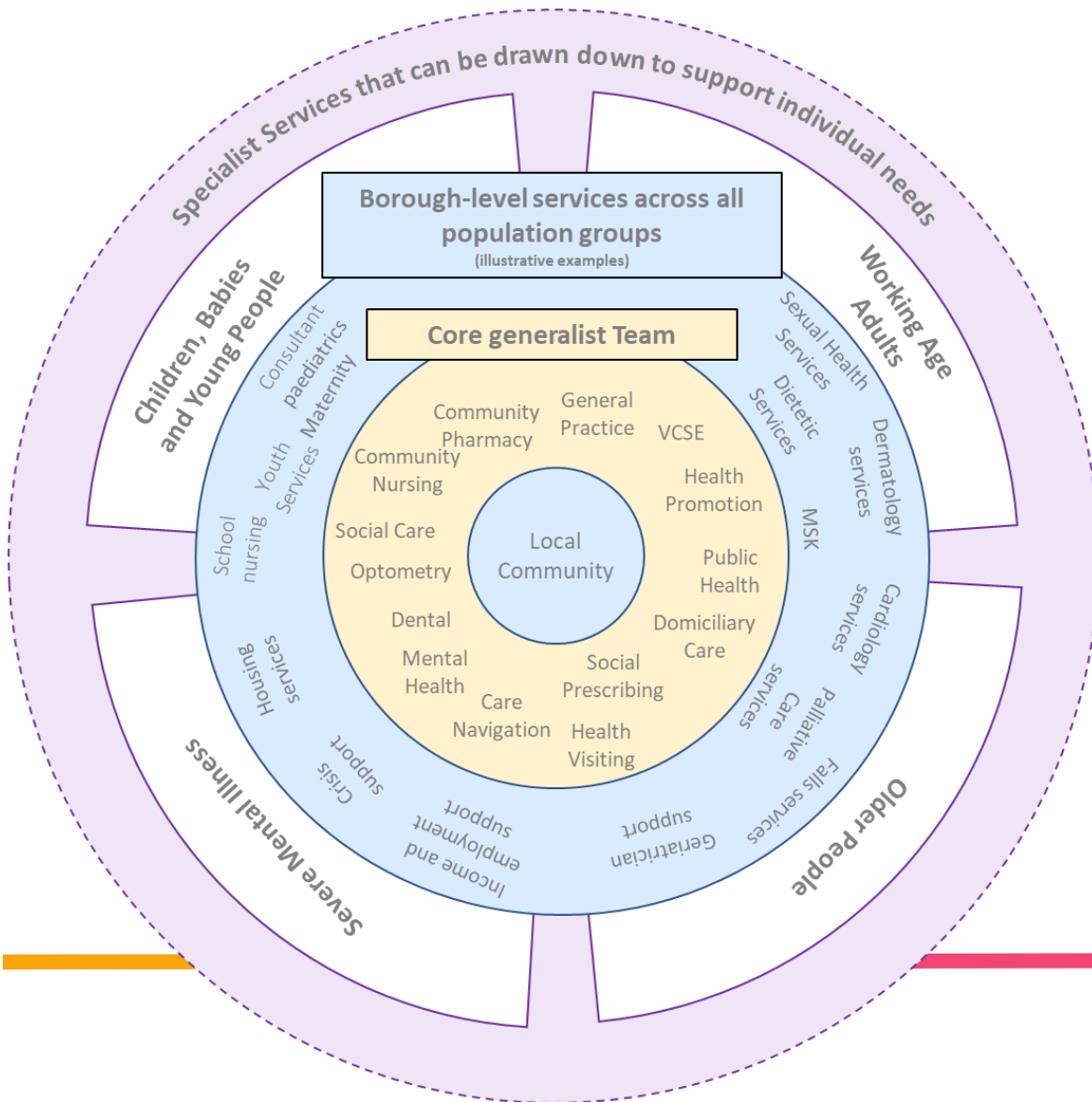# Integrated Neighbourhood Teams in Ealing – Next Steps

# In North West London we are committed to driving fundamental change to our health and care system through our 25 Integrated Neighbourhood Teams



**Integrated Neighbourhood Teams** will provide seamless community-based care; and are accountable for their local population and the individual needs within it.

Whilst many aspects of how an Integrated Neighbourhood Team functions will be defined in line with local population need, they will share some common qualities:

- They will all be **geographically aligned** to a population of c.50,000 - 100,000 residents.

- They will all **contain the core services** of General Practice, VCSE, Public Health intelligence, Adult Social Care, Domiciliary Care, Children's Services (including antenatal and post-natal care), Health Visiting, Social Prescribing, Care Navigation, Community Mental Health, Community Nursing, Community Therapies, Community Pharmacy, Dentistry and Optometry.In addition, **they will have a dedicated integrator function**, coordinated at Place level through General Practice, Community Providers or Local Authorities.

- **Within our organisations**, staff will take a **"no wrong front door" approach** for all services, which can be access digitally, by telephony or in person. **We** will get people to the help and service they need.

- Areas will work towards hub arrangements wherever possible **in which core services will be housed** behind a single reception.

- There will be **transparency of resources within each INT**, coordinated through the Place-based Partnership and interdependent to the North West London core offer developments

- They will access connecting services for all population groups, which operate at Borough or wider footprint in an **agile and responsive way**.

- The core teams will **pull down on more specialist, services at scale for specific population groups** through their acute trusts and other specialist service provision.
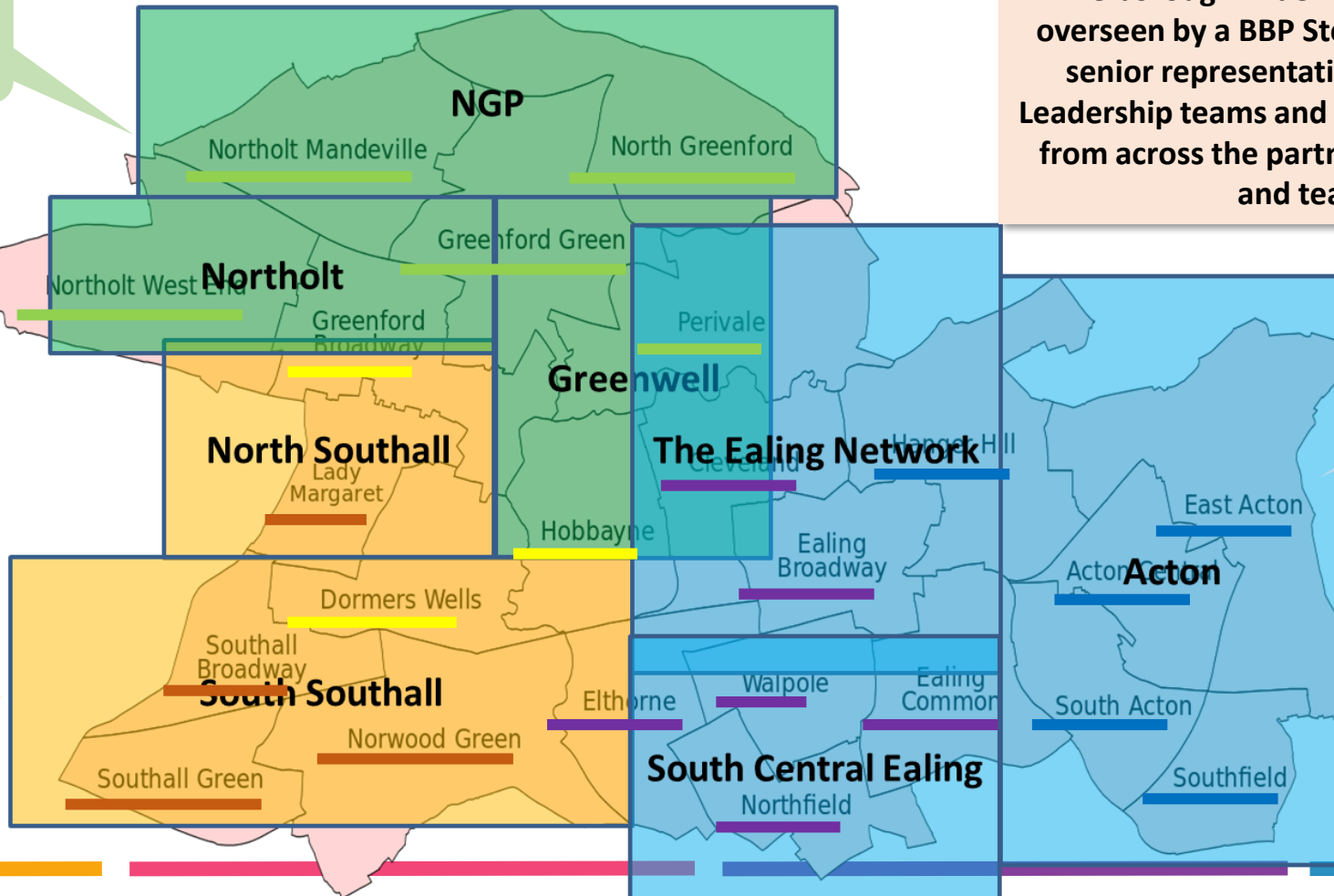
# The 3 Integrated Neighbourhood Teams in Ealing



