

## The North East Alliance: Delivering Change, improving lives

### Background

Our health and wellbeing is shaped by a whole range of factors including, education, living and working conditions in addition to health and care services.


There is good evidence that investment in prevention is cost-effective and impact is most apparent when changes are implemented at scale. It can take time for benefits to be fully realised and demand on services continues to grow to meet people's immediate needs, many of which are preventable. Breaking this cycle is fundamental to improving population health while reducing health inequalities.

We are fortunate to have strong partnerships across public agencies, private and third sectors and communities in the North East with many examples of good practice and innovation to address this complex agenda. However, compounded by the pandemic, some of the population health challenges we are grappling with are significant and in places worsening. We cannot simply not do more of the same.

There is no single blueprint for a local population health approach. Learning and adapting from our experiences and that of others, leaders in the North East of Scotland, with support of the Director of Public Health, are looking at how we can create a system of public health learning across and within our partnership arrangements to reverse current trends. We have called this the North East Alliance in recognition of our collective responsibility.

The North East Alliance is not intended to be a governance group, as we have governance mechanisms embedded in our system already, but a forum for ensuring that we develop a learning system that explores our challenges together, tests solutions, and 'what works' is implemented at scale and at pace. Over the next three years we plan to work with a growing and diverse membership from across different sectors, communities and determinants of health. Through bringing our collective knowledge together with data and evidence we want to shape more powerful collective conversations and action to deliver our vision of thriving communities living fulfilled lives.

### In our first year we will:

-  **Strengthen the building blocks for collaborative working.** The name *North East Alliance* was selected as it signifies agencies coming together to undertake a mutually beneficial programme of work for a common goal while retaining their independence. As a North East Alliance our common goal is to ensure the durability of the North East with flourishing communities. We recognise that our success depends not just on what we will do but how we will interact together.

The Chief Executives / Chief Officers have agreed a draft set of principles to maintain the strengthened partnership working seen during a time of crisis such as the pandemic and recent storms. However, we recognise the work of the North East Alliance cannot be driven, shaped and agreed by executives. It needs ownership from across the partnerships. Over the next six months each Chief will test with their organisation and local partnership to further refine and develop how these principles of collaboration can be adopted. These principles have been developed from evidence, provided by the King’s Fund, on what has allowed other areas to tackle complex population health issues successfully.

## North East Alliance Principles

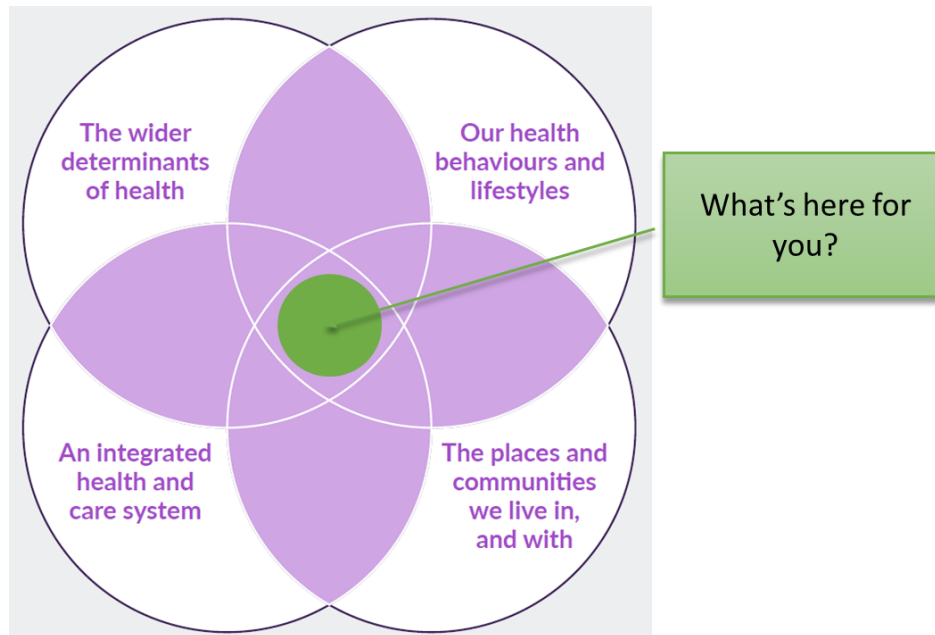
<p><b>I will... use my position</b></p> <ul style="list-style-type: none"> <li>🚩 Use my position, power and influence for North East wide objectives</li> <li>🚩 Use my networks for wider gains, constantly looking for opportunities to improve</li> <li>🚩 Proactively involve the community in finding solutions</li> </ul>	<p><b>I will... work with the North East family</b></p> <ul style="list-style-type: none"> <li>🚩 To promote a system mindset and to relentlessly focus on health inequalities at all levels</li> <li>🚩 Shift system conversations to focus on maximising wellbeing</li> <li>🚩 To better use and share data and allocate resources to support our ambitions</li> </ul>
<p><b>I will... help my organisation to</b></p> <ul style="list-style-type: none"> <li>🚩 Define success as outcomes for collective health goals, not solely organisational success and minimising unintended consequences</li> <li>🚩 Being clear on priorities, and using knowledge and data more consistently to support better outcomes, experience and value</li> <li>🚩 Work more with communities through equality, diversity and inclusion</li> </ul>	<p><b>I will... help sustain efforts over time</b></p> <ul style="list-style-type: none"> <li>🚩 By seeing ourselves as a family focused on being a healthier region, celebrating success and promoting local practice, support scale-up and sharing</li> <li>🚩 By helping create a collaborative system that rewards contribution to shared objectives not just organisational ones</li> <li>🚩 Helping flow to where it is most needed with communities, speaking up about equality, diversity and inclusion</li> </ul>

