



Whole System Asthma Plan Development & Implementation

Designing and delivering system-wide asthma improvements in North Central London

Haringey



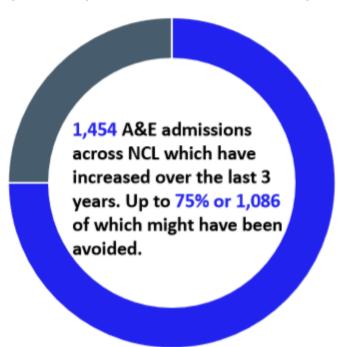


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Scale of the challenge in London

Proportion of potential avoidable admissions (17/18)



Poorer children 2.5 times more likely to be admitted.

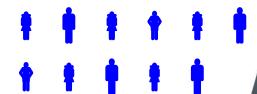
3 in every classroom, or 10% have asthma





Children living in damp, mouldy accommodation are between one and a half and three times more likely to suffer symptoms of respiratory illness than those in dry homes

12 London children die every year from asthma





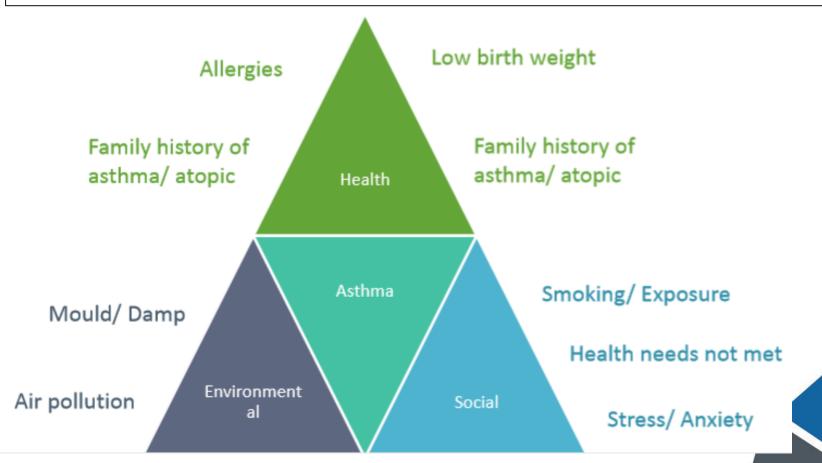
'Right care, right place, right time'. Transformed health and social care services which are equitable, accessible, efficient and deliver improved outcomes for children, young people and families. Enabling high quality and responsive services for children, young people and their families, delivered locally where possible, with a shared focus on promoting wellbeing, reducing health inequalities and improving health and social outcomes.

To support children, young people and their families with asthma to receive the appropriate treatment, at the right time and right place and enable them to remain as well as possible

NCL Asthma Vision

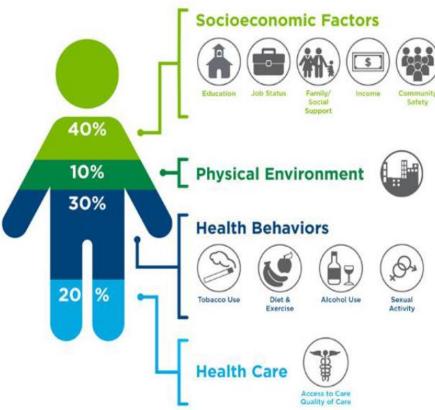


Asthma is a long term condition that affects the airways, causing difficulty in air reaching the lungs. Whilst the causes of asthma are not clear, there is significant research around both the links and 'triggers' of asthma, which can be understood across a system of health, social and environmental agencies.





It is clear that asthma is a complex and multi-faceted challenge, affected and impacted by a number of challenges across a wide system of agencies. It follows that a system response is required, which is able to take a holistic approach that addresses 'the causes of the causes'.



^{*}Robert Wood Johnson Foundation, Standford Social Innovation Review 2014



What we want to achieve for children, young people and families in North Central London

- 1. Young People & Families informed and empowered to manage the condition more effectively into adulthood
- 2. Enable healthy environments, which support children and young people with asthma to remain as well as possible
- 3. Enable all children to have access to a full education and activities, unhindered by asthma
- 4. All children have access to high quality asthma care
- 5. Earlier identification of children at risk of life threatening asthma attack or those with poor control.



1. Young People &
Families informed and
empowered to manage
the condition more
effectively into adulthood
CYP & Families are able
to take care of
themselves and remain
well

- 1. Raise awareness about the risks of asthma for Children, young people and families
- 2. Focus on positively influencing behaviours which trigger asthma (i.e. smoking cessation)
- 3. Reduce the stigma associated with asthma for young people to support them in accessing and receiving appropriate care (Inc. links to mental health)
- 4. Empower young people and families by providing a clear and understandable care and support offer across NCL
- 5. Utilise technology solutions to enable greater patient empowerment
- 6. Ensure that young people are enabled to manage their asthma effectively into adulthood and referred to services seamlessly where appropriate

2. Enable healthy
environments, which
support children and
young people with
asthma to remain as well
as possible
Reduction in CYP exposed
to pollutants

- 1. Improve the health of young people by reducing the number who smoke themselves and those exposed to second-hand smoke in the home
- 2. Empower families to prevent or reduce damp, mould and other environmental triggers in the home and know how to access advice and support when needed, across all tenure types
- 3. Increase awareness in the housing workforce of the impact of poor housing conditions on asthma in children and young people, and increase awareness amongst health professionals of the advice and support available to residents to prevent or mitigate environmental triggers in the home
- 4. Support action to improve air quality



Outcomes and Objectives

3. Enable all children to have access to a full education and activities, unhindered by asthma Increase percentage of time that CYP are able to attend school and time spent participating in recreation and sport

