



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

HSE Transformation Programme

.... to enable people live healthier and more fulfilled lives

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The Health Service Executive Population Health Strategy

July 2008

Introduction:

The mission of the Health Service Executive (HSE) is 'to enable people live healthier and more fulfilled lives'.

The HSE Transformation Programme has identified key challenges in how we will deliver health and social care services and improve health and social well being into the future. The international experience emphasises the importance of adopting a population health approach if we are to maximise this transformation process.

This document outlines the population health strategy for the HSE.

Aim of the Strategy

The aim of this strategy is to maintain and improve the health of the entire population and to reduce inequalities in health status between population groups.

The strategy will facilitate the transformation process and defines what a population health approach means and how it can contribute to health and social care services and most importantly the implications for how we deliver our services in adopting a population health approach.

Context

There is growing recognition that healthcare systems cannot be isolated from the rest of society. In order to be more effective they must take account of the social, economic and demographic context.

Whilst it is important to ensure that health systems provide quality health and social care services, there is a need to recognise that many of the

determinants of health are outside the healthcare system and include education, income and social status, poverty, transport and the environment. Key factors influencing the future are:

- The population is increasing and is now at its highest level since 1861 and will increase beyond 5 million in 2020. In addition to growing in size it is becoming increasingly diverse,
- Life expectancy has increased considerably over the past few decades and an ageing population will have implications for the provision of most services,
- The increasing incidence and prevalence of chronic illness among the middle aged and older age groups will require the development of appropriate models of care for chronic illness,
- Despite the rise in prosperity and overall improvements in the health of the Irish population, rates of mortality and morbidity are consistently higher for lower socio-economic groups,
- Expectations and demands for services are increasing and costs are rising.

International experience, as best exemplified by Wanless (2007), articulates the challenges faced by the HSE. It was recognised, in the UK, that after many reviews and Government policy documents, little change has happened on the ground. This equally applies to the Irish health and social care system.

Action is now required to shift the focus from a national sickness service, which treats disease, to a national

health service which focuses on promoting health, preventing ill health and providing the best quality care for those who require it, in the most appropriate setting.

What is a population health approach?

A Population Health approach is one which promotes and protects the health of the whole population or sub-groups, with particular emphasis on reducing health inequalities.

In changing the way we do our business a continuum of quality health and social care services spanning health promotion, prevention, self management support, primary and specialist care will be available to the whole population.

Adopting a population health approach is critical in informing new models for delivering health and social care services. There is an increasing need to focus on the health of the population and best possible health outcomes while moving to a person centred approach, with integrated services, across the entire continuum of care crossing organisational boundaries.

The implications of not adopting a population health approach are;

- Less than optimal health outcomes,
- Increasing pressures on an already compromised health and social care service,
- An increase in health inequalities, and
- Spiralling, unsustainable costs.

What are the key elements of a population health approach?

