

<u>01</u>

Leadership for Systemwide Change

April 2025



Centre for Population Health

info@centreforpopulationhealth.co.uk

CPH Team Today



Prof Durka Dougall



Durka is an award-winning influential BAME health and care leader in UK with over 25 years' experience. Not only is she the founder and CEO of the Centre for Population Health, but she is also the Acting Deputy Chair for an NHS Acute and Community Trust, the Chair of The Health Creation Alliance, a Professor of Population Health and Public Health supporting University College London and University of East London, and a leadership development expert supporting clinical, board and system development across UK and internationally. For the last 10 years,

Durka has been leading efforts to develop leadership capability across UK and more globally across a variety of roles. She has supported many individuals, boards of organisations, and systems to progress their efforts for population health and tackling health inequalities and is proud to be recognised as a trusted leader in this space. Durka is proud of her Sri-Lankan heritage and of being Mum for her two teenage children.

Samira Ben Omar



Samira has over 20 years' experience of working in the NHS, Local Authority and Community & Voluntary Sectors. She is an experienced consultant with a specialist expertise in Equality, Health Equity, Community Led Collaborations, and System Change.

She has facilitated large scale national programmes and local grassroots community networks. She is the cofounder Community Voices – a social movement for change focusing on social infrastructures during and post COVID. Some of Samira's clients include NHS England, The King's Fund, and Grenfell United.

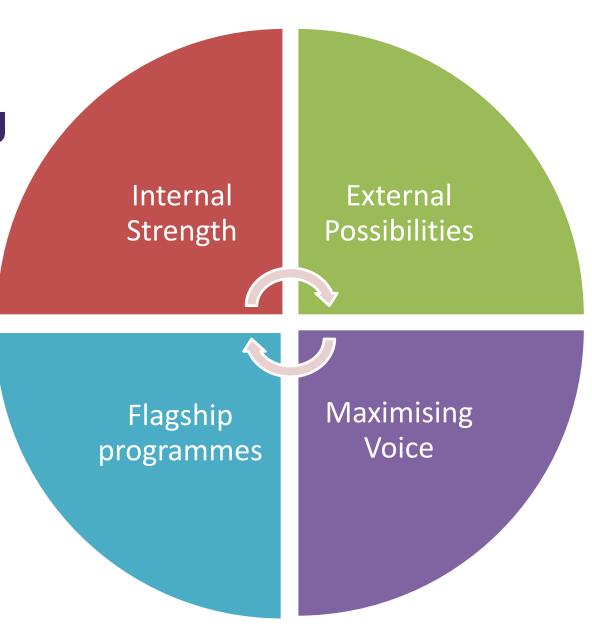
Samira is a regular contributor to the WRES London and Regional England Seniors Programme. She was named as one of the 50 most influential Black, Asian and Minority Ethnic People in Health by the HSJ in 2022, 2023 and 2024.



Centre for Population Health



- Cross-sector Implementation-focused Think Tank
- Started in July 2023 still relatively new and growing
- 20 associates, 226 members, 20,000 visitors
- Helping to create a better and more equal future by
- Supporting others
 - Developing leaders
 - > Improving lives.
 - Creating equity
- AND by being the change we wish to see
 - working together as equals
 - > creating ladders
 - > shift power to staff and communities
 - > Focus on those more under-served







Centre for Population Health is delighted to launch three NEW masterclasses for 2025 – LIMITED PLACES AVAILABLE, including 3 places at 100% bursary on **NEW OFFER **

each masterclass for charities.

Health & Care Leadership Masterclass

"Developing Leaders"

Leadership is a key skill for anyone involved with delivering quality health and care. But what does it mean to be a leader in the modern health and care context?

This virtual masterclass helps participants think beyond traditional paradigms to explore key skills for thriving as a leader in the modern health and care landscape. They will learn about topics such as authentic leadership, resilience for safety, community centred approaches, and leading through uncertainty, and consider practical application in their own roles and contexts too.

25th June 2025 1330-1630

Population Health Masterclass

"Improving Lives"

Population health is a health and care priority. But what it is? How do you approach it? What is system working for population health?

This virtual masterclass provides participants with an opportunity to work with expert facilitators to better understand what population health is, why it is important, how it links to other concepts such as population health management or public health, and to consider the role of different partners and sectors for system working in helping to deliver this in practice.