North Ealing INT

The borough wide INT Programme is overseen by a BBP Steering Group with senior representation from the INT Leadership teams and wider stakeholders from across the partners organizations and teams

Each INT is led by a Leadership team with membership from PCNs, Adult Social Care, MINT, RISE, Ealing Community Partners, Voluntary Sector and representation from relevant acute trust

Ealing & Acton INT

Southall INT

NGP
Northolt Mandeville
North Greenford
Greenford Green
Northolt West End
Northolt
Greenford Broadway
Greenwell
Perivale
North Southall
Lady Margaret
The Ealing Network
Hanger Hill
Cleveland
East Acton
Hobbayne
Ealing Broadway
Acton
Acton
Dormers Wells
Southall Broadway
South Southall
Walpole
Ealing Common
South Acton
Elthorne
Norwood Green
South Central Ealing
Southfield
Southall Green
Northfield

## Social Care Teams

| | |
|---|---|
| | GNP |
| | Central Greenford |
| | Southall |
| | Central Ealing |
| | Acton |

The work of the INT will be underpinned by a place-based population health management

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Integrated Care System

# The Ealing Context: Population Overview and Health

Third largest population in London.

Third most ethnically diverse borough in England and Wales; only 24.3% identify as White British. Southall Broadway, Southall Green and Dormers Wells have the highest percentages of residents from different ethnic minority backgrounds.

On average, men live to 80.3 years and women live to 84.4 years. However, there are differences in life expectancy in different areas of the borough. For example, men living in Hanger Hill live on average 6.4 years longer than men living in South Acton; whilst women living in Northfield live on average 6.9 years longer than those living in Norwood Green.

Less children under 5 compared with London whilst the proportion of residents over 65 years of age is increasing.

69.1% identify English as their main language. After English, the top five languages spoken as a main language are: Panjabi (4.9% of population), Polish (4.4%), Arabic (2.5%), Tamil (1.6%) and Gujarati (1.4%).

Highest areas of deprivation are concentrated in and around Southall, Northolt and Acton. Ealing has 4 residential areas that are in the 10% most deprived in the country.

Ealing has the third highest rate of new TB cases in England at 34.2 per 100,000 population.

## tion Overview and Health (2/2)

Highest rate of alcohol related hospital admissions (496/100,000) in London. The top five wards with highest alcohol admission rates were Lady Margaret, Southall Broadway, Southall Green, Northolt West End and Elthorne.

Two thirds (61.3%) of adults are physically active.

One in ten (10.3%) adults smoke.

Ealing has a high prevalence of diabetes. Almost 1 in 10 adults (18+) are diabetic. In the Bangladeshi population, one in five adults have diabetes, which is double the Ealing average.

Source: Ealing Council Annual Public Health report – Health of Borough 2023 final

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4

# The Ealing Context: Wider Determinants

There are 133,657 households in Ealing; of these, 46% are owner occupied, 17.5% are socially rented, 34% are private rentals, and 2% are in shared ownership.

£525k is the average house price in Ealing. This is sixteen times median earnings – significantly above the London average.

26% of jobs in Ealing were paid below the London Living Wage of £10.85 per hour, compared with approximately 17% across London.

Approximately 7 out of 10 (68%) pupils achieved a good level of development at the end of reception in 2022. School readiness has dropped nationally compared to pre COVID performance. However, Ealing is now in line with London and better than the national average.

Sub-standard housing conditions are significantly more prevalent in Ealing's private rented sector than the national average, with over 22% of the borough's private rented properties predicted to have at least one or more Category 1 housing hazard compared to the national average of 13%.

Ealing has almost double the rate of households threatened with homelessness compared with the London average.

There is a drop in levels of attainment as Black Caribbean pupils move through different stages of school, highlighting that Black Caribbean pupils have been underserved by the education system.

There were 9,860 violence offences (29 per 1,000 population) in 2021/22. This is significantly higher than the London average.

Almost three quarters (73.8%) of Ealing residents are in employment.

Wards with the lowest household income are Southall Broadway, Southall Green and Dormers Wells.

There were 54 first time entrants to the youth justice system in 2021.

With the exception of Nitrogen Dioxide ($NO_2$), air quality in the borough of Ealing is meeting all national UK Air quality strategy standards (2007). More than half of $NO_2$ pollution and particulate matter that originates from within Ealing borough are from road transport.

For further details breakdown for the 7 towns in Ealing, please click on this link: Ealing 7 Towns Profile

Source: Ealing Council Annual Public Health report – Health of Borough 2023 final

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# NWL Population Health Inequalities and challenges across diagnosis and Health outcomes

## The health of our population is deteriorating and is currently linked to societal factors

- The recorded prevalence of long-term conditions (LTCs) has grown year on year between 2015 and 2021
- Hypertension (8.2%) and diabetes (4.2%) are NWL's highest prevalence LTCs
- Brent and Ealing have the highest recorded prevalence of LTCs
- The more deprived a person is the more likely they are going to have two or more LTCs
- There is variation in disease-specific bad outcome rates
- The areas with the most common worst outcome rates are:
  - Church Street (Westminster)
  - Norwood Green North & Windmill Park (Ealing)
  - Southall Green (Ealing)
  - Southall North (Ealing)
  - Southall Park (Ealing)
  - Southall West (Ealing)

Source: ICHP/NWL ICB Population Health Management and Inequalities: Disparities Audit 15 Sep 22

## We have specific groups who are more likely to get specific diseases and have worse outcomes

**Asthma**
- Likelihood of diagnosis greater with Mixed, Black or Black British and Asian or Asian British ethnicity and females
- Likelihood of bad outcome greater with deprivation; Asian or Asian British and Black or Black British ethnicity; and females

**Cancer**
- Likelihood of diagnosis higher in females and least deprived
- Likelihood of bad outcome higher in Black or Black British and Asian or Asian British ethnicity; males

**COPD**
- Likelihood of diagnosis higher in most deprived, white ethnicity and males
- Likelihood of bad outcome higher in Asian or Asian British ethnicity; males

**Diabetes**
- Likelihood of diagnosis higher in most deprived, Black or Black British and Asian or Asian British ethnicity; males
- Likelihood of bad outcome higher in males and most deprived

**Hypertension**
- Likelihood of diagnosis higher in Black or Black British and Asian or Asian British ethnicity
- Likelihood of bad outcome higher in Asian or Asian British ethnicity

**Mental Health**
- Likelihood of diagnosis higher in most deprived; Black or Black British and Mixed ethnicity
- Likelihood of bad outcome higher in Asian or Asian British ethnicity; females

