



**Integrated
Care System**
Nottingham & Nottinghamshire

Making place- based integrated care a reality

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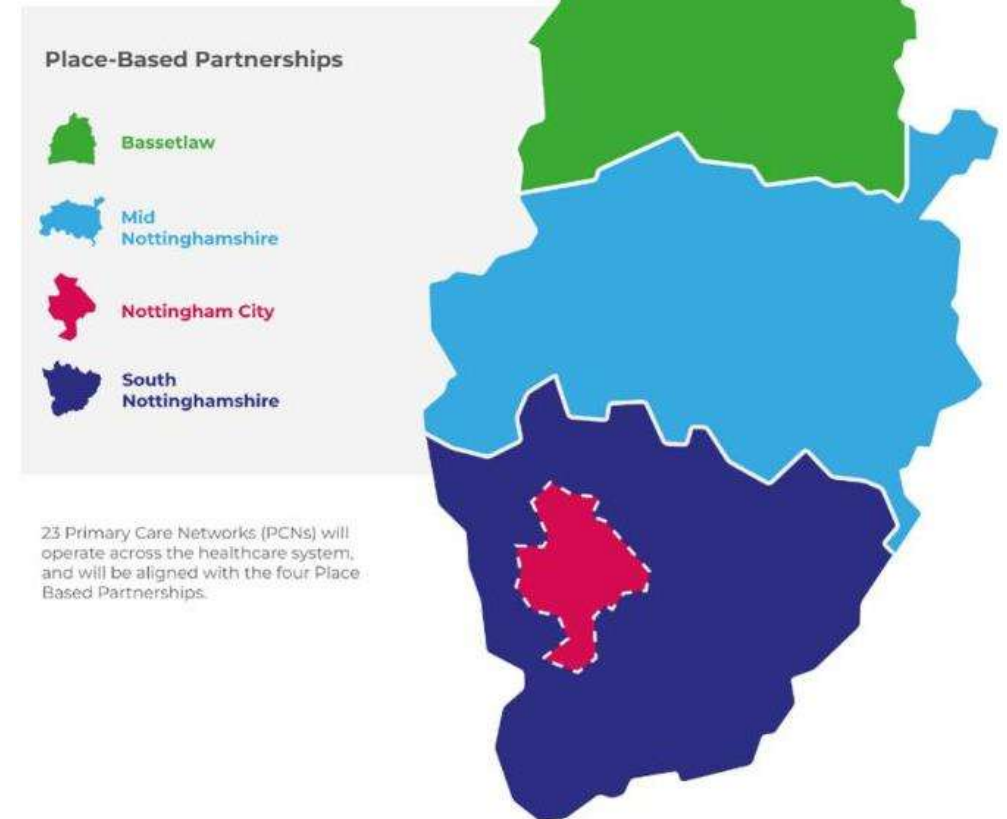
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The ethos of place



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- Key purpose of places is the design and delivery of integrated care – population specific and local relationship dependent
- Broad partnerships – health not just healthcare
- Leadership roles shared across health and care
- Some defined responsibilities, linked to resource alignment (ICB and Council)
- Maximise impact by using collective assets and community assets
- Places determine local priorities that will contribute to health improvement / reducing inequalities / help develop new ways of working – within a strategic framework
- Shared objective of population benefit is the key focus – not just exporting current transactional approaches
- Respect the roles of Health and Wellbeing Boards and influence Integrated Care Strategy



