Health and Wellbeing Boards in the City of London and Hackney on ensuring that the wider determinants of health are central to programmes of work.

Influencing departments and organisations across the City of London, Hackney and beyond to influence the social, economic and environmental determinants of health.

Working in partnership with City and Hackney Health Inequalities Steering Group to support delivery of its [priority action plans](#).

Involvement of clinical, [resident](#) and associate members in developing population health priorities for City and Hackney.

Leading on the delivery of key population health programmes and initiatives including Make Every Contact Count.

Responsibility for distributing the Prevention Investment Standard (PIoS) aligned to strategic objectives.

# What can the Population Health Hub do?

Building capacity of teams, organisations and partners within the City and Hackney system (across these functions)

## Intelligence and analysis

- Timely analysis of data to inform decision making.
- Undertake population health needs assessments, service monitoring, health/equality impact assessments, health equity audits, etc.
- Utilise existing population health intelligence (Joint Strategic Needs Assessments (JSNA), Neighbourhood Profiles, service level data) and community insight to produce recommendations for action.
- Produce/maintain accessible and interactive dashboards for users to produce their own intelligence.
- Improving access to and use of existing data and analytics resources (across NEL).
- Health economic analysis.
- Support on improving accuracy and completeness of data sets.
- Support data sharing between organisations to facilitate generation of intelligence.

## Evidence and guidance

- Proactive and reactive literature and evidence reviews to inform service redesign, commissioning and wider strategy development.
- Leverage wider knowledge management resources e.g. from Office for Health Improvement & Disparities.
- Ensure planning informed by latest evidence-based guidelines e.g. from NICE etc.

## Evaluation and research

- Agree priorities for research and use to establish/cement academic partnerships, and collaborate on funding bids, for population health research and evaluation.
- Ensure research is locally relevant and results implemented for improvement.

## Embed prevention and equity in decision making

- Development of tools, resources and interventions to:
  - a) leverage a shift in focus and investment towards prevention
  - b) incentivise and facilitate routine consideration of health equity in decision making and service planning.
- Support the system to deliver these elements of national strategies

## Community insight

- Work with engagement colleagues across City and Hackney, including newly forming Involvement Forum.
- Expertise and support in the design of community insight and research activity.
- Analysis and interpretation of community insight on population health needs and assets.

## Service improvement

- Use of population health intelligence, evidence and research as part of an enhanced Quality Improvement (QI) approach that drives innovation through whole service/pathway improvement.

# Some examples - what does this mean in practice?

Building capacity of teams, organisations and partners within the City and Hackney system (across these functions)

## Intelligence and analysis

Analysis of rates of access to and engagement with services across different population groups - is this equitable and are any service factors linked with improved access or engagement?

## Evidence and guidance

Reviewing existing literature on evidence for or existing models to inform development of a new service e.g. how to get people to engage with anticipatory care.

## Evaluation and research

Support development of evaluation frameworks for different projects/ pilots/ programmes e.g. investment in Children, Young People and Families or impact of new initiatives to tackle inequality in primary care.

## Embed prevention and equity in decision making

Embed prevention priorities across City and Hackney and increase resources committed to these e.g. working with finance leads to develop funding mechanisms for prevention.