29 April 2025 0930-1230

Health Inequalities Masterclass

"Creating Equity"

Health inequalities are unfair and avoidable differences that exist between & within population groups. They are rightly needing focus. But how can we tackle them?

This virtual masterclass enables participants to explore approaches to tackling health inequalities, its fit into a population health approach, and how it relates to concepts such as equity, diversity and inclusion (ED&I). They will explore the role of data and insights and start to consider how best this can be used to aid you as a leader for creating equity.

SCAN ME

30 Sep 2025 0930-1230

For more information and any bookings please visit <u>www.centreforpopulationhealth.co.uk</u> or scan the QR code. For any queries email info@centreforpopulationhealth.co.uk

Today's Agenda



There is insufficient representation across many health and social care organisations, particularly at a senior level, including on NHS boards, in healthcare teams, and on research teams. Even when under-represented groups are included 'around the table' it takes effort to enable true conditions of inclusion which our research has shown is still poorly understood. This impacts the quality of research, improving study design, community participation, and thus can ultimately lead to better health and care outcomes.

Today we ask: What does it mean to create a diverse and representative environment where health and equity can truly flourish? It is an interactive, positive and practical action-focused session so we invite you to actively contribute and work together to explore our current practices to identify actions we can all take leaving today. The outline for the time use is:

1000-1030	Tea, introductions / networking
1030-1125	Inclusion for Population Health and Equity: Part1 - Exploring the Lived
	Reality.
1125-1135	Break
1135-1230	Inclusion for Population Health and Equity: Part 2 - Making it a Reality.
1230-1330	Lunch & networking



Ways of Working



<u>06</u>

- Cameras on, phones off
- Contribute proactively more you put in, the more you get out
- Listen deeply and openly
- Non judgemental
- Confidentiality nothing attributed to any individual or organisation
- See the value in the content, group and working with facilitators
- Get out of it what you want (including more breaks if you need)
- Keep it practical what does it mean for you in your practice?



Who is in the Room? 1 POPULA HEALTH



07

- Your name
- > Your role
- What brings you here today?

Why are we doing this?

To help you to get to know each other better

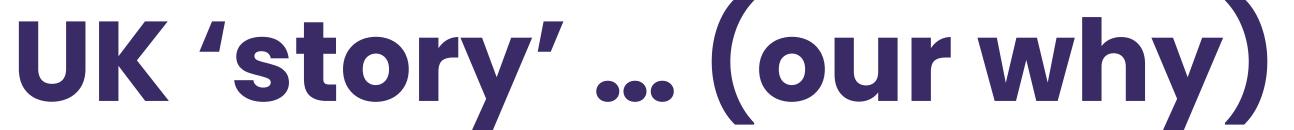
To help you to feel safe to work with each other today

To help you to understand the assets you bring for each other



Inclusion for Population Health and Equity – the lived reality ...

