



Case Study: Solutions for Public Health

Conducting an Inequalities Review for the NHS England Specialised Services team in the East of England

As commissioning responsibility for many specialised services has been delegated from NHSE to ICBs, the Public Health team within the NHSE East of England region has been working closely with ICB colleagues to ensure that equality of access to services for all demographic groups is considered when setting ICB commissioning strategies.

The Solutions for Public Health team (SPH) were commissioned to support them in this by completing a review of current levels of access to services in the six ICBs within the EoE, highlighting any apparent differences these between geographic areas and between demographic groups.

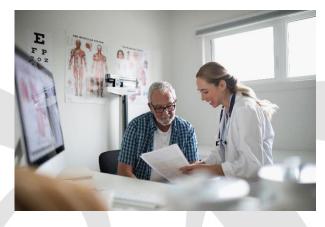
As public health specialists within Arden & GEM's Health and Care Transformation consultancy, Solutions for Public Health (SPH) worked closely with Business Intelligence (BI) colleagues to produce the requisite data and to carry out detailed analysis of these from a public health perspective.

Findings described areas of apparent inequality and suggested possible reasons for these. The report has been shared by NHSE with ICB colleagues to help inform commissioning decisions

The challenge

The government has placed focus on their three strategic shifts: moving care from hospital to community, from sickness to prevention, and from analogue to digital, with one of the aims of these being to tackle health inequalities. Addressing health inequalities within specialised services was identified as being critical to achieving equitable healthcare access and outcomes for the population of the East of England (EoE).

The delegation of specialist services to ICBs presents a unique opportunity for the systematic review of existing



inequalities in care related to specialised services, to identify areas where ICB commissioning strategies as they are developed can work to reduce these.

Our approach

The Inequalities Review was based on new Tableau-based reporting developed by the AGEM BI team, working closely with NHSE public health colleagues to ensure that this met their needs. This allowed comprehensive data relating to specialised services activity to be cut in multiple ways and drilled down into, and was built in such as way as to be reusable either for EoE and/or for other areas across England.

To support analyses, the EoE Public Health team grouped the national SS service lines into six Service Line Groups (SLGs) based on types of condition as well as patterns of provision and local networks. The Inequalities Review focussed on five of the groups and was based on inpatient and outpatient Secondary Users Service (SUS) data for 2023/24. (The sixth SLG, Mental Health related conditions, was not included because the relevant data are captured on a separate database and not on SUS.) The Service Line Groups included were:

- Oncology
- S Cardiovascular, Cardiothoracics and Respiratory

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- Neurology, Neurosciences, Musculoskeletal, Trauma and Ophthalmology
- Renal, Gastroenterology, Endocrinology, Metabolic, Hepatology and Maternity
- Immunology, Rare Genetic Disorders, Dermatology, Haematology and Infection

The data were analysed in depth by SPH Public Health Consultants. The Inequalities Review report identified and analysed the high level inequalities in specialised services across the EoE, focusing on demographic and geographic disparities. It provided a detailed review of service use by population characteristics, such as age, sex, ethnicity, and deprivation, including out of area treatment and comparisons of specialist and overall NHS service usage.

Outcomes

There are over six million people who reside in the EoE who may need to access NHS health care. In 2023/24, over 2.8 million EoE NHS patients were treated in hospital. Approximately 350,000 (12%) of these were treated by specialised services, of whom many will also have been treated by other (non-specialised) NHS hospital services that are routinely commissioned by ICBs. Examples of key finding included that:

- There were statistically significant differences in age sex standardised rates of patients treated by specialised services across the six EoE ICBs
- Of the five Service Line Groups, three groups treated over 300,000 of all specialised services patients treated in 2023/24: Oncology; Cardiovascular, Cardiothoracics and Respiratory, and Neurology, Neurosciences, Musculoskeletal, Trauma and Ophthalmology
- Across all Service Line Groups there was noticeable variation between the ICBs

In addition, a discussion of opportunities and policy implications related to reducing health inequalities was presented.

Areas for further work were suggested, for example:

 Carrying out a deeper, more detailed analyses on a subset of patients, for example prioritising a

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small number of service lines, or closely related groups of service lines, that both treated the largest number of patients and also appear to have the most potential inequalities between population groups. Alternatively, the focus could be on specific patient groups, for example people from more deprived quintiles or from ethnic minority groups

- Carrying out qualitative work with patients and clinicians such as surveys, interviews and workshops to understand provider and service user experiences, perspectives and priorities.
- The adoption by ICBs of a small number of high level metrics that could be used to monitor inequalities, and establishing the baseline before changes are made. A number of metrics were proposed.

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