## Community insight

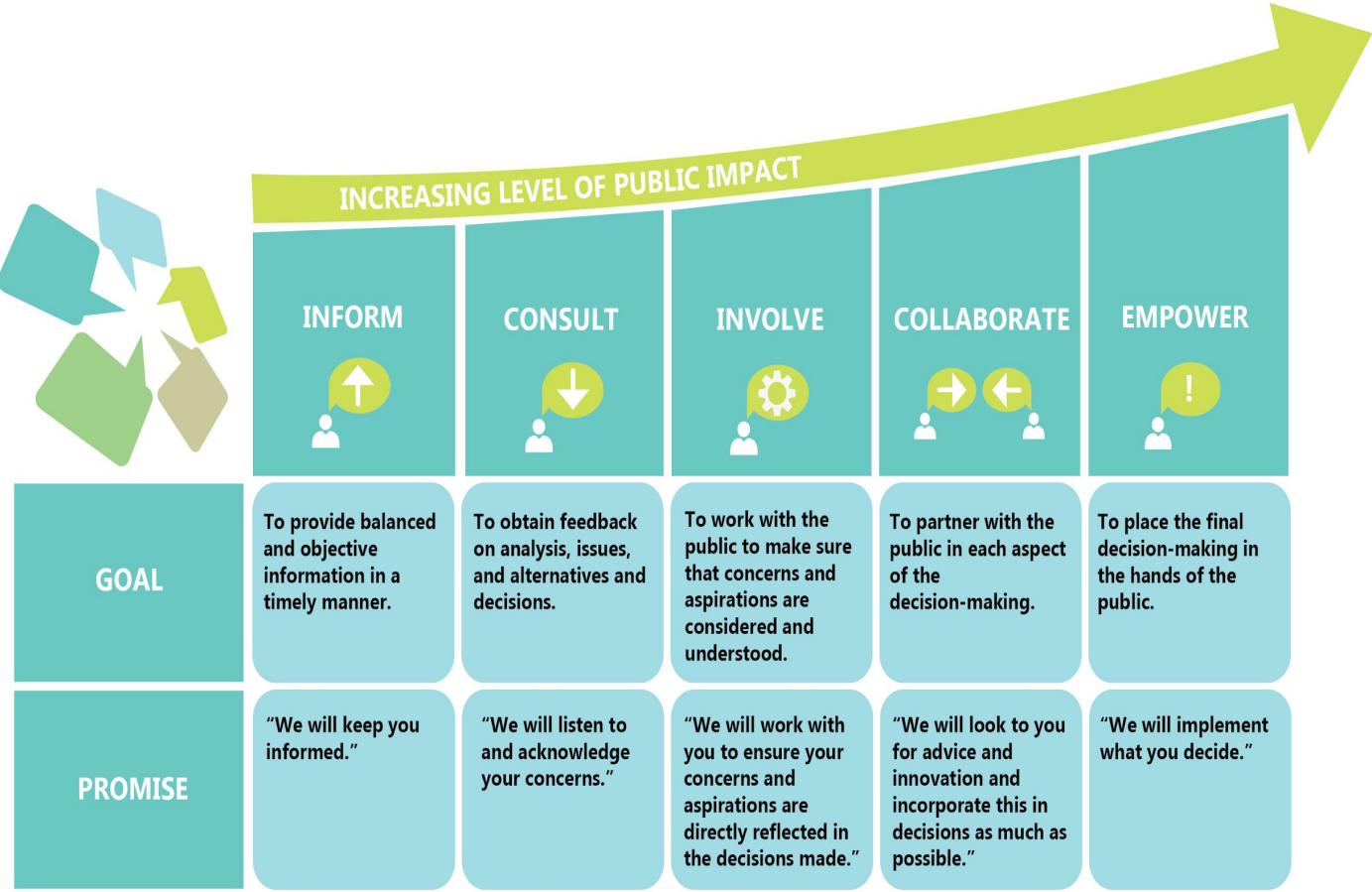
Putting systems in place to enable teams across City and Hackney to access and review existing insight and incorporate into service planning.

## Service improvement

Making teams aware of different resources across the system to support service improvement and supporting teams with Quality Improvement (QI) /data/insight/evidence to support this.



# How will the Population Health Hub involve residents?



- The Population Health Hub (PHH) will take a coproduction approach where appropriate as defined by the [City and Hackney Coproduction Charter](#) ‘as designing, reshaping or delivering our way of working in equal partnership with the people who use them in order to create better services and outcomes.’
- The PHH approach will embed the principles as outlined in the [resident participation framework](#) (developed by the Health Inequalities Steering Group) to work in a way that is inclusive, intersectional and accessible - removing the practical, institutional, cultural and economic barriers to involvement and collaboration.
- The PHH will actively seek a diversity of perspectives from residents and other stakeholders - reflecting the diversity of the City of London and Hackney, but particularly focusing on the groups most affected.

# How does the Population Health Hub work?

The Population Health Hub (PHH) will be a collaborative of existing and new capacity/resources that will combine to develop and implement a programme of work as part of a City and Hackney population health framework, by delivering the functions on the previous slides. It will ensure effective deployment of appropriate resources in response to system needs.

The PHH will have limited capacity dedicated solely to the work of the PHH. To deliver its aims it will require resources from all City and Hackney partners, which might be in the form of:

- Staff capacity - as subject matter expertise, as general planning/doing/researching capacity, or to provide specific skills/expertise/experience/data access
- Funding

In return, the PHH can support all partners with specific projects as well as upskilling staff within partner organisations in population health skills and approaches, to support their organisational work.