## Some of our key bad outcomes are driven by consistent factors of co-morbidities & ethnicity

- Co-morbidities are the most significant factor increasing the likelihood of death, Acute MI and stroke
  - The likelihood of Acute MI is increased 3.7 times if you are co-morbid and 9x if you are multi-morbid
- The likelihood of death is increased by most if the patient is Asian, followed by Black, Other ethnic groups and mixed patients
- Acute MI is most likely in male patients and Black patients
- The likelihood of stroke seems to be driven most drastically by co-morbidity status, without too many other factors showing large effects
- Diabetic Retinopathy is also most driven by co-morbidities, with the Asian with the highest chance
- Hyperglycaemia is more likely in more deprived groups as well as Black and Asian ethnicity groups
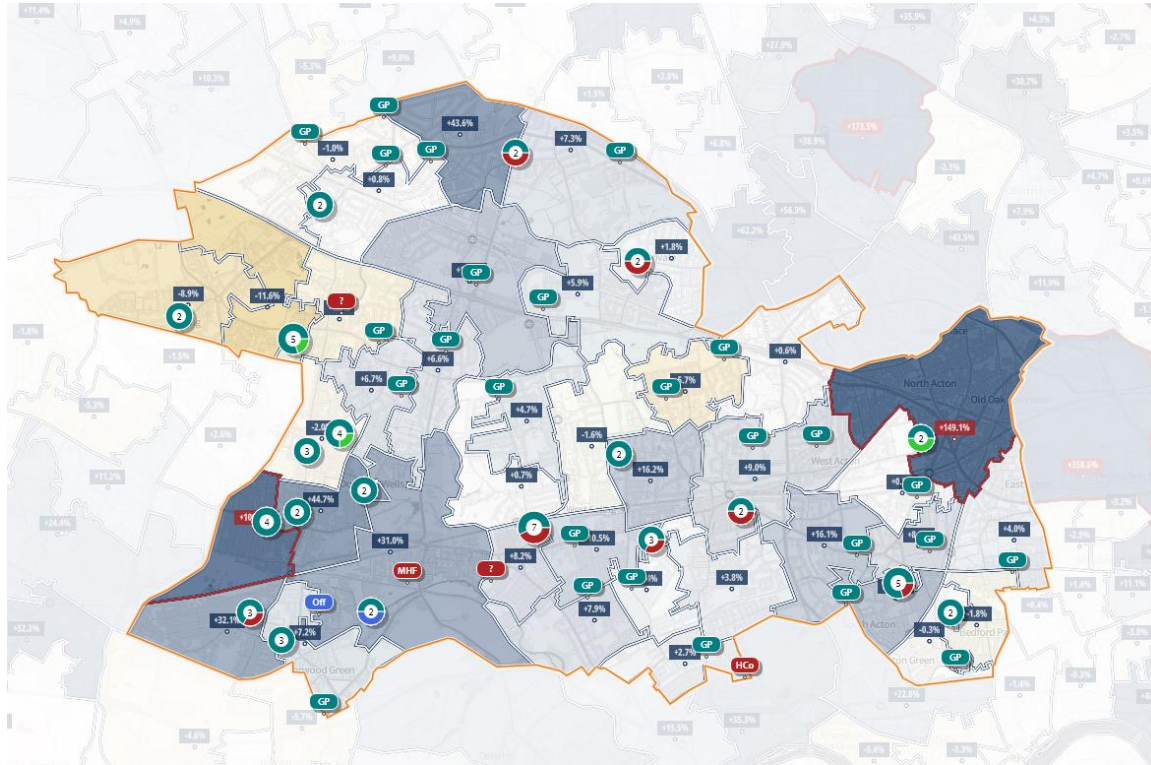- Asian citizens with an LTC are most likely to experience macular degeneration

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# Ealing NEL/EL admission rates

| NEL/EL admission rate by reg.pop'n in Ealing | Reg. pop'n | Admissions 2023/24 | Admissions per 10,000 reg. pop'n | Variance from NWL average |
|---|---|---|---|---|
| BRENT | 506,492 | 100,222 | 1,979 | -1% |
| CENTRAL LONDON | 274,340 | 36,165 | 1,318 | -34% |
| **EALING** | **473,191** | **104,530** | **2,209** | **10%** |
| H&F | 340,851 | 50,832 | 1,491 | -26% |
| HARROW | 294,904 | 72,880 | 2,471 | 23% |
| HILLINGDON | 338,347 | 80,483 | 2,379 | 19% |
| HOUNSLOW | 344,373 | 79,476 | 2,308 | 15% |
| WEST LONDON | 285,632 | 53,643 | 1,878 | -6% |
| **Total** | **2,858,130** | **578,231** | **16,033** | |
| **NWL Average** | | | **2,004** | |

**Ealing's admission rate per 10,000 registered population is 10% above the NWL average.**

Harrow, Hillingdon and Hounslow have a significant proportion of admissions above the NWL average.

Source: SUS dataset FY Apr23 – Mar24
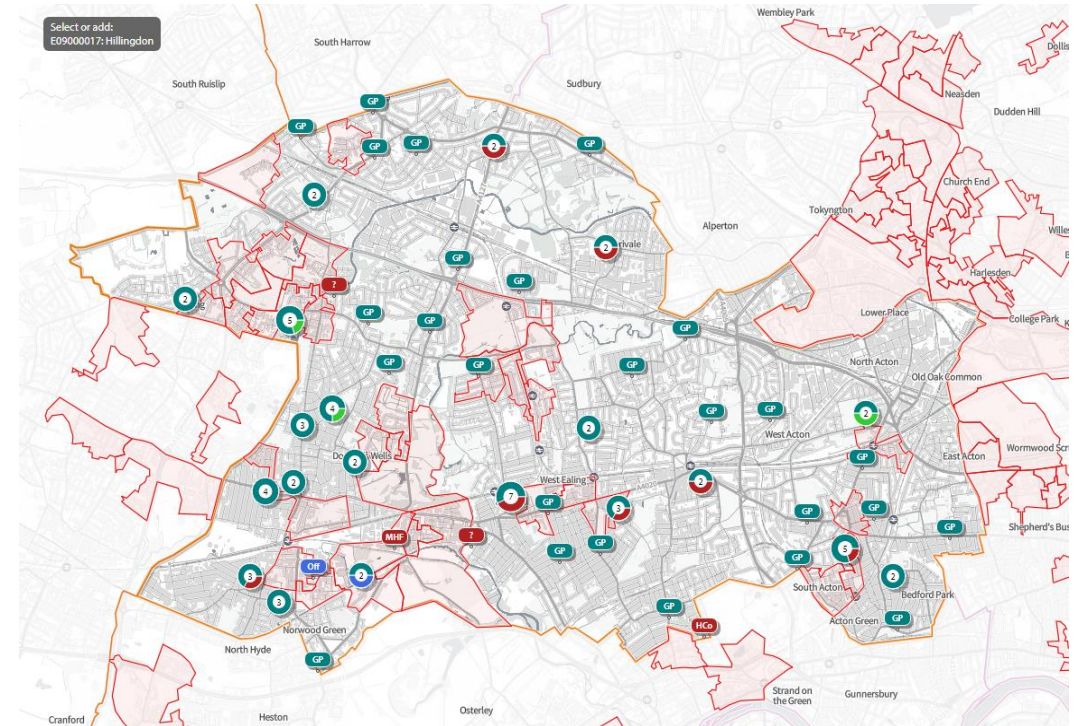Registered population: GP practice lists sizes Apr24