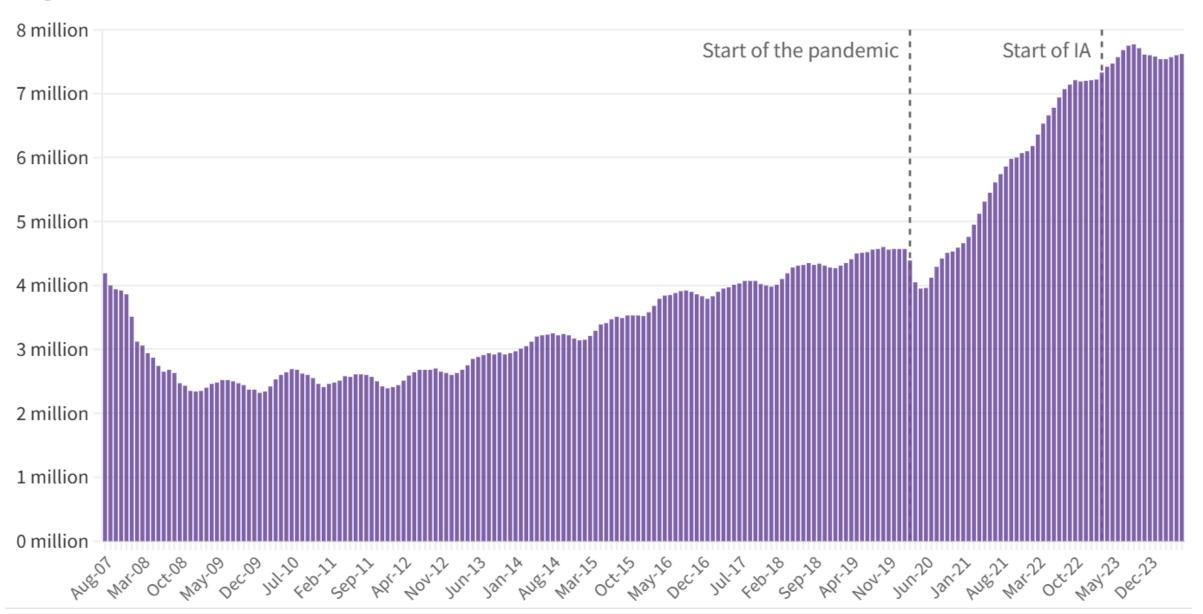






Total NHS waiting list for consultant-led elective care

August 2007 to June 2024



- the waiting list stood at 7.62 million cases, consisting of approximately 6.39 million individual patients waiting for treatment
- around 3.13 million of these patients have been waiting over 18 weeks
- almost 302,700 of these patients have been waiting over a year for treatment
- a median waiting time for treatment of 14.3 weeks – almost double the pre-COVID median in June 2019.





Four Key Shifts



Based on this understanding, there are four helpful shifts happening towards population health for creating a better, more sustainable and equitable model of health and care delivery in UK.

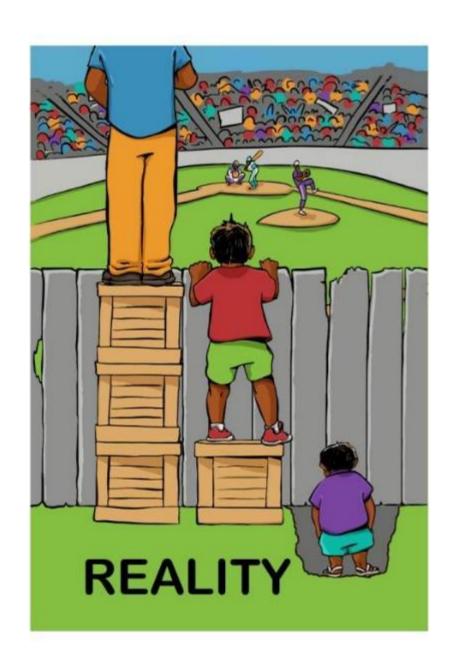
From	То
III Health (negative)	Health (positive)
Treatment only (reactive)	Prevention (proactive)
Individual person & services (silo)	Whole person, communities & systems (holistic)
Assumed equal (risks worse outcomes)	Tackling Inequality (improve outcomes for all)



POPULATION HEALTH

What are health inequalities?

Health inequalities are unfair and avoidable differences in health across the population and between different groups within society. These include how long people are likely to live, the health conditions they may experience and the care that is available to them. (NHS England)





Types of health inequalities? (UKHSA 2019)



People in the bottom 40% of the income distribution are almost twice as likely to experience poor health outcomes compared to those in the top 20%. Poverty is associated with worse health outcomes. This is especially the case for persistent poverty. (Health Foundation, 2020)

In 2020, there were an estimated 688 homeless deaths in England and Wales. Even more worryingly, the average life expectancy among those experiencing homelessness was 45.9 years for a male and 41.6 years for a female, compared to 78 years in men and 82 years in women who are not homeless. (Shelter, 2022)

Socio-economic/ deprivation

e.g. unemployed, low income, deprived areas

Inclusion health

e.g. Homeless, Gypsy, Roma and Travellers, Sex Workers, People in prisons Equality and diversity

e.g. age, sex, race

Geography

e.g. urban, rural, seaside towns

The risk of maternal death is almost **four times higher** among women from black ethnic minority backgrounds compared with white women in the UK. (MBRRACE-UK data, 2021).