# How does this fit into the bigger picture: national and local priorities?

## *National drivers*

- Reducing inequalities and improving population health feature very strongly in requirements of NHS trusts and ICPs: <https://www.england.nhs.uk/publication/2022-23-priorities-and-operational-planning-guidance/>; <https://www.england.nhs.uk/about/equality/equality-hub/>
- PHE Beyond the Data report and recommendations for Public Health teams: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/892376/COVID\\_stakeholder\\_engagement\\_synthesis\\_beyond\\_the\\_data.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/892376/COVID_stakeholder_engagement_synthesis_beyond_the_data.pdf)
- Core20PLUS5 is a national NHS England and NHS Improvement approach to support the reduction of health inequalities at both national and system level <https://www.england.nhs.uk/about/equality/equality-hub/core20plus5>

## *Hackney Health and Wellbeing Strategy 2022-2026*

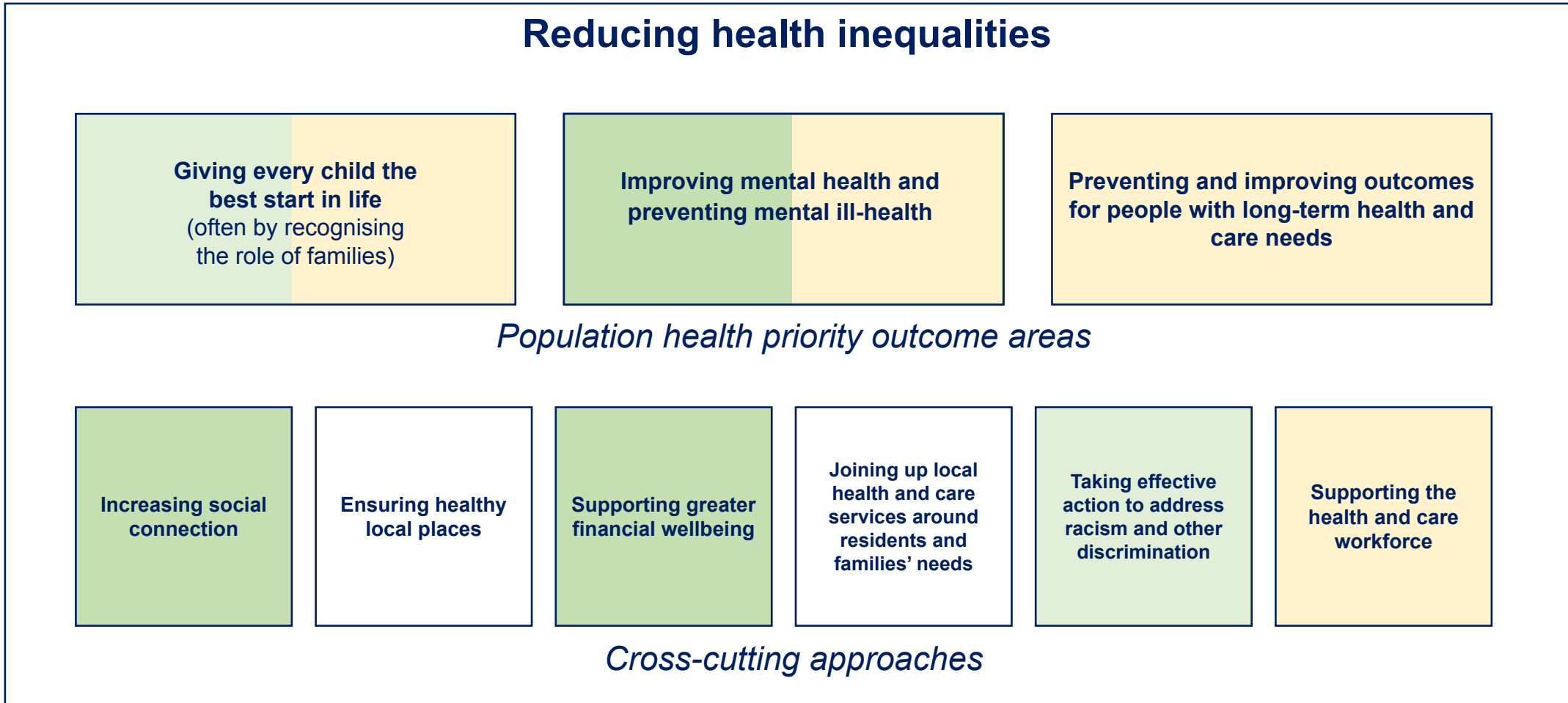
The draft Hackney Health and Wellbeing Strategy for 2022-26 sets out four broad areas for action, with more detailed action plans and ambitions currently in development. The focus areas for partnership action over the next four years are:


- improving mental health and preventing mental ill-health
- increasing social connection
- supporting greater financial security and reducing poverty.