Data driven and targeted interventions

PCN Neighbourhood	BACHS	Clifton & Meadows	Bulwell & Top Valley	Radford & Mary Potter	Nottingham City East	Bestwood & Sherwood	Ashfield North	Mansfield North	Rose wood	Ashfield South	Byron	Newgate	Larwood & Bawtry	Sherwood	Retford And Villages	City South	Eastwood/ Kimberley	Synergy Health	Newark	Stapleford	Arnold & Calverton	Arrow Health	Beeston	Rushcliffe North	Rushcliffe Central	Rushcliffe South
Number of patients	61,680	34,203	45,878	47,166	65,793	54,040	51,540	59,164	50,717	40,460	38,408	30,076	40,191	62,794	53,960	38,198	37,549	30,275	78,719	22,086	33,759	44,875	49,501	41,925	52,570	42,646
IMD	2.4	2.5	2.6	2.7	3.0	3.5	3.9	4.1	4.1	4.3	4.5	4.6	5.1	5.3	5.3	5.6	5.9	5.9	6.0	6.1	6.5	6.6	7.4	8.5	8.8	9.0
Income	2.5	2.9	2.7	3.5	3.2	3.5	4.1	4.5	4.5	4.3	4.3	5.1	5.4	5.5	5.8	5.9	5.5	5.4	6.3	5.7	5.9	6.0	6.6	7.8	8.0	8.2
Employment	2.4	2.9	2.4	4.1	3.2	3.4	3.3	3.6	3.8	3.6	4.1	4.0	4.5	4.4	4.9	5.9	4.6	5.0	5.8	5.3	5.1	5.4	6.6	7.5	7.9	8.1
Education, Skills and Training	2.6	2.2	2.5	2.7	3.2	4.6	3.1	3.3	3.4	3.2	3.3	4.1	4.5	4.3	4.9	6.0	4.7	5.0	5.4	4.9	5.5	5.7	6.9	7.8	9.4	8.2
Health and Disability	2.5	2.2	2.4	2.2	2.7	3.0	3.0	2.9	2.9	3.6	4.1	3.2	3.5	4.4	4.6	4.4	5.5	5.8	6.4	6.1	6.1	6.3	6.8	8.7	8.5	9.0
Crime	3.0	3.9	3.6	2.3	4.0	3.7	4.3	5.0	4.4	5.0	4.9	4.9	5.1	6.7	6.4	6.1	6.0	6.6	6.6	5.0	6.8	6.7	7.5	9.1	8.3	8.9
Living Environment	4.2	4.5	5.3	2.4	3.4	3.6	7.2	7.2	6.8	8.0	7.5	7.2	8.0	8.0	6.1	4.5	7.2	6.2	5.8	5.4	7.5	6.6	5.6	8.4	6.6	7.6
Housing and Services	4.9	4.7	4.9	3.8	4.7	6.0	6.7	6.4	6.5	7.0	6.4	6.9	6.6	6.5	5.1	5.2	8.4	7.7	5.7	9.3	7.3	7.4	8.4	6.4	7.9	7.3
Obesity	21.5%	21.6%	22.8%	17.5%	17.7%	18.7%	24.6%	22.9%	20.6%	24.4%	21.4%	21.5%	22.3%	22.3%	21.7%	15.9%	21.4%	20.0%	18.2%	21.7%	19.0%	17.9%	16.7%	17.5%	12.9%	16.4%
Current smoker	16.9%	17.2%	18.6%	17.0%	16.9%	13.9%	15.0%	13.9%	16.7%	14.3%	13.1%	16.3%	13.1%	12.6%	11.7%	9.8%	10.9%	13.0%	12.5%	12.5%	11.0%	11.0%	9.9%	8.8%	6.0%	7.7%
Hypertension	16.8%	16.7%	16.4%	16.9%	14.7%	13.9%	14.8%	15.4%	13.6%	14.0%	13.9%	11.6%	14.3%	14.8%	13.1%	13.9%	13.3%	13.3%	13.1%	14.8%	12.9%	13.2%	13.2%	12.1%	12.0%	12.2%
Diabetes																										
Type 2	7.9%	7.2%	7.1%	10.4%	7.3%	6.2%	6.4%	6.3%	6.2%	6.4%	6.0%	6.0%	6.6%	6.0%	5.4%	5.4%	5.6%	5.1%	4.8%	5.8%	4.9%	4.8%	5.0%	4.0%	4.2%	4.0%
COPD	3.1%	3.0%	3.0%	2.2%	2.7%	1.9%	2.4%	2.3%	2.4%	2.4%	2.2%	3.3%	3.2%	2.2%	1.9%	1.6%	1.9%	1.7%	1.4%	1.9%	1.6%	1.4%	1.5%	1.3%	1.0%	1.0%
Heart Failure	1.6%	1.4%	1.3%	0.9%	1.3%	1.2%	1.5%	0.9%	1.1%	1.0%	1.0%	1.1%	1.8%	1.0%	0.9%	0.8%	1.4%	0.9%	1.0%	1.2%	0.7%	0.9%	1.1%	0.8%	0.8%	0.9%
Stroke	1.6%	1.7%	1.6%	1.4%	1.5%	1.5%	1.4%	1.3%	1.3%	1.3%	1.4%	1.2%	1.4%	1.4%	1.1%	1.2%	1.3%	1.4%	1.1%	1.0%	1.4%	1.2%	1.2%	1.2%	1.1%	1.1%
CHD	3.6%	3.6%	3.5%	4.2%	3.3%	3.3%	3.5%	3.4%	3.5%	3.2%	3.1%	2.8%	3.6%	3.5%	2.7%	3.3%	3.1%	2.9%	2.8%	3.0%	2.8%	2.7%	2.7%	2.6%	2.6%	2.4%