Coastal communities, the villages, towns and cities of England's coast, have some of the worst health outcomes in England, with low life expectancy and high rates of many major diseases. For example, Blackpool has the worst life expectancy in the UK despite great efforts by local health and civic leaders. (CMO Report, 2021)



... Intersectionality



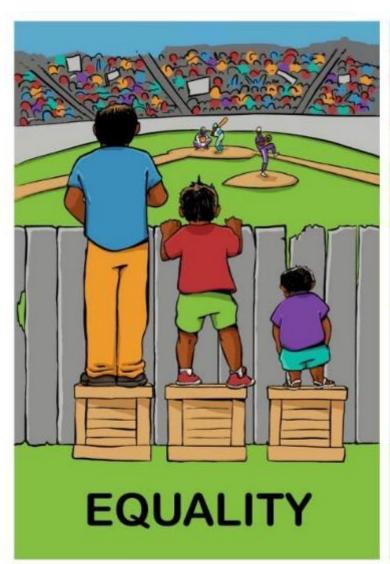
Physiological impacts Health and Wellbeing · High blood pressure High cholesterol Anxiety/depression Health behaviours Smoking Diet Alcohol Wider determinants of health Psycho-social factors Income and debt Isolation Employment / quality of work Social support Social networks Education and skills Housing Self-esteem and self-worth Natural and built environment Perceived level of control Access to goods / services Meaning/purpose of life Power and discrimination



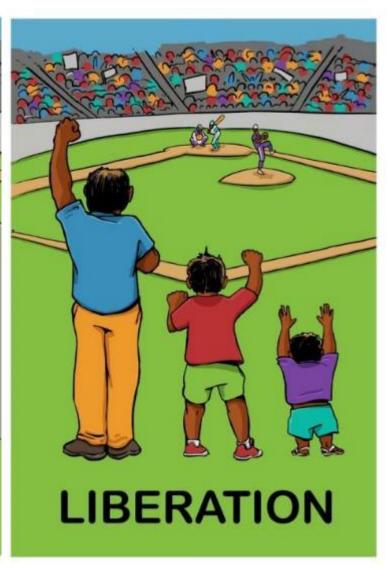
What can be done?



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- Awareness
- Re-design for equity
- Remove barriers
- Requires a positive choice to see and act



Four Key Shifts



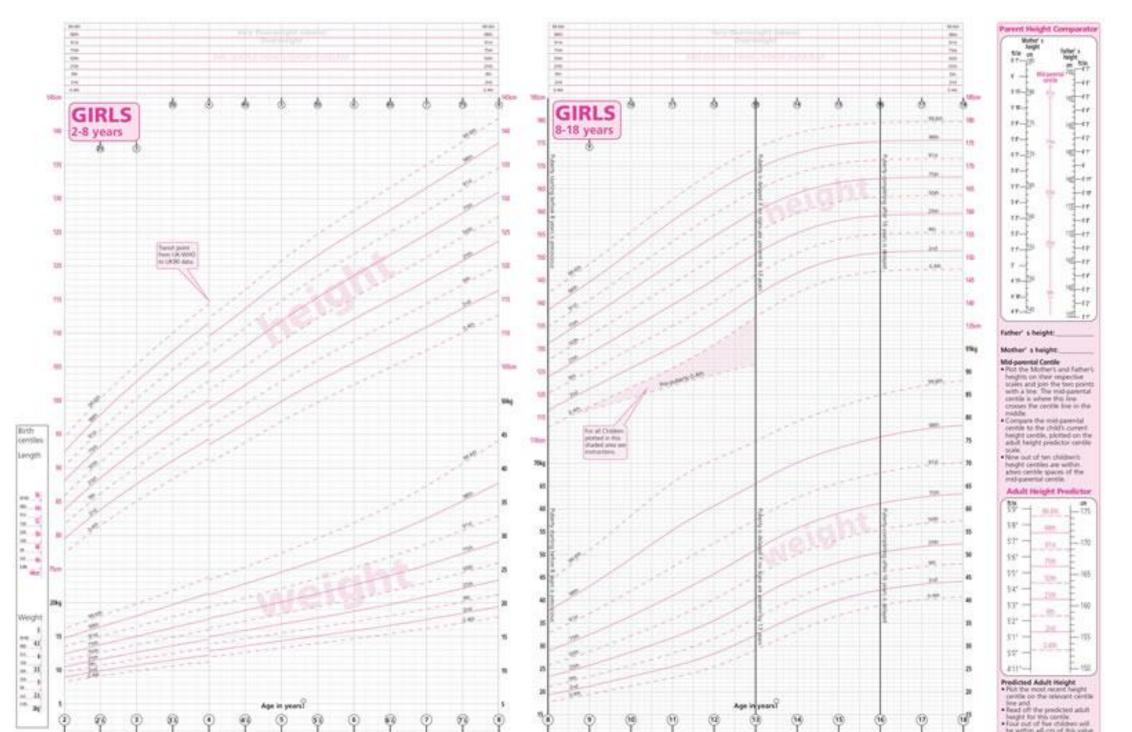
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But need to heed learning from past (1)