## *City of London Health and Wellbeing Strategy*

The new City of London Health and Wellbeing Strategy is currently in the early stages of development.


# What are the City and Hackney place-based partnership strategic focus areas that the PHH will help deliver?



 = Hackney HWB focus area

 = Hackney HWB specific 'lenses': (approaches to reducing health inequalities)

 = NEL ICS four partnership priority areas

 = reflecting LTP response / long term C&H partnership ambitions / Neighbourhoods Programme vision

# Population Health Hub team and accountability

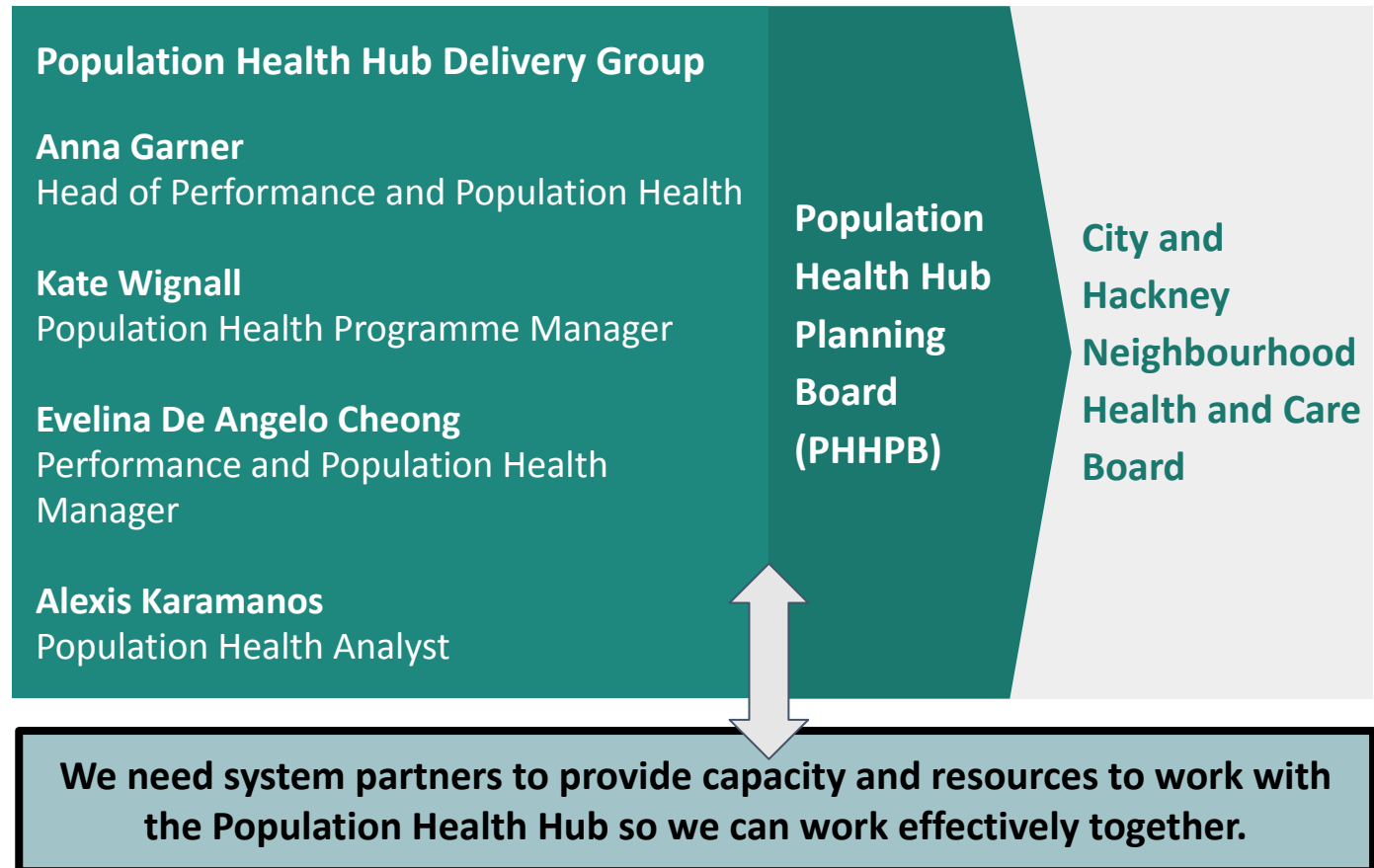
The Population Health Hub (PHH) is accountable to the City and Hackney Neighbourhood Health and Care Board as outlined in the [Integrated Care System Operating model](#) and will report to it as appropriate via Dr Sandra Husbands, its Senior Responsible Officer (SRO).