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# Planned Growth by 2040



IMD: High Core 20% Population – There is an element of overlap in certain parts of the borough where deprivation is high, growth is expected and where the Core 20 Population are identified but is varies – e.g. Northolt, Greenwell, border of South Ealing and Acton
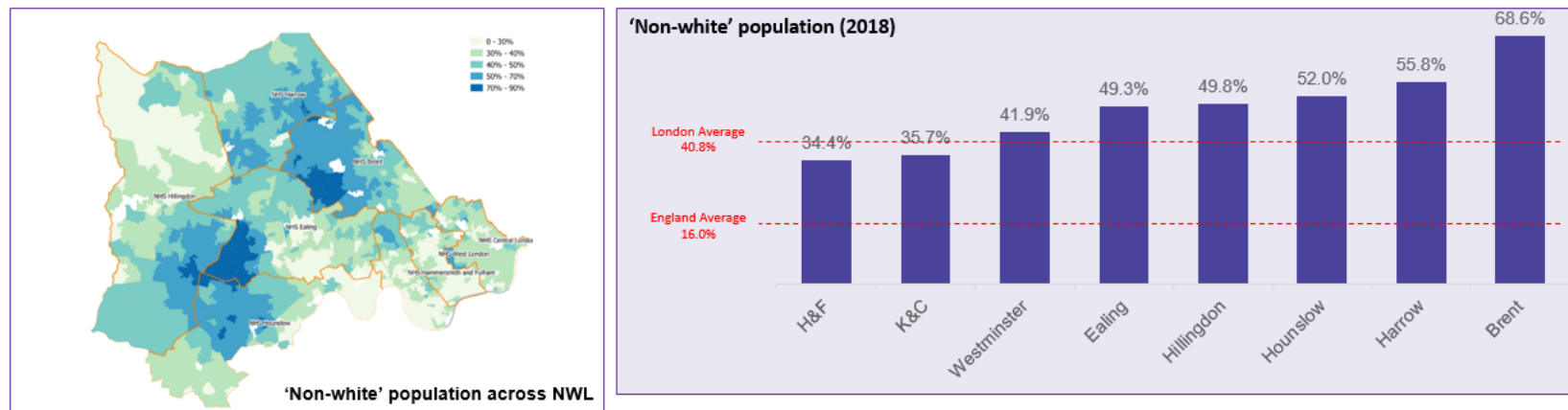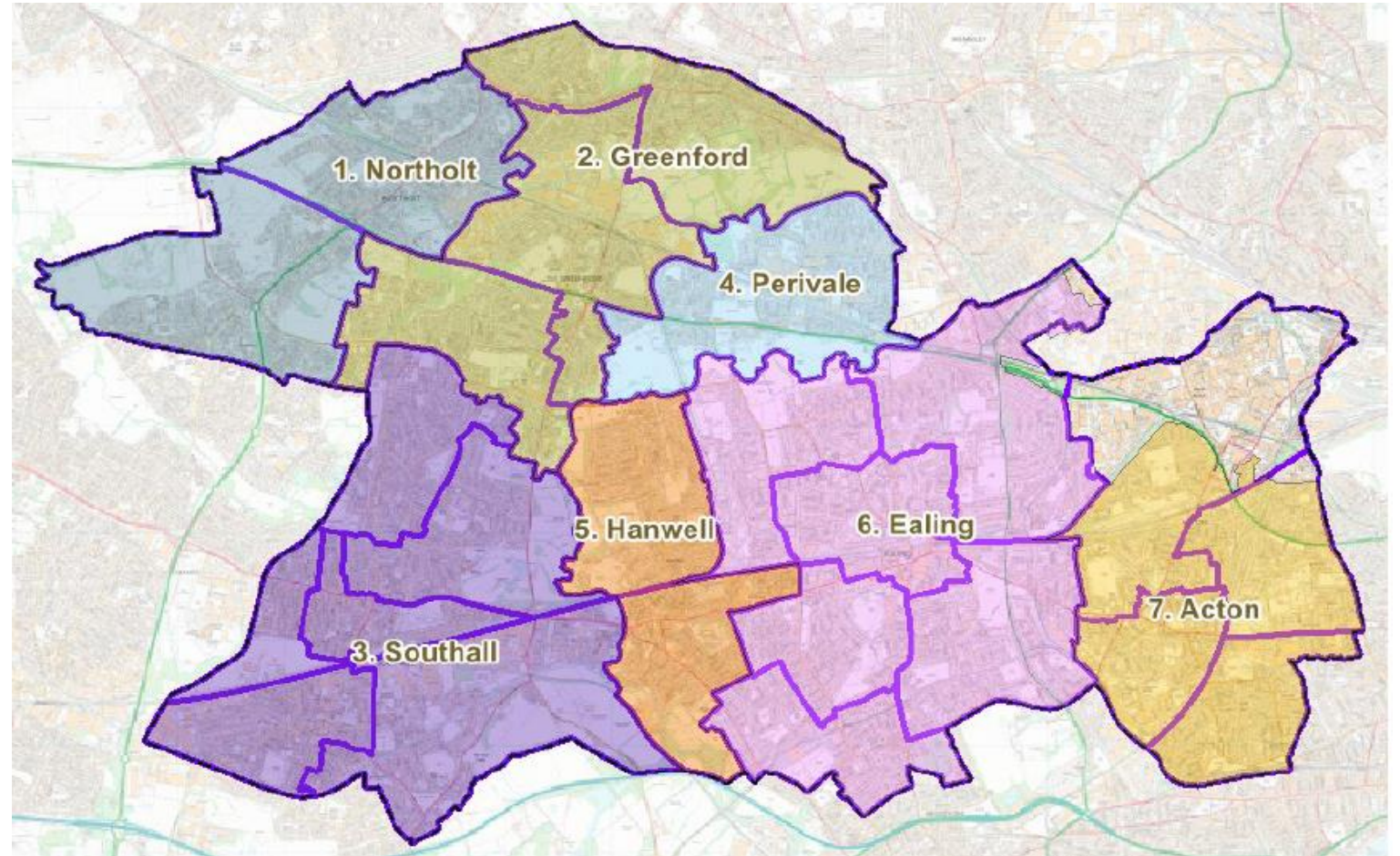


The increase in population is concentrated in areas of high deprivation and disease burden

The darker the shading the more growth expected whereas yellow would indicate an expectation that the population may decrease

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# Ethnically diverse population in NWL



'Non-white' population across NWL



'Non-white' population (2018)

- H&F: 34.4%
- K&C: 35.7%
- Westminster: 41.9%
- Ealing: 49.3%
- Hillingdon: 49.8%
- Hounslow: 52.0%
- Harrow: 55.8%
- Brent: 68.6%

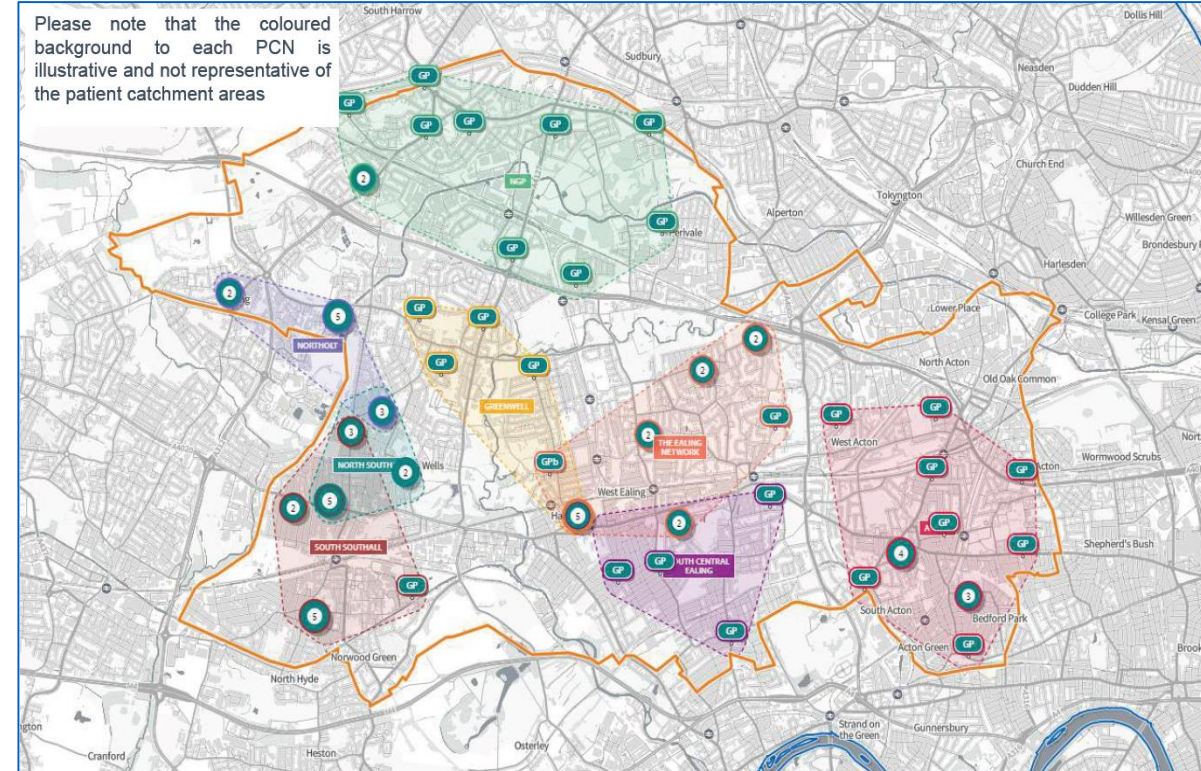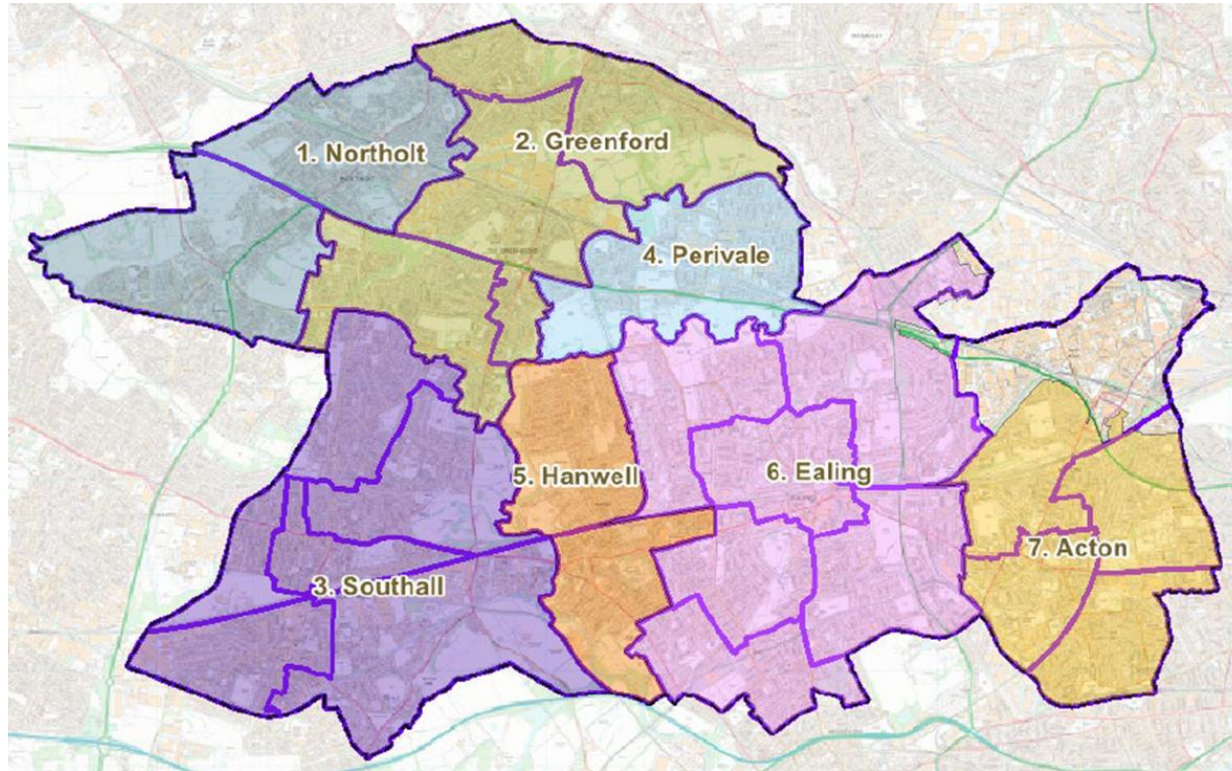London Average 40.8%