Cohort Relevance & **BAME**

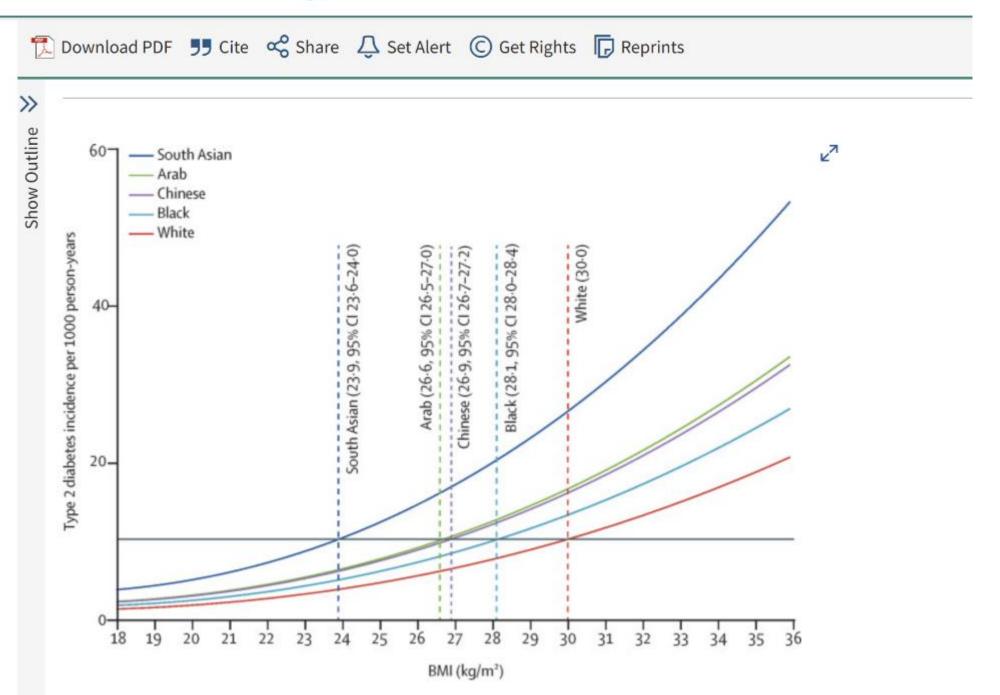
Widens health inequalities until understood and actioned



But need to heed learning from past (2)



THE LANCET
Diabetes & Endocrinology



Risk Relevance& BAME

Ethnicity-specific BMI cutoffs for obesity based on type 2 diabetes risk in England: a population-based cohort study - The Lancet Diabetes & Endocrinology

Widens health inequalities until understood and actioned



But need to heed learning from past (3)



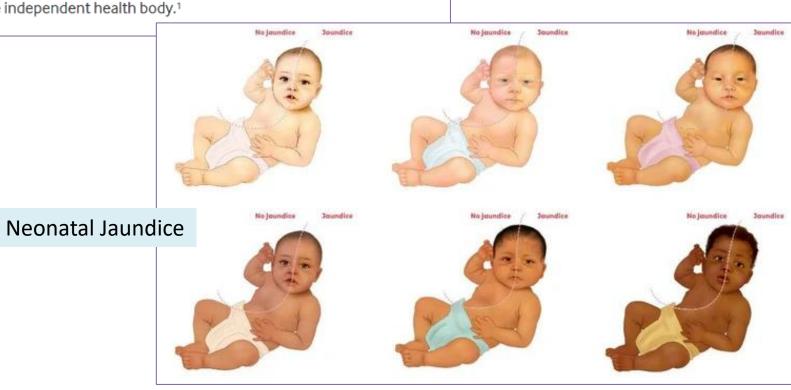
Newborn health checks are unreliable for black and Asian babies, review finds APGAR BMJ 2023; 382 doi: https://doi.org/10.1136/bmj.p1620 (Published 13 July 2023) Cite this as: BMJ 2023;382:p1620 Related content Metrics Responses Article Jacqui Wise Author affiliations > Neonatal assessments, including the Apgar score, are "not fit for purpose" for ethnic minority babies, the NHS Race and Health Observatory has said. Bias inherent in neonatal checks can lead to inaccurate assessments, late diagnosis, and poorer outcomes in nonwhite babies, says a review commissioned by the independent health body.1