The [Population Health Hub Planning Board \(PHHPB\)](#) meets monthly and has been set up to ensure the SRO is equipped to provide that accountability, by guiding and informing the development and implementation of programmes and projects that the PHH will take forward.

The Population Health Hub Delivery Group takes forward the work as outlined in the workplan and takes direction from the PHHPB.

The PHHPB membership list and [Terms of Reference can be found here](#).

The Population Health Hub will be a collaborative of existing and new capacity/resources that will combine to develop and implement a programme of work as part of a City and Hackney population health framework. It will ensure effective deployment of appropriate analytical resources in response to system needs.



# Overview of Population Health Hub Projects and workplan

|   |   |
|---|---|
| 1. Improving outcomes through effective resident involvement                            | 10. Delivering mental health and other services how people need and access them                     |
| 2. Collection and use of equalities data to identify and tackle inequalities            | 11. Equity in health and care across North East London  |
| 3. Making health inequalities everyone's business                                       | 12. Population Health Management  |
| 4. Equitable access to effective talking therapies                                      | 13. Improving health literacy   |
| 5. Analysis of local women's health reproductive survey                                 | 14. Embedding strengths based approaches  |
| 6. Identifying inequities in long COVID needs   | 15. Showing impact of investment in children, young people, maternity and families                  |
| 7. Helping us to better measure and understand impact                                   | 16. HMIP inspection of the experiences of black and mixed heritage boys in youth offending services |
| 8. Increasing resources committed to prevention (Prevention Investment Standard - PInS) | 17. Training and development  |
| 9. Identifying Primary Care Network inequalities priorities                             | <i>Last updated 29 June 2022</i>  |

# How was the workplan developed?

Our existing projects are a combination of *'push'* and *'pull'* projects:

## Push

Projects that are identified by the Population Health Hub itself. Push projects were identified from assessing national directives or local priorities (e.g. Primary Care DES contract, North East London priorities, Health and Wellbeing Board strategies) and where there were needs or gaps in implementing a population health approach in response to these. The population health hub is operational and will support the system to deliver these strategies.

## Pull

Projects that are identified by system partners, organisations and teams. Pull projects were identified from engaging with system groups and committees.

Projects are also identified based on local intelligence, insight and evidence for improving population health for City and Hackney residents, including what the needs of the system are in terms of taking a population health approach locally, see criteria below:

### 1) Impact

- What is the scale of the local impact?
- What is the severity of the local impact?
- Is the local situation improving or deteriorating?
- How do local outcomes compare to other areas?

### 2) Commissioning priority?

- Will the work underpin the commissioning of a local service?

### 3) Policy priority?

- Will the work underpin the development of a local policy / action plan / strategy?

### 4) Gap in knowledge?

- Is there a lack of understanding of the issue that needs to be addressed?

## **APPENDIX: Additional documents for reference**



# Tackling Health Inequalities in City and Hackney

## Strategic and delivery infrastructure

### North East London ICS: Inequalities Workstream



The **direct** harms of COVID-19 disease and the **indirect** effects of lockdowns and other restrictions have affected some groups much more than others, including:

- Our diverse, ethnic communities
- Older people
- Children / young people (educational and employment impacts)
- Residents of care homes / settings
- People with pre-existing health conditions
- Men (diagnoses and deaths)
- Women (social and economic impacts)
- People living in poverty or on low incomes
- People in 'key worker' roles and / or insecure employment
- People living alone or socially isolated
- Marginalised groups such as homeless people, asylum seekers, prisoners, street-based sex workers

The breadth and depth of the impacts of COVID-19 emphasise the need for collective, system-wide action to address health inequalities that have been starkly exposed by the current pandemic.

The City and Hackney Health Inequalities Steering Group has been convened to ensure our collective efforts have maximum impact, and that we make best use of our combined resources, through collaboration and a partnership approach.