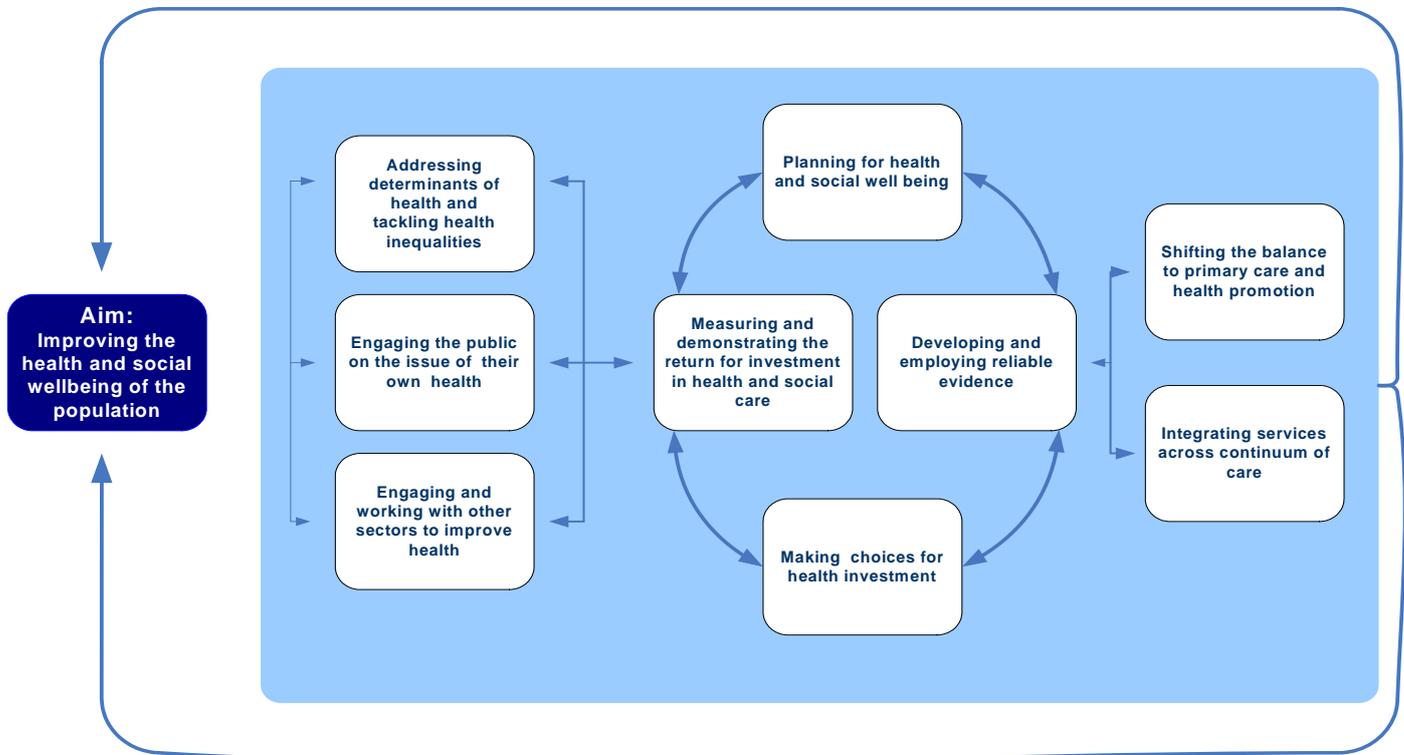
The key elements of the HSE population health approach are outlined below and are shown in diagrammatic format in figure 1.

1. Addressing the wider determinants of health and tackling health inequalities,
2. Planning for health and social well being and not just health and social care services,
3. Developing and employing reliable evidence to improve health and social care outcomes,
4. Making choices for health investment,
5. Measuring and demonstrating the return for investment in health and social care services,
6. Shifting the balance from hospital to primary care and health promotion,
7. Integrating services across the continuum of care,
8. Proactively engaging and working with other sectors to improve health,
9. Engaging the population on the issue of their own health.

Further detail on each of the elements is included in the text below accompanied by examples of actions that need to be taken in order to give meaning to the approach.

The list of action points are for illustrative purposes and are far from exhaustive. It also needs to be recognised that this is an integrated model encompassing all of the elements and not a menu of activities to pick and choose from.

Figure 1 - The key elements of a population health approach



1. Addressing the wider determinants of health and reducing health inequalities.

A population health approach measures, analyses and addresses the full spectrum of factors and their interactions known to influence and contribute to health.

Commonly referred to as the determinants of health, these factors include; social, economic and physical environments, early childhood development, health behaviours, individual capacity and personal skills, human biology and health services.

Evidence indicates the existence of extensive and widening health inequalities in Ireland today. Health inequalities by socio-economic status show a sharp class gradient in mortality and morbidity. Striking systematic

differences in health can be seen between different sections of the population. Along the health gradient those best off enjoy the best health while those worst off have the worst health.

Actions

The HSE will develop and implement a health inequalities framework.

The HSE will prioritise activities to ensure social inclusion.

The HSE will ensure that the allocation of public/private beds in public hospitals in accordance with the 80:20 policy will be adhered to.

The HSE will collect and analyse socio economic data on service users to better target the provision and development of services to reduce health inequalities.

PCCC in developing primary care teams will prioritise areas of disadvantage.

All HSE directorates will report on an annual basis how they have tackled health inequalities.

All HSE directorates will ensure that services and information provided to the public meet national health literacy standards.

The HSE will take a leadership and advocacy role in ensuring that other sectors which impact more directly on the determinants of health seriously consider the impact of their policies on the health status of the population.

The HSE will work with local authorities on the design of housing to address the needs of older persons and people with disabilities.

2. Planning for health and social well being and not just health and social care services

Health is a resource for every day life, not an object of living; it is a positive concept emphasising social and personal resources as well as physical capacities (WHO).