Diagnostic **Ability & BAME**

Newborn health checks are unreliable for black and Asian babies, review finds | The BMJ

Widens health inequalities until understood and actioned





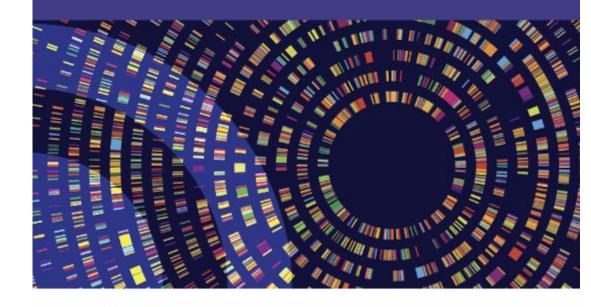
But need to heed learning from past (4)





ETHNIC INEQUITIES
IN GENOMICS AND
PRECISION MEDICINE





PredictionCapability &BAME

Ethnic inequities in genomics and precision medicine review report
- NHS – Race and Health
Observatory

Widens health inequalities until understood and actioned

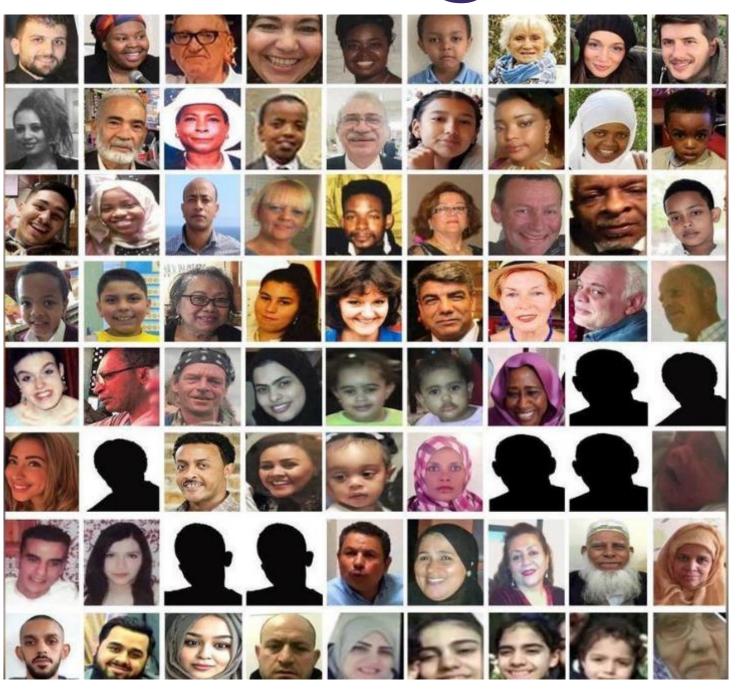




But need to heed learning from past (5)









Racism & **BAME**

Publication of the Grenfell Tower Inquiry phase 2 report - GOV.UK

Widens health inequalities until understood and actioned



Also learning from past (6)

"Given the scale of the AI revolution, the people leading this transformation must be representative of society at large. One key part of this is ensuring that women are active leaders in this technological revolution." IBM, (2024)

"Women make up only 22% of Al professionals globally." WEF, (2022)

Women in Digital & AI Leadership within the NHS

From Barriers to Breakthroughs

A summary report by Centre for Population Health (CPH) outlining the findings of independent research commissioned by Health Innovation Kent Surrey



This is not just about gender – it is about equity – and how much more there is still for all of us as researchers, as individuals and a collective, as leaders, to challenge, question, understand, explore and to established for equity







Taking Action for Equity

Our CPH Framework for Transformation (right) helps people to explore their own practice and to identify areas for more work / specific actions to take.





Group Work



In small groups lets explore your experiences:

- What does inclusion in research really look like and mean?
- Where do you already do this well or not so much?
- What have you been learning about how to do this well in practice as researchers?
- What more is needed from each of us as researchers and from us all as a research community?

We will invite you to share headlines from your discussions with the whole group



Break (1123-1135)



Inclusion for Population Health and Equity – making it a reality ...