## Ten broad areas for local system-wide action to tackle health inequalities in City and Hackney

### Act:

SG leadership and mobilisation of system resources

1. Inequalities data and insights

Routine collection and analysis of equalities data and insight to inform action

2. Tools and resources

Develop / enable system-wide adoption of tools to embed routine consideration of health equity in decision-making

3. Tackling structural racism and systemic discrimination

Adopt a partnership position and action plan to tackle racism and wider discrimination within local institutions

4. Community engagement, involvement & empowerment

Build trust and adopt flexible models of engagement to work in partnership with residents to improve population health

### Sponsor:

Led from elsewhere, but SG role to champion, facilitate partnership working, ensure focus on reducing inequalities

5. Health (equity) in all policies

Ensure wider policies and strategies explicitly consider and address health inequalities

6. Anchor networks

Anchor institutions collectively use their local economic power to lead action on reducing social inequalities

7. Strengths-based, holistic approach to service provision

'No wrong door' access to support residents to address wider health and wellbeing needs

8. Staff health and wellbeing

Build on COVID-19 risk assessments to provide ongoing support for wider staff wellbeing needs

### Watch:

Monitor progress of existing partnership work to tackle inequalities

9. Tackle the digital divide

Pool system resources to address the 3 dimensions of digital exclusion: skills, connectivity, and accessibility

10. Tailored, accessible info about services & wider wellbeing support

Produce information in community languages that is culturally appropriate and responsive to local diverse needs

# Population Health Hub Planning Board

Membership of the Population Health Hub Planning Board has representation and expertise from each of the four population health pillars:

| <b>Member</b>            | <b>Organisation</b>                 | <b>Population Health pillar(s)</b>                                     |
|--------------------------|-------------------------------------|--|
| Simon Cribbens           | Corporation of London               | The wider determinants of health, an integrated health and care system |
| Deblina Dasgupta         | Homerton Hospital                   | An integrated health and care system                                   |
| Evelina De Angelo Cheong | North East London CCG               | An integrated health and care system                                   |
| Diana Divajeva           | City and Hackney Public Health team | All pillars  |
| Anna Garner              | North East London CCG               | All pillars  |
| Sandra Husbands          | City and Hackney Public Health team | All pillars  |
| Alexis Karamanos         | Population Health Hub               | All pillars  |
| Ida Scullos              | Resident                            | The places and communities we live in, and with                        |
| Jayne Taylor             | City and Hackney Public Health team | All pillars  |
| Kate Wignall             | Population Health Hub               | All pillars  |

The full [Terms of Reference can be found here](#).

# What do we mean by health inequalities?

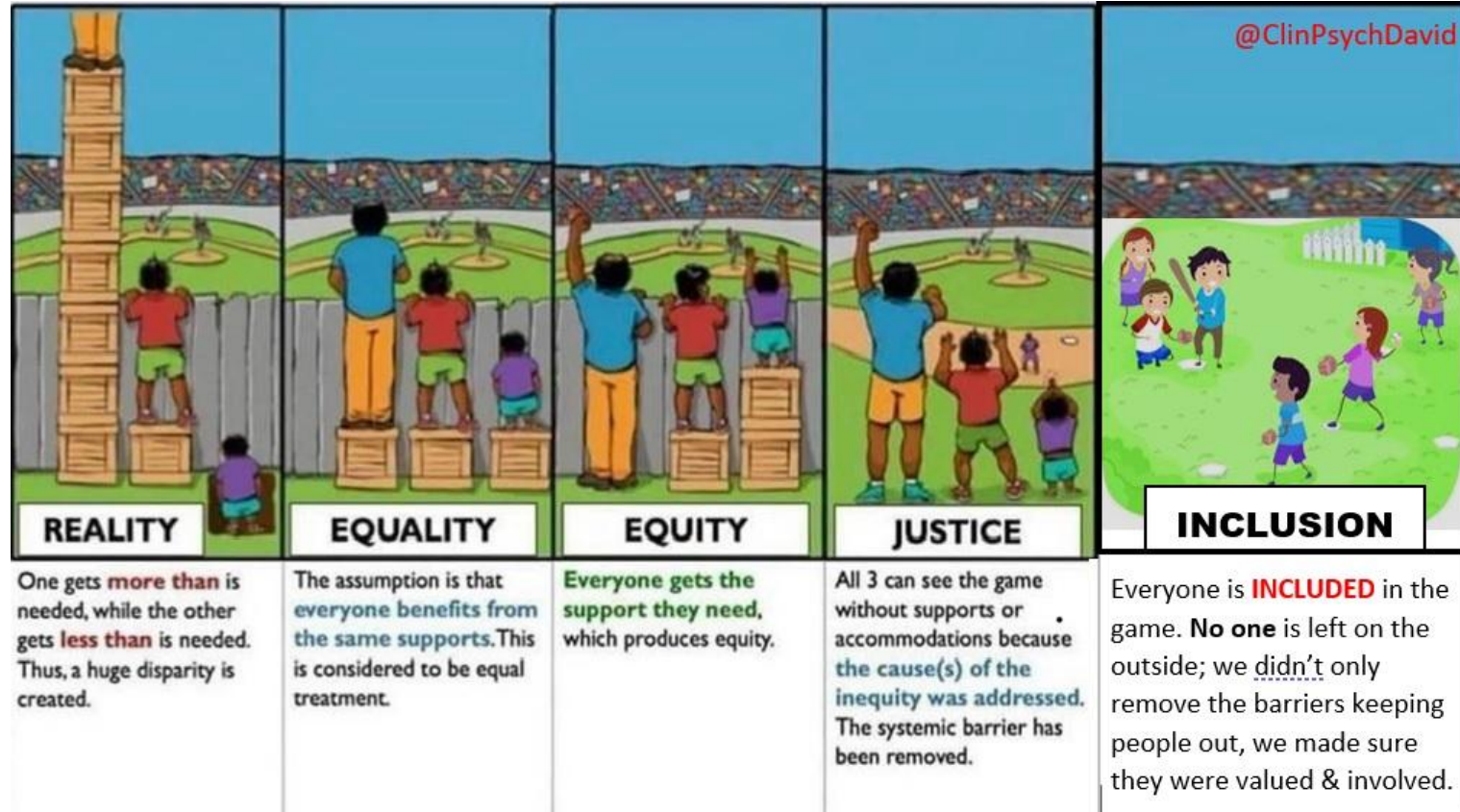
Health inequalities are avoidable and unjust differences in health status between groups of people or communities.