England Average 16.0%

- Ethnic diversity in North West London is greater than that of London as a whole, with 50.4% being 'non-white' in contrast to the London average of 40.8% and national average of 16%.

- Brent is one of the most diverse areas in the country, with nearly 70% of the population coming from minority ethnic backgrounds. More than one third (37%) of the Borough's population do not have English as a first language.

- Harrow, Hounslow, Ealing and Hillingdon also have minority ethnic populations significantly above the London average.

- Minority ethnic populations are concentrated in particular areas of all of our Boroughs, meaning that Borough averages mask significant variation.

- **Ealing's BAME community is expected to grow by 14% between 2016 and 2026, and 33% between 2016 and 2050.**

- There is a wide inequality in health related quality of life and multiple determinants of health in amongst different ethnicities, including in mental health management for minority ethnic populations.

North West London
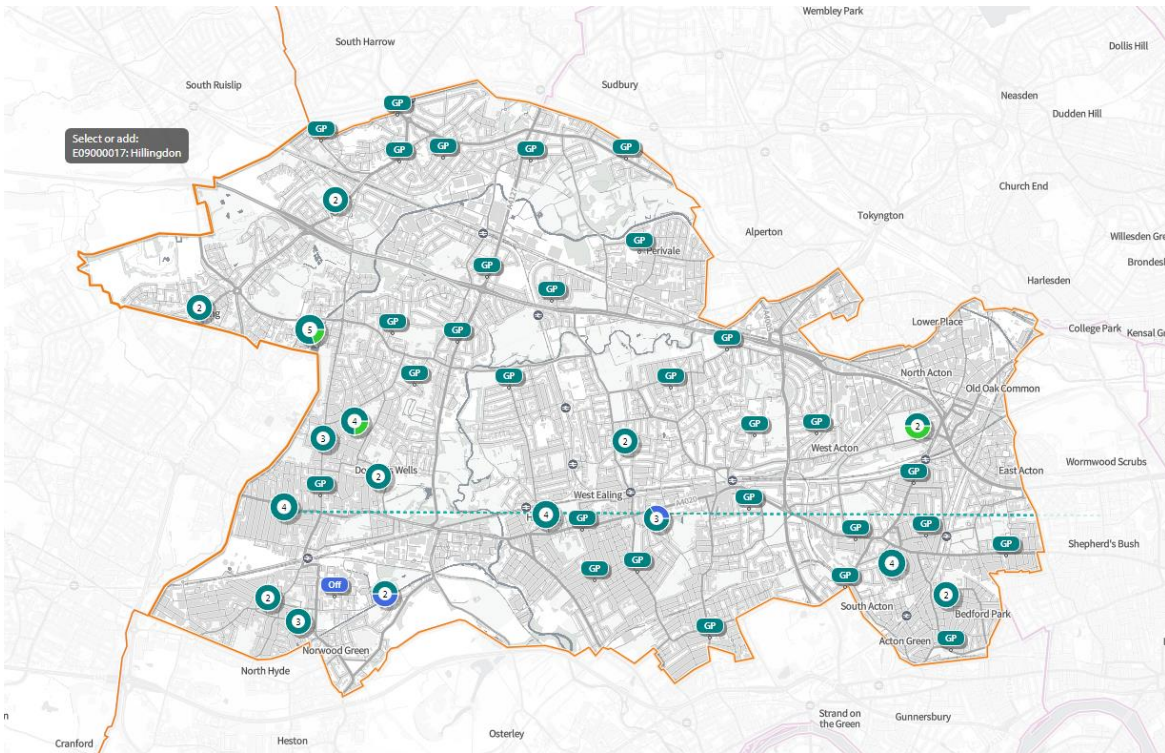Integrated Care System

# 7 Towns Strategy

- The Local Authority have been developing their strategy to focus provision and the voice of the local population at a 7 town level

- This approach has generated conversations about what local residents believe is important through listening events 'Your Town, Your Voice'

- LA colleagues are actively working through the alignment of services delivered by the council to the 7 towns

- The published local plan has focussed on the 7 towns of Ealing.

- Ealing PCNs however are organised as 8 PCNS given the size of the population.
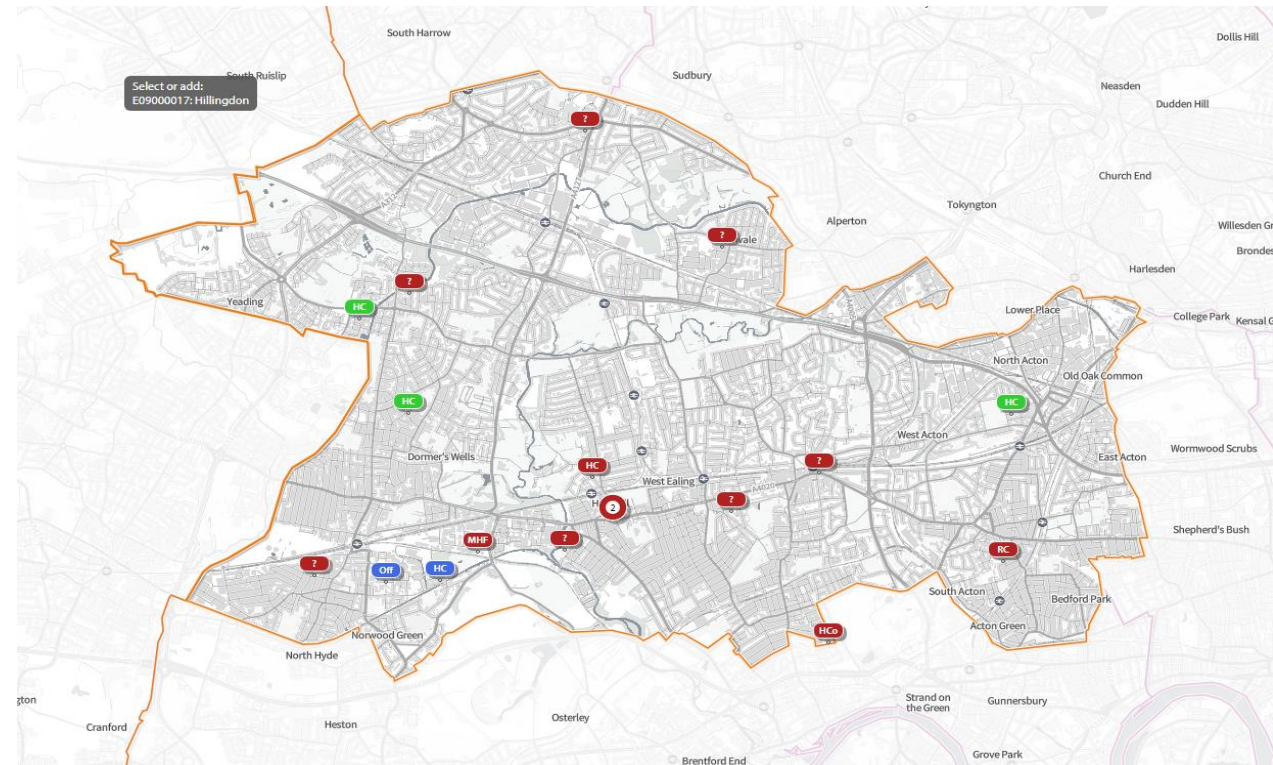
# Towns vs PCNs