The HSE has a statutory role in ensuring we plan for and provide quality based health and social care services. However it has an equally important role in planning to ensure that the population enjoys and benefits from the best possible health status. This in turn will have a positive impact on services by reducing demand.

Strong evidence based and properly implemented government policies on major public health issues (e.g. tobacco, poverty, alcohol, road traffic

crashes) are generally the most effective measures.

There is a clear need to reduce the gap in health inequalities and this requires a systematic and holistic approach to policy and strategic developments across all agencies within the statutory, voluntary and community sectors

Actions

The HSE will take an integrated approach, across all directorates, in planning for health and social well being in addition to planning for health and social care services and this will be reflected in the corporate plan and the annual service plan.

The HSE will ensure that, based on a population health approach, resources are allocated across the continuum to support health promotion, prevention, best quality integrated health services, self management support, audit, monitoring and evaluation, for all services, but in particular for new developments.

Each directorate will demonstrate, and report annually, on how they promote, improve and protect health and deliver the best quality health services.

The HSE will plan and develop healthy food policies for services across all directorates and events.

The Finance and Estates management directorates in planning new developments and facilities will be required to show how they are health promoting.

The HSE will proactively engage in the development of integrated healthy public policy working with the Department of Health and Children, other Government Departments,

Statutory agencies and the community and voluntary sector.

The HSE will reflect and articulate the social and economic benefits accruing from a healthier society and will proactively seek to have all major government polices health-proofed.

3. Developing and applying reliable evidence to improve health and social services and outcomes.

A population health approach uses evidence based decision making. Evidence on health status, the determinants of health and effectiveness of interventions is used to assess health, identify priorities, develop strategies and inform decisions to improve health.

Health Technology Assessment (HTA) is a critical tool in the evidence based investment decision making process. Without enough good evidence, the uptake and spread of technologies is likely to be influenced by a range of social, financial and institutional factors, and not produce the healthiest outcomes or the most efficient use of resources.

Actions

The HSE will ensure that in planning for health and social well being as well as providing health and social care services, it will utilise the best available national and international evidence to inform its practice and on which it bases its decision. In the absence of such evidence it will facilitate research to develop an appropriate evidence base.

The HSE will provide the evidence base within its business case for all new investment proposals.

The HSE will ensure that population, clinical and other individual interventions are put into practice (e.g. life saving anti-clotting treatment in the shortest possible time after a heart attack, evidence based protocols for the management and control of infectious disease outbreaks).

The HSE in planning hospital services will ensure best outcomes are achieved by reconfiguring certain hospital services to ensure that a critical mass of patients is treated to maximise patient outcome (e.g. breast cancers, management of paediatric cancers, major vascular surgery).

The HSE will develop an internal HTA function to mirror that of HIQA.

The HSE will support the Health Information and Quality Authority (HIQA) in conducting Health Technology Assessment (HTA).

In utilising HTA the HSE will identify areas for disinvestment so that inefficient and ineffective products and services will be discontinued.

4. Making choices for health investment

In a population health approach, investment is directed to those areas that have the greatest potential to positively influence health. It also uses the best evidence available to demonstrate return on investment of interventions.

Formal needs assessment is a key element in a broader process in determining the appropriateness of investment and includes the objective identification of needs on the basis of best evidence and consultation with service providers and users and the public.

Because there are so many areas in health which are worthy of investment, priorities have to be identified on the basis of anticipated outcomes and value for money. Formal needs assessment therefore has the benefit of making the planning process more explicit.

Actions

The HSE will allocate resources based on appropriate investment portfolio criteria and processes that will include best evidence and cost effectiveness, demonstrated integration, needs assessment and consultation and a balance between short, medium and long term initiatives and programmes.

The HSE will allocate resources to facilitate cost effective quality of life measures e.g. transplantation versus dialysis.

The HSE will invest in cost effective near patient diagnostic facilities.

The HSE will prioritise the introduction of the most cost effective vaccination programmes.

All HSE directorates will prioritise the introduction of best evidence cost effective interventions e.g. smoking cessation services in hospital and community settings.

The HSE will prioritise and invest in screening programmes that are evidence based and meet the best international quality standards e.g. diabetic retinopathy services.

5. Measuring and demonstrating the return for investment in health and social care services

The HSE has an obligation to demonstrate that investments in health

and social care services are appropriately measured and evaluated so as to demonstrate clear cost effective outcomes.

This can be achieved by ensuring that specific and measurable health outcome targets are agreed in advance of the funding and that appropriate Key Performance Indicators (KPI) are put in place.