🚩 **Grow our membership through a shared vision for population health.** Our aim is to bring partners together to turn the tide on stalling life expectancy and widening inequalities. To do this we need to change the conversation and action from one that focuses on the individual’s behaviour / responsibility, or the role of the health service, to one that includes the wider determinants of health – the social, economic and environmental conditions that create/restrict people’s opportunities to lead fulfilling lives.


Initial work highlights our lack of shared understanding of how unequal our experience of good health is across the North East and that consistent application of available evidence requires commitment to wade through jargon-laden plans, documents and policies.

To develop a shared understanding and coherent action we are proposing to use the King’s Fund four pillars as a framework for action to improve population health. As an Alliance we will identify the areas that we need to work on together to deliver the pace and scale of change required alongside local incremental changes that could have a significant collective impact. Using this approach, we hope to connect central policy making with local realities.

## King’s Fund Four Pillars of Population Health



Over the next year we will build on our existing membership, attracting new members from across the public, private, third sector and communities. We aim to engage with new audiences to create momentum for change and develop a shared understanding of the issues and possible solutions. Our focus in year one is to engage on the four pillars approach, consider the evidence to support place-based approaches and aid our understanding of action to create better mental health for all.


**Deliver change.** The North East Alliance recognises the impact of substance use on the stalling of our life expectancy and widening inequalities and therefore a priority to accelerate change. There is widespread recognition that Scotland has a troubled relationship with substance use, causing damage to people, families, and communities in addition to contributing to violence and crime. In fact, this has been described as a public health emergency that requires a full scale, system wide response.

The Alcohol and Drug Partnerships in the North East are engaged with the North East Alliance and recognise that there is an opportunity to accelerate spread of good practice and mobilise our collective resources to overcome barriers to

transformation. Early work has highlighted four initial areas that lend themselves to further collaborative action:

- ▣ Application of the population health model to ensure balance of action across the four pillars
- ▣ Data (including information governance)
- ▣ Wraparound care / eco-mapping
- ▣ Learning Health system

Partners are coming together throughout 2022 to further refine the actions required to deliver improvements by March 2023.

- ▣ **Embed learning:** The North East Alliance leaders are committed to a culture of continuous learning and improvement. We recognise the wealth of data that individual agencies hold and seek to systematically integrate appropriate data with external evidence, using knowledge to drive change. The work has already started through, for example, the work to inform our pandemic response, on child neglect to identify children at risk enabling earlier intervention, health determinants research, community empowerment and the establishment of the Public Health Research Network to bring evidence together with local knowledge.

The principles of the learning system – generating data together to apply to improve our practice – will be applied to the work around those affected by substance use enabling the creation of digital infrastructure, processes and culture to support the work of the North East Alliance. We will take the learning from the work on substance use and if appropriate seek to replicate across wider pathways of health and care.

## Conclusion

The work of the North East Alliance is a collective endeavour. Our first year will seek to create strong foundations to support the work of the many communities and partnerships in the northeast. You can visit our website and find more detail of the work programme for 2022/23 and how to get involved: <https://www.hi-netgrampian.scot.nhs.uk/people-networks/north-east-alliance/>