Cancer	3.9%	3.7%	4.1%	3.2%	3.8%	3.8%	4.4%	4.0%	3.8%	4.0%	4.3%	4.0%	4.1%	4.2%	4.1%	4.0%	4.3%	4.4%	4.5%	4.2%	4.3%	4.2%	4.4%	4.3%	4.4%	4.2%
Serious Mental Illness	1.0%	0.9%	0.9%	1.5%	1.4%	1.0%	0.7%	0.6%	0.8%	0.7%	0.5%	0.7%	0.7%	0.6%	0.5%	0.7%	0.6%	0.7%	0.5%	0.6%	0.7%	0.6%	0.7%	0.3%	0.6%	0.4%
Moderate/ Severe Frailty	3.9%	2.1%	1.5%	4.0%	3.4%	2.0%	1.7%	2.2%	2.0%	1.9%	1.7%	1.6%	3.6%	2.5%	2.0%	2.6%	1.8%	5.5%	1.7%	1.9%	2.0%	1.3%	2.4%	1.7%	1.2%	1.0%
NELs 1+ LOS (age-adjusted) -TOTAL	8,004	8,400	8,227	8,869	7,730	7,076	7,586	7,295	7,291	7,312	7,496	5,917	6,427	6,726	5,246	6,975	6,991	6,653	5,698	6,637	6,453	6,400	6,141	5,811	5,126	5,169
NELs 1+ LOS (age-adjusted) - Cancer	282	267	309	300	265	226	210	200	206	220	263	188	187	169	218	232	240	202	187	267	266	278	176	215	224	207
NELs 1+ LOS (age-adjusted) - CVD	1,070	1,125	1,081	1,299	1,134	907	947	917	933	913	1,043	809	891	846	813	994	989	967	789	948	868	882	839	801	761	713
NELs 1+ LOS (age-adjusted) - COPD	576	542	550	465	360	379	447	382	366	401	448	316	382	336	233	279	302	305	209	288	327	281	192	130	83	119
Avoidable deaths (age-adjusted)	355	329	349	429	380	296	323	326	294	294	278	300	251	221	207	228	240	274	235	233	203	219	235	163	171	165
Av deaths (age-adjusted) - Cancer	92	97	109	97	90	89	99	106	87	85	89	91	85	61	78	54	72	84	80	74	74	83	69	64	56	65
Av deaths (age-adjusted) - CVD	103	110	93	124	107	92	77	93	68	84	78	88	63	66	57	61	76	70	64	60	54	65	64	39	56	43
Av deaths (age-adjusted) - COPD	23	19	21	32	26	17	26	19	27	17	17	12	17	11	14	18	8	16	9	-	9	-	10	-	-	-
Median age of death	78	83	80	74	76	81	80	79	81	79	81	80	81	81	82	82	81	81	81	80	83	83	84	83	84	84

We have launched a health inequalities investment fund, linked to our Integrated Care Strategy

Severe Multiple Disadvantaged and Alcohol Dependency

Nottingham City and South Notts SMD Infrastructure and Delivery Model

Nottinghamshire County Integrated SMD Clinical Team

Best Start in Life

Family Mentor Programme

Childhood Imms and Vaccs in Nottingham City

Obesity in Children and Young People

Integrated Community Working

Integrated Neighbourhood Teams Mid-Notts

Integrated Neighbourhood Teams Bassetlaw

Integrated Neighbourhood Teams South Notts

Community Hypertension

How can NICE help build place-based care?



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- Help sift complex evidence around integrated working and drivers of best outcomes – help us to target effort and resource
- Integrated products – where to standardise and where local factors and relationships have primacy
- Gold standard clinical care versus affordability and reality on the ground
- Make it practicable and aligned with political and other imperatives – not another competing agenda item
- We can learn from each other





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Thank you

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