- 1. Reduce the number of school days missed due to asthma
- 2. Improve the awareness of professionals working within an education setting the risks and impact of CYP with asthma (Inc. links to Safeguarding)
 - B. More effectively target and engage YP with asthma in sports and recreation

- 4. All children have access to high quality asthma care
- CYP will be seen in the right place at right time

- 1. Implement a more consistent pathway across North Central London for CYP asthma
- 2. Develop a mechanism which enables continued learning and improvement across asthma work in NCL
- 3. Improve the consistency of training/education for staff working in front line services
- 4. Agree consistent tools and methods for delivering asthma care across NCL
- Develop a clear and cohesive offer for asthma care for CYP which includes the role of Community, Pharmacy, Primary and Secondary across NCL
- 6. Services are accessible and effectively address health inequalities

5. Earlier identification of children at risk of life threatening asthma attack or those with poor control.

"Asthma Sentinel: Keeping children with Asthma safe"

- 1. Ensure that all staff working with children and families are aware of the risks of asthma and the support available to signpost/refer
- 2. Develop digital solution which supports earlier identification of those at risk by sharing intelligence across the partnership and utilising a risk management tool
- 3. Deliver care and preventative interventions to CYP and families before needs become acute
- 4. Effectively target population groups and reduce health inequalities
- Ensure that professionals understand their safeguarding responsibilities in relation to health management and know how to refer to safeguarding services where there are concerns about a child.



Whilst common strategic outcomes and objectives have been developed and agreed at an NCL level, it is recognised that local systems are best placed to understand the needs of their populations and the landscape of local responsibilities, decision making and delivery mechanisms in place to improve outcomes.

To reflect this, the approach to developing the plan has been based on local borough-based workshops to map, design and develop the asthma plan. This process, which has been replicated across all five NCL boroughs, has in itself been incredibly helpful for local systems, enabling a greater understanding of the relationships across the local system and has generated further insight into how organisations can work more effectively together





To date, the elements of our strategic work to improve asthma outcomes in north central London that have emerged as best done at the NCL level include:-

- A shared approach to training and development of key staff groups in relation to asthma
- A networked learning approach across the system to support continuous improvement in outcomes for children and young people with asthma
- A consistent approach to engaging with and communicating to children, young people and families in relation to asthma awareness and education
- A system-wide asthma dashboard to monitor progress towards our shared outcomes across the partnership
- An NCL-wide understanding about the links with asthma and the wider social and environmental triggers, such as air pollution, smoking, poor housing.

NCL Asthma plan development and approval process

Borough led governance

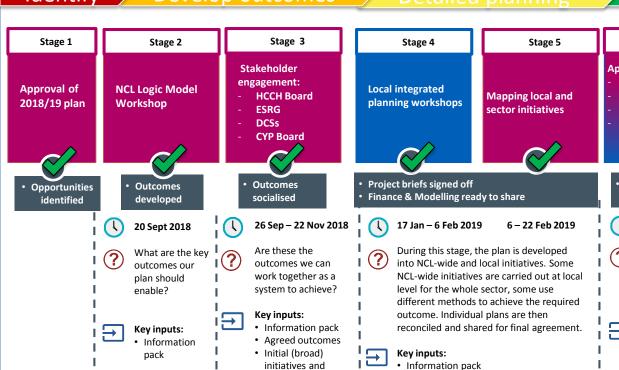
STP led governance

Identify >

Develop outcomes

Detailed planning

Approve



Stage 6 Approval by: - CYP Board - CCGs SMT - STP Board - H&W Boards Official launch of plan Asthma Day

04 Mar – 17 Apr 2019

Implementation plan signed off

During this stage, the full plan, alongside key milestones and KPIs, will be submitted to key governance meetings across health and social care in the five boroughs for formal signoff. The plan will then be launched with public awareness events planned to coincide with world asthma day on 7th May.

Key inputs:

- Completed finance and activity section
- Completed implementation section
- Data registry
- Project brief
- Agreed plan

Key outputs:

- Completed and assured project brief
- Detailed finance and activity modelling approved
- Implementation section approved

Stakeholder engagement:

• # of people at the workshop and organisations represented

Key output: • List of 5

List of 5
 agreed
 outcomes and
 objectives for
 the plan

Stakeholder

 engagement:
 # of people at the workshop and organisations represented

measures Key outputs:

 Outcomes reviewed to achieve internal and external buy-in



 # of people at the workshop and organisations represented

Key outputs:

· Emergent draft plan

Agreed outcomes

Agreed plan

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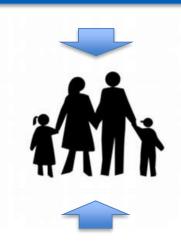
Stakeholder engagement:

 # of people at the workshops and organisations represented

· Initial (broad) initiatives and measures



NCL-Wide Initiatives



Local initiatives and delivery at borough level

Improvement network

NCL Asthma Network





These strategic outcomes and associated objectives have been shared and tested with a number of key stakeholder groups across North Central London including local authority services and teams (including public health, housing, air quality, school health and wellbeing teams), tertiary, secondary, primary and community services, all of whom have supported our aspirations and approach.

We are also passionate about ensuring the plan is meaningful to and informed by the children, young people and families we serve. Across February and March we commenced engagement work with children, young people and families through workshops and questionnaires to ensure their views are at the heart of our plan and inform the way it is delivered.

"I would feel that if we had better healthcare in schools that exceed first aid" "It would also help if doctors could tell us about our medications and our conditions more directly rather than telling our parents "Self-check in, because sometimes young people feel really confronted by people at reception, sometimes they prompt and they don't know what to say."