Please note that the coloured background to each PCN is illustrative and not representative of the patient catchment areas

# Gps practices in Ealing with Health Centres



The map above shows where the GP estate is primarily

Whereas this map shows where the Health Centre estate is located

# Mapping via towns

| Town | Population - resident | Projection population growth – 5 years | PCN | Population | Growth projection - Shape | Current Estate | Future Estate |
|---|---|---|---|---|---|---|---|
| Northolt | 33,717 | 33,527 -1% | NGP and Northolt | NGP – 74,154<br>Northolt – 41,948 | | • GUV | • Gap |
| Greenford | 47,788 | 49,158 -3% | NGP and Greenwell | NGP – 74,154<br>Greenwell – 40,753 | +++ | • Greenford Green<br>• GUV | • Greystar |
| Southall | 81,212 | 87,940 – 8% | South Southall and North Southall | SS – 63,831<br>NS – 57,297 | ++++ | • Featherstone Road<br>• Guru Nanak MC<br>• Jubilee Gardens | • Green Quarter<br>  Park Avenue |
| Perivale | 17,362 | 17,530 – 1% | NGP | NGP – 74,154 | + | • Hillview | |
| Hanwell | 29,648 | 29,804 -1% | Greenwell | Greenwell – 40,753 | + | • Hanwell Health Centre | |
| Ealing | 96,353 | 98,010 -2% | The Ealing Network and South Central Ealing | TEN – 62,976<br>SCE – 50,028 | ++ | • Mattock Lane Health Centre | • Avenue Surgery<br>  New Corfton Road |
| Acton | 72,729 | 77,345 - 6% | Acton | Acton – 82,372 | ++ | • Acton Health Centre<br>• Mill Hill Surgery<br>• Crown Street Surgery | • Hillcrest Surgery |
| OPDC | | | Acton | Acton – 82,372 | ++++ | • Gap | • Portal Way? |

# Mapping via PCNs

| PCN | Population | Growth projection - Shape | Town | Population - resident | Projection population growth – 5 years | Current Estate | Future Estate |
|---|---|---|---|---|---|---|---|
| Northolt | Northolt – 41,948 | - | Northolt | 33,717 | 33,527 - 1% | • GUV | • Gap |
| Greenwell | Greenwell – 40,753 | ++ | Greenford Hanwell | 47,788 29,648 | 49,158 - 3% 29,804 - 1% | • Hanwell Health Centre | • Gap? |
| North Southall | NS – 57,297 | +++ | Southall | 81,212 | 87,940 – 8% | • Jubilee Gardens | |
| South Southall | SS – 63,831 | ++++ | Southall | 81,212 | 87,940 – 8% | • Featherstone Road • Guru Nanak MC | • Green Quarter • Park Avenue |
| NGP | NGP – 74,154 | +++ | Perivale, Greenford Northolt | 17,362 47,788 33,717 | 17,530 – 1% 49,158 - 3% 33,527 – 1% | • Hillview • Greenford Green | • Greystar |
| The Ealing Network | TEN – 62,976 | ++ | Ealing | 96,353 | 98,010 - 2% | • Mattock Lane Health Centre | • Avenue Surgery • New Corfton Road |
| South Central Ealing | SCE – 50,028 | ++ | Ealing | 96,353 | 98,010 - 2% | • Ealing Park Health Centre | • Gap |
| Acton | Acton – 82,372 | ++++ | Acton OPDC | Acton – 72,729 | 77,345 – 6% | • Acton Health Centre • Mill Hill Surgery • Crown Street Surgery | • Hillcrest Surgery • Portal Way |

# Ealing Population Growth and Site Plan
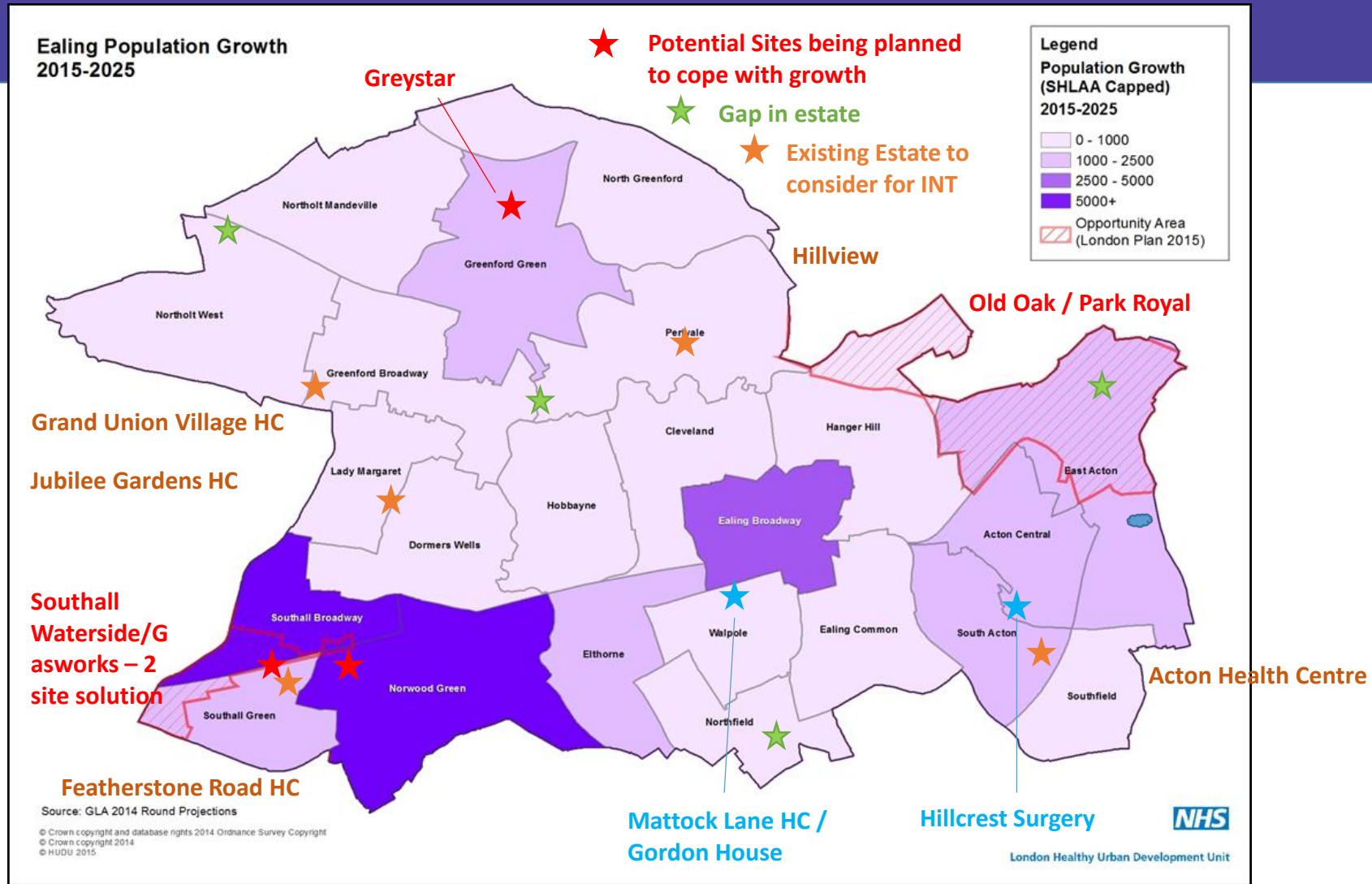
# Place Based Integrated Network Teams (INT)