Inequalities are defined according to a number of different dimensions:

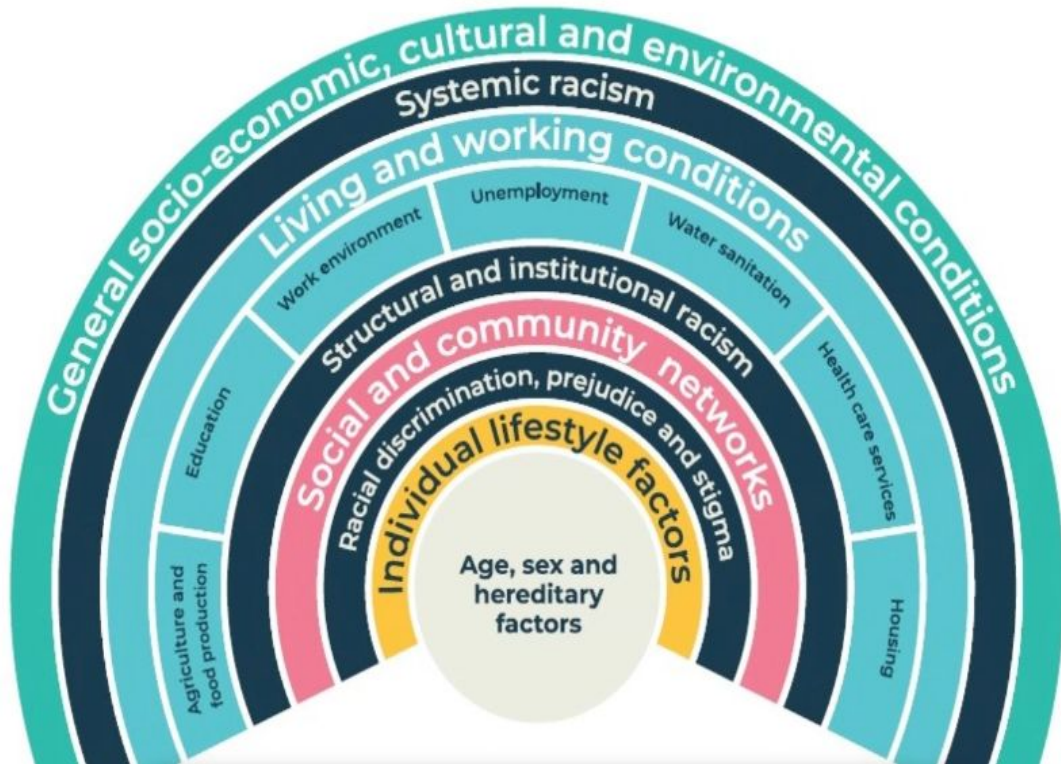
- protected characteristics: age, disability, sex, gender reassignment, ethnicity/race, religion or belief, sexual orientation, marriage and civil partnership
- social inequalities: poverty, housing, education, unemployment, etc.
- geographical inequalities: urban vs rural, local area deprivation, etc.
- vulnerability: carers, rough sleepers, care leavers, people with no recourse to public funds

Taking action to reduce health inequalities is a matter of social justice.

