



**London Ambulance Service**  
NHS Trust

# Reducing Health Inequalities

Identifying our priority areas

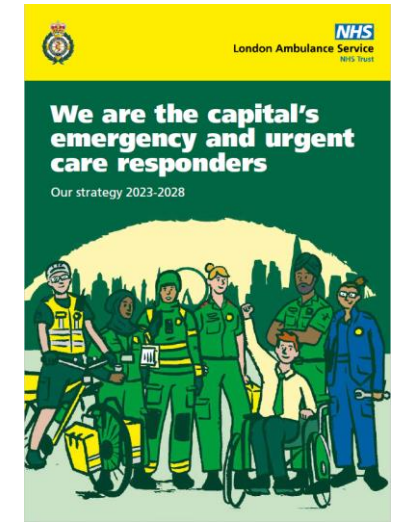


**We are the capital's  
emergency and urgent  
care responders**



# Introduction

Reducing health inequalities experienced by Londoners is one of the key commitments in our LAS five-year strategy, launched in September 2023.



The strategy set out key aspirations and outcomes for this area of improvement work:

- **Developing a 5 year action plan** which will be LAS's contribution to reducing health inequalities experienced by Londoners
- **Strengthening the voice of patients** through our Public and Patients Council and patient engagement activities to inform health inequality work,
- **Tackle health inequality by using our data and reach** to agree with NHS partners on at least two initiatives per year



# Approach and methodology

Our team used the Core20PLUS5 framework for developing evidence-driven approach to HI reduction work.

Core20PLUS5 is a national NHS England approach to support the reduction of health inequalities at both national and system level. The approach defines a target population cohort and identifies '5' focus clinical areas requiring accelerated improvement.

## Core 20

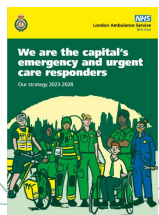
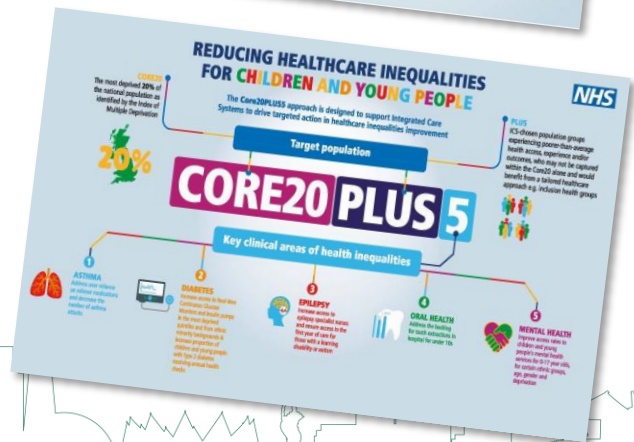
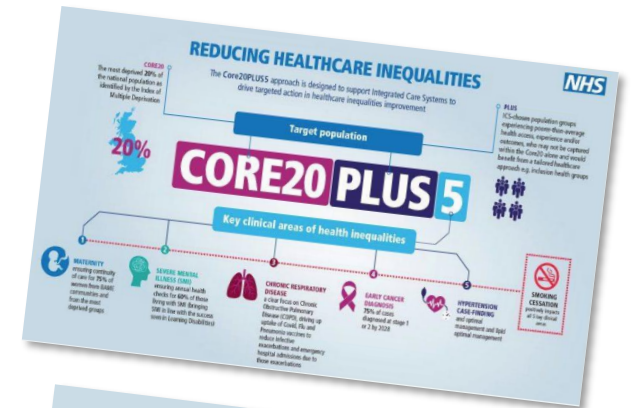
The most deprived 20% of the population (as defined by the Index of Multiple Deprivation)

## PLUS

Locally-identified populations/groups experiencing poorer-than-average health access, experience or outcomes

## 5

Nationally-defined priorities for reducing health inequalities (separated by both adult and children and young people)



# Adapting the Core20Plus5 framework

- 'PLUS' used by ICSs to prioritise their focused initiatives based on local population needs.
- However as LAS spans the whole of London, crossing 5 ICSs
- Not all of the local or national priorities could deliver tangible actions/improvements in ambulance-sector
- We needed to understand our populations and prioritise according to our unique pan-London position and scope of intervention.
- Our mission - identify populations experiencing poorer-than-average health
  - access
  - experience or
  - outcomes)

so that we can identify the patient groups where the biggest change is needed.



# LAS PLUS prioritisation

Between January and March 2024, work focussed on the PLUS, as the HI project team developed a prioritisation tool to narrow our longlist of potential areas to five.

**The full scoring template** which can be viewed in Appendix 1, centred upon the following criteria displayed in the diagram here, with varied weighting for each area.