Operational Delivery on the ground would mean teams are fomalised around PCN groupings, with joint case management, workforce and leadership groups ensuring care is holistic and centered around the needs of the registered and resident list of patients in primary care

## Multi-Disciplinary Teams

Coordinated Care for patients, with regular INT based MDT Meetings around needs of individual with holistic approach to care

## Strategic Leadership

Dedicated support to ensure voice of INT heard at ICP, translated from operational delivery on the ground proactively resolving barriers to integration
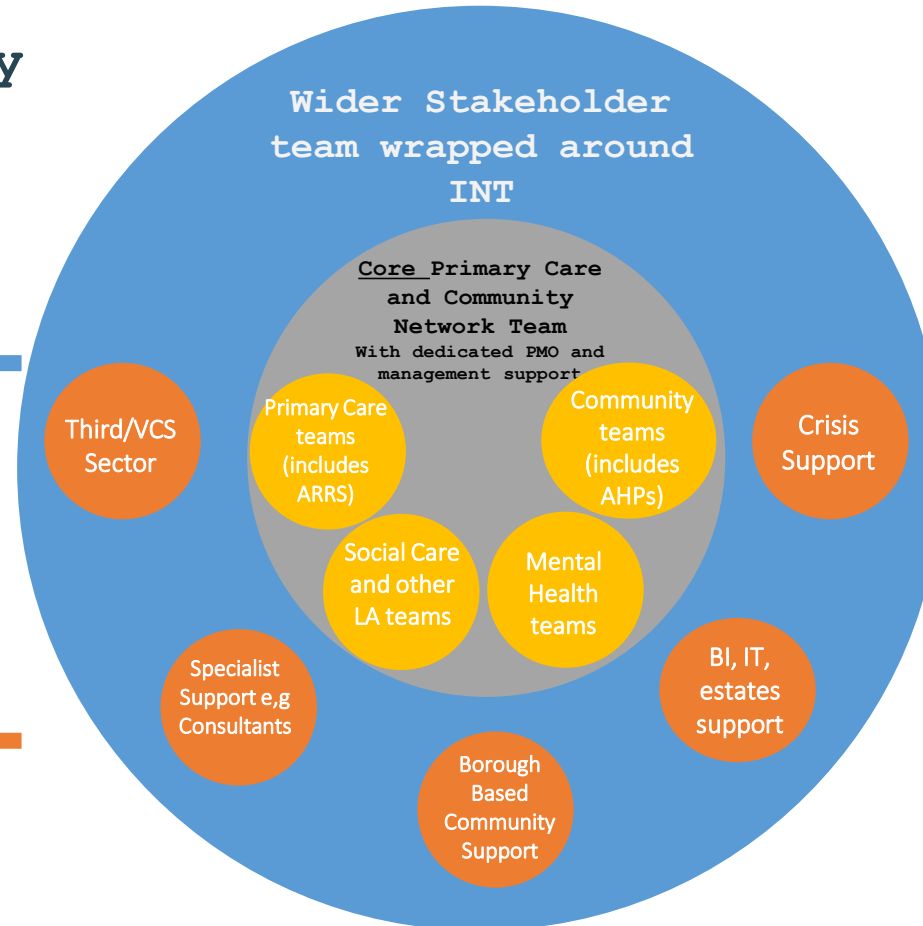
## Population Health Delivery

Use data to ensure targeted interventions reducing inequalities for patients and aligning resources to where the need is

## Workforce Plans, Estates and IT

Joint workforce plan, estates plan and Digital for INT aligned to borough wide planning bringing providers together under consistent borough based leadership



Wider Stakeholder team wrapped around INT

**Core** Primary Care and Community Network Team
With dedicated PMO and management support

- Third/VCS Sector
- Primary Care teams (includes ARRS)
- Community teams (includes AHPs)
- Crisis Support
- Social Care and other LA teams
- Mental Health teams
- Specialist Support e,g Consultants
- BI, IT, estates support
- Borough Based Community Support

# Feedback summary: Dream

**Attendees identified the significant potential of the INT model to improve care and outcomes with aspirations including…**
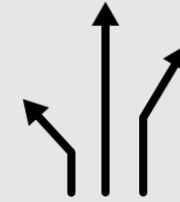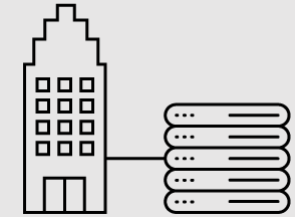
INTs enable **workforce integration**

INTs are underpinned by **shared tech.**

INTs offer **holistic personalised care around patients.**

INTs offer **seamless pathways** with **minimal referrals and barriers** between teams.

**INT services co-locate** in settings convenient for patients to improve service access.
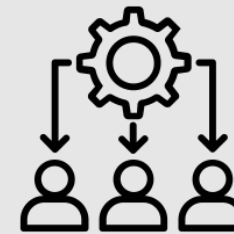
**INTs empower patients** to self-care and self-manage.

**INTs create space for learning** and reflection for improvement.

**INTs improve communication** between teams.

**INTs improve workloads and waiting times** by removing duplication.

**Patients are actively engaged in co-production** of the INT offer.

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# Emergency admissions with a recorded long term conditions

**Rate of annual emergency admissions for people with a key diagnosis recorded in GP practices out of the registered population, March 2023 – Feb 2024**

| Emergency hospital admissions | NWL | Brent | Central London | Ealing | H&F | Harrow | Hillingdon | Hounslow | West London |
|---|---|---|---|---|---|---|---|---|---|
| Hypertension | 207.5 | 194.4 | 110.1 | 258.6 | 146.8 | 256.8 | 219.8 | 266.1 | 175.0 |
| With severe frailty | 124.7 | 112.7 | 83.3 | 137.4 | 91.1 | 175.8 | 136.8 | 148.7 | 108.5 |
| Diabetes | 123.8 | 130.1 | 59.6 | 159.8 | 72.1 | 167.0 | 121.8 | 162.8 | 87.4 |
| CKD | 73.4 | 78.5 | 38.2 | 85.5 | 52.8 | 98.0 | 75.4 | 86.9 | 59.1 |
| CHD | 71.2 | 62.0 | 43.5 | 95.2 | 47.4 | 88.3 | 68.6 | 97.5 | 55.8 |
| **All key diagnoses** | **600.6** | **577.8** | **334.7** | **736.5** | **410.1** | **785.9** | **622.3** | **762.0** | **485.8** |

**Note**: Number of emergency admissions is double counted - a person can have more than one admissions and/ or comorbidities (i.e. Hypertension or / and CHD)

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# NWL Health Borough's Practice List Sizes Jun24

| Health Borough | Jun24 List Size | Jul24 List Size | monthly variance |
|---|---|---|---|
| Brent | 512,897 | 513,319 | 422 |
| Central London (Westminster) | 275,227 | 274,114 | -1,113 |
| Ealing | 475,567 | 476,069 | 502 |
| H&F | 339,699 | 338,956 | -743 |
| Harrow | 296,431 | 296,564 | 133 |
| Hillingdon | 339,512 | 339,808 | 296 |
| Hounslow | 358,596 | 358,447 | -149 |
| West London (K&C) | 286,851 | 286,677 | -174 |
| Unallocated | 8,330 | 8,307 | -23 |
| Grand Total | 2,893,110 | 2,892,261 | -849 |

Ealing has the 2nd largest registered population in NWL at 476,069 in Jul24. Around 87% of the Ealing registered population reside in Ealing.

The Ealing network and Greenwell PCN have the highest proportion of patients ages 65+ when compared to the other age cohorts within their PCN.