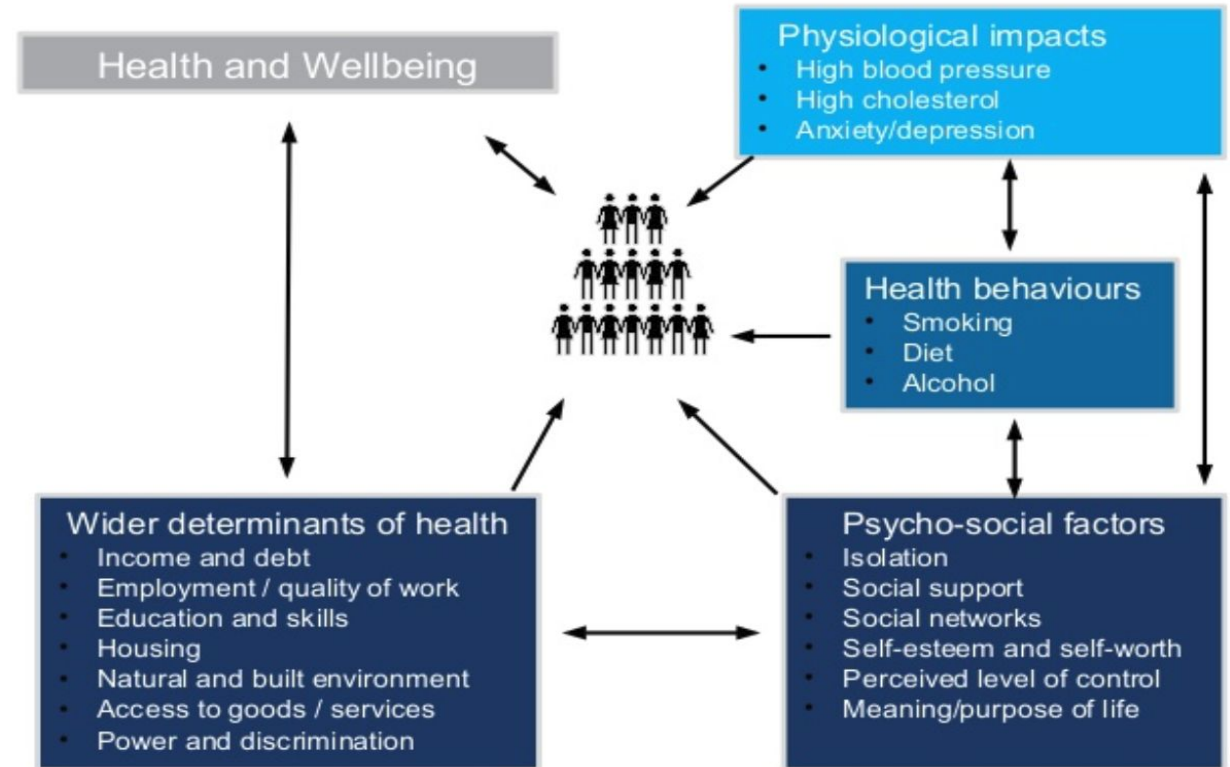
Also see [What causes health inequalities?](#)



# What causes health inequalities?



Source: Dahlgren & Whitehead (1993 – updated 2021)



Source: Public Health England, *Place-based approaches for reducing health inequalities*

## Further sources of evidence on local health inequalities:

PHE/OHID Fingertips: [Health Inequalities Dashboard](#) and [Segment Tool](#)

[Health and wellbeing profile – Hackney and the City of London](#)

A [summary of local and national evidence](#) on the health inequalities of the Covid-19 pandemic

Information on our local communities can be found on the Hackney and City of London websites:

- The [Knowing our Communities](#) web pages gives facts and figures on the protected characteristics and other communities in Hackney
- [Policy, evidence and statistics page](#) gives detailed facts and figures on Hackney's population as well as in-depth research and needs assessments
- [City of London](#)