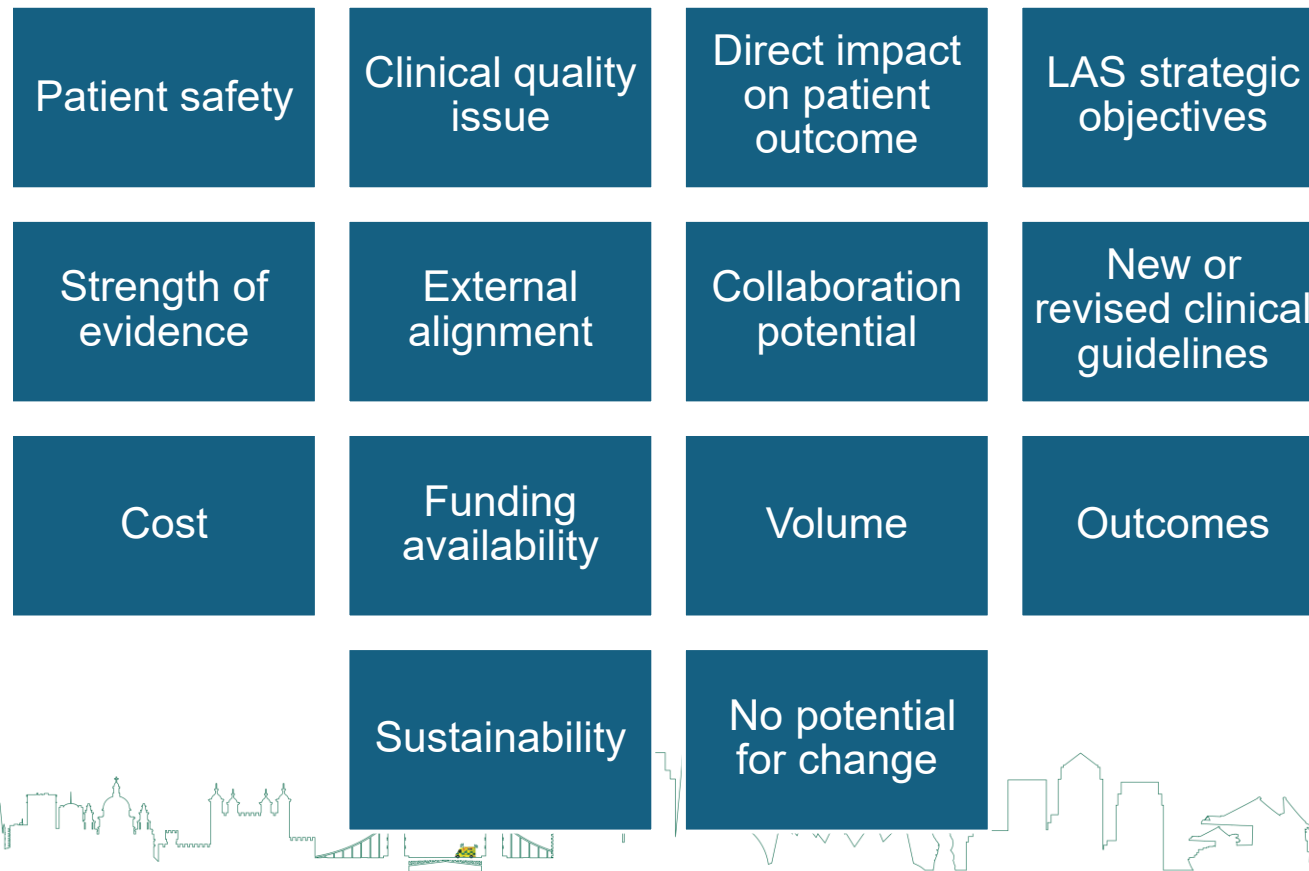
This scoring criteria underpinned a workshop with key staff from across LAS, subject matter experts and patient representatives to discuss prioritisation. Briefing documents were created by the HI project team to provide stakeholders with key information in order to inform and support the prioritisation discussions.

## Information included;

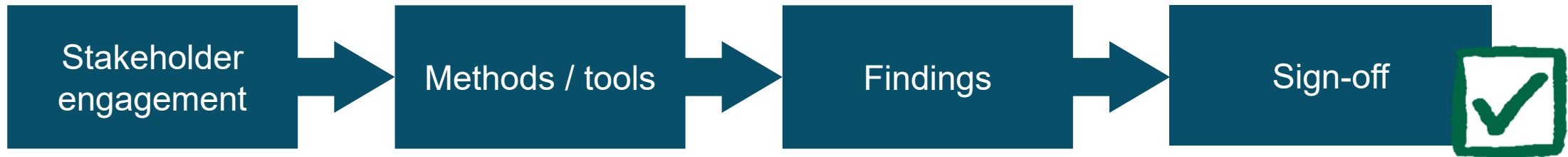
- The definition of the condition/inclusion group
- The prevalence of health inequalities
- Existing local and national quality improvement projects and priorities across the NHS landscape.
- Potential Ambulance Service-specific interventions that could be considered.

**Following the workshop**, the HI project team met to triangulate the outputs from the workshop, volumes of patients identified through data interrogation and known patient safety incidents as identified through the Trusts incident, risk and patient experience database. These were combined to inform the overall scoring and therefore prioritisation ranking.

## Prioritisation criteria (full details in Appendix 1)



# LAS PLUS selection



A long list of potential patient cohorts identified by our staff and clinicians in a workshop, which were then used to scope our LAS Plus.



- Literature Reviews
- Datix Reviews
- Subject Matter Expert input
- LAS clinician and patient input

LAS Plus confirmed:	
1	• <b>Cardiovascular Risk Management</b> (inc Hypertension, Diabetes, Arrhythmias)
2	• Patients experiencing <b>Mental Health</b> crisis
3	• <b>Maternal health</b> (including Global Majority ethnicity and absence of ante-natal care)
4	• Patients with <b>