The audit of Building Healthier Hearts, the Cardiovascular Strategy, demonstrated significant health and social gain had been achieved through implementing the strategy. Similarly, in the implementation of the newly published Cancer Control Strategy, 5 year survival rates for different cancers will be monitored and compared to the level of investment provided for cancer services.

Actions

The HSE will critically evaluate and undertake services reviews to be better informed as to whether to further invest or discontinue services as appropriate. For example, the Best Health for Children Review of child health screening led to the discontinuation of some services and the development of evidence based protocols for other aspects of the services.

The HSE will continually evaluate bed utilisation in the acute settings to ensure appropriate use of resources and provision of care.

All directorates in the HSE will measure and demonstrate the degree of health and social return from the investment committed.

6. Shifting the balance from hospital to primary care and health promotion

In order to reorient health services we need to shift the balance from hospital to primary care and health promotion. In this context there is a need to develop and provide high quality, integrated, evidence based clinical and curative services at the appropriate level and setting.

Equally important is the need for a greater emphasis on the provision of health promotion and prevention services which support individuals and communities in a more holistic way.

This shift is an essential component to achieving the objectives of the HSE Transformation Programme and acknowledges the demonstrated connections between health and broader social, political, economic and physical environments.

Actions

The HSE will through programme 2 of the Transformation programme shift the balance to, and develop, primary care.

PCCC will take account of the HSE Chronic Illness Framework in the design, development and implementation of primary care teams.

The HSE will ensure that health and social care services are delivered at the lowest level of complexity.

All directorates will ensure that they provide information, training and services which facilitate patient self management.

All directorates will ensure that they provide information, training and services to promote health.

7. Integrating services across the continuum of care

Integrating services is critical for the HSE both internally between the various service directorates and externally between other agencies.

At present it is recognised that services are not sufficiently integrated in the HSE. Delivery of fragmented health care results in reduced health outcomes and less than optimum care. There is clear evidence that integrated seamless services maximise individual and population health outcomes

Many people who receive services from the HSE, (e.g. older people and children experiencing disadvantage) may only achieve best outcomes if the services they receive from the HSE are well integrated with those of other agencies e.g. local authorities and Departments of Education & Science and Department of Social and Family Affairs.

Actions

The HSE will ensure that an integrated framework will underpin all directorates for the provision of health and social care services based on a population health approach

The HSE will develop an integrated approach in the prevention and management of chronic illness encompassing:

- Leadership in tackling the determinants of health,
- Health promotion to ensure the best possible health for the population,
- Prevention strategies to address the risk factors,
- Early detection in the appropriate setting,
- Self management,

- Continuing and specialist clinical services in the appropriate setting.

The HSE will ensure that all directorates work in an integrated manner to develop clinical care pathways for chronic illness

8. Proactively engaging and working with other sectors to improve health

Working in partnership within the HSE and with sectors outside the HSE is a key component of a population health approach. Effective partnerships need the right partners, the right processes and need to be focused on health outcomes. These partnerships can be practical and strategic and developed at local, area and national level as appropriate

Actions

The HSE will collaborate with the Department of Health and Children and with other sectors that have a key role to play in overall health status (e.g. other government departments, local authorities, local county development boards, the Irish Sports Council).

The HSE will proactively engage with the Government interdepartmental forum to improve health by addressing the key determinants

The HSE will work in partnership with the Department of Education and Science to promote health in education settings.

The HSE will work in partnership with the Road Safety Authority to deliver on the national strategy.

The HSE will actively engage with the community and voluntary sector in considering the reorienting of key

services for socially excluded communities.

9. Engaging the population on the issue of their own health

Engaging service users, patients and the wider population has many benefits. An informed and articulate population is better placed to manage their own health, to take decisions that will protect and improve health and to engage effectively with the HSE in discussions on health and social well being and the services provided.

Consideration will be given to enhancing populations and individuals knowledge about options, health conditions, individual personal health status, individuals' values and preferences.

Actions

The HSE will work to empower patients, health service users and the wider population to engage in activities to promote, improve and protect health by improving self efficacy and health literacy.

The HSE will constructively engage the public and patients in health service development and delivery. This involves, amongst other things, measuring patient satisfaction, a statutory system of complaint handling; involvement of individuals and families in their own care; and the participation of the community in decisions regarding health and social services.

PCCC will engage with local communities on primary care needs assessment.

The HSE will further develop evidence based social marketing programmes.