In Actual numbers; Acton PCN has the highest number of older people aged 65 and over. (Age breakdown based on Jun24 list size)

| PCNName | Under 18s | 18-64 | 65+ | Grand Total | % Under 18s | % 18-64 | % 65+ |
|---|---|---|---|---|---|---|---|
| ACTON PCN | 14,964 | 59,299 | 8,349 | 82,612 | 18% | 72% | 10% |
| GREENWELL PCN | 8,393 | 27,260 | 5,201 | 40,854 | 21% | 67% | 13% |
| NGP PCN | 15,064 | 50,835 | 8,956 | 74,855 | 20% | 68% | 12% |
| NORTH SOUTHALL PCN | 11,168 | 39,725 | 6,400 | 57,293 | 19% | 69% | 11% |
| NORTHOLT PCN | 10,000 | 28,212 | 4,227 | 42,439 | 24% | 66% | 10% |
| SOUTH CENTRAL EALING PCN | 9,606 | 34,538 | 6,208 | 50,352 | 19% | 69% | 12% |
| SOUTH SOUTHALL PCN | 12,651 | 45,651 | 5,761 | 64,063 | 20% | 71% | 9% |
| THE EALING NETWORK PCN | 11,894 | 42,235 | 8,970 | 63,099 | 19% | 67% | 14% |
| Grand Total | 93,740 | 327,755 | 54,072 | 475,567 | 20% | 69% | 11% |

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# Prevalence of key long term conditions

| Key long term conditions | NWL | London | England | Ealing | | |
|---|---|---|---|---|---|---|
| | | | | Actual | Estimate | Gap |
| Hypertension | 11.10% | 10.90% | 14.40% | 12.78% | 18.40% | 5.62% |
| Diabetes (18+) | 6.96% | 6.90% | 7.50% | 8.50% | 8.80% | 0.30% |
| CHD (18+) | 2.31% | 1.90% | 3% | 2.77% | | |
| CKD | 2.28% | 2.70% | 4.80% | 2.33% | | |
| with comorbidities | 37.26% | n/a | n/a | 39.51% | | |
| Asthma (18+) | 4.10% | | | 4.77% | | |
| Asthma (under 18s) | 3.18% | | | 3.99% | | |
| Emergency admissions for Ambulatory SensitiveConditions | 9.30% | n/a | n/a | 10.95% | | |

**Breakdown by NWL Boroughs**

**Hypertension**

# LTC Prevalence by Borough



LTC prevalence by Borough in 2021
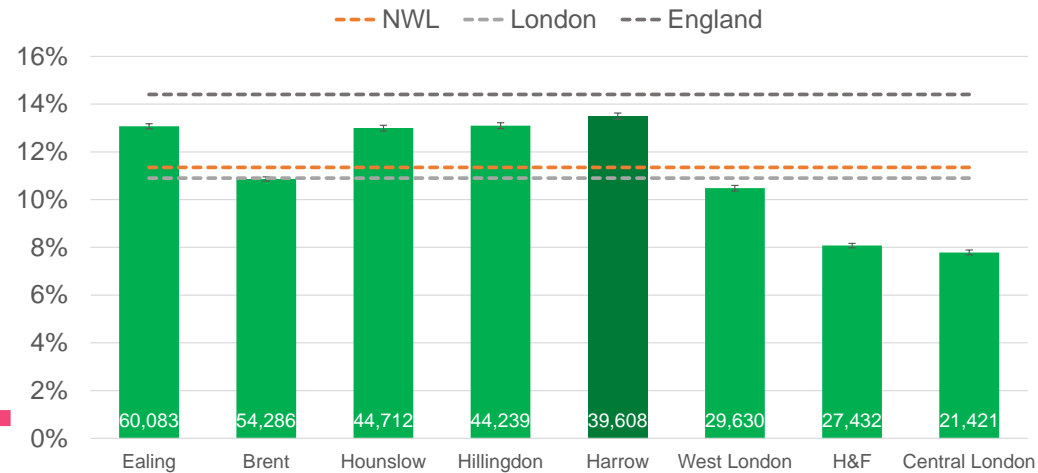
LTC: Asthma, Cancer, COPD, Diabetes, Hypertension, MentalHealth
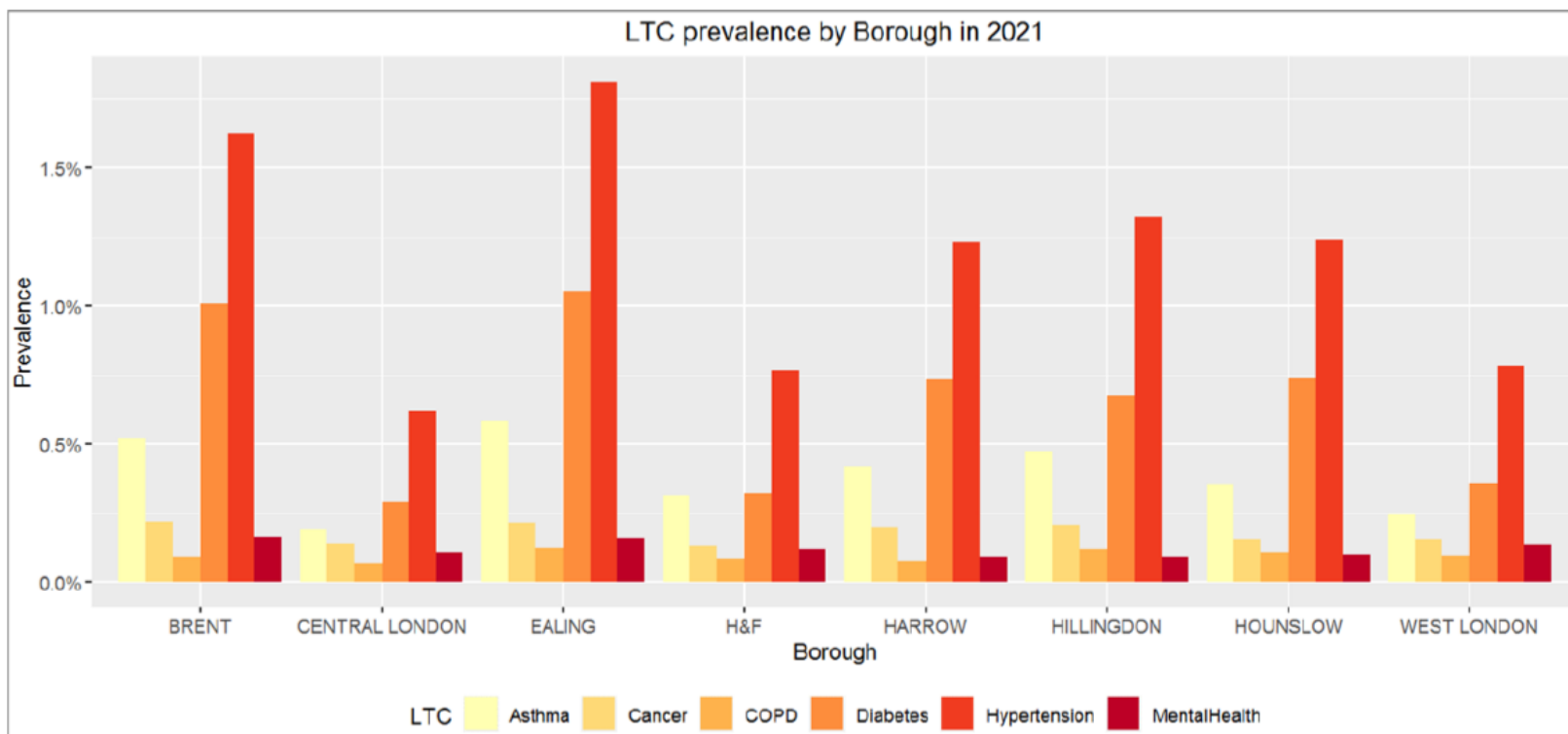
**Prevalence:**
Number of patients with condition/
Total number of registered patients

**Prevalence across all 6 conditions:**
- Brent 3.6%
- Ealing 3.9%
- Hillingdon 2.9%
- Harrow 2.8%
- Hounslow 2.7%
- West London 1.8%
- H&F 1.7%
- Central London 1.4%

Ealing has the highest prevalence rate across all 6 conditions within NWL

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# Thinking about next steps

- What is the right configuration for Ealing INT?

1. 3 INTs
2. 7 Towns
3. 8 PCNs
4. Other?

- What do we need to do next to get us going?
  - Workshops at place level with all partners
  - Community and Mental Health engagement
  - VCS engagement
  - LA Engagement
  - Look at UWL Estate?
  - Peabody Estate?
  - Other LA Estate?
  - Agree Leadership Roles?

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