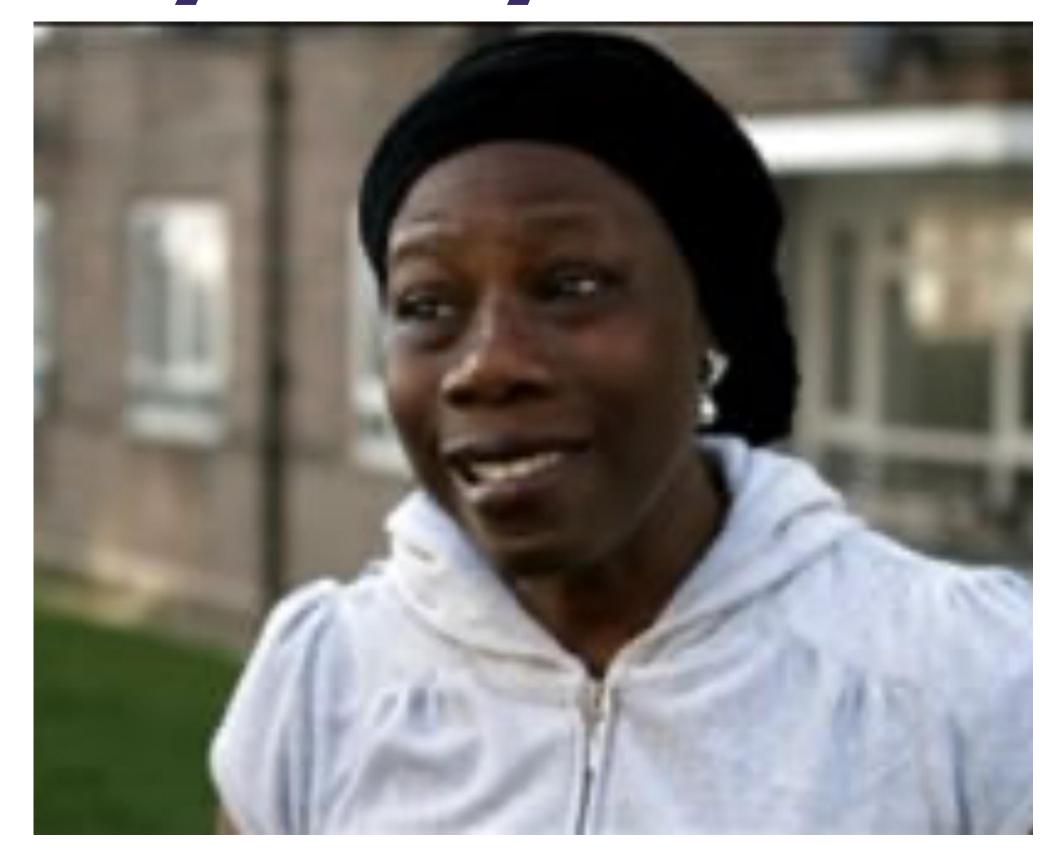
The Story of Community
: what is possible and what is needed



Community Story



Community **Champions:** Personal **Journey**





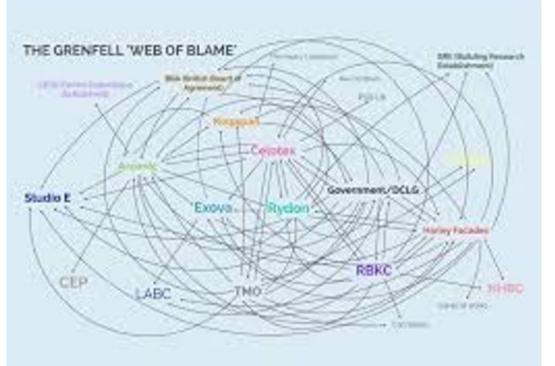
Research Story



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Grenfell Service
Co-Production
Work











Group Work



<u>30</u>

10 min discussion and 5 min reflections from the two stories.



Leadership Story

Using our CPH Framework for Transformation, please explore your own practice and identify areas for more work / specific actions to take.

Remember - an equal offer is not an equitable offer. So,

- How will you step into this through all that you do?
- What is needed?
- What gets in the way?
- What one thing do you commit to as an action for this?





Mentimeter



- > Thank you for joining us today
- > Please take a few minutes to complete this short feedback form – we will use it to inform next steps
- Why not join our mailing list and stay in touch?
- > Twitter handles and any links to share
- If you would like to find out any more about our work at Centre for Population Health or would like a place on one of our masterclasses please email Durka (durka@centreforpopulationhealth.co.uk)





THANK YOU



For further information, help or support, please contact us on the details below or see our website www.centreforpopulationhealth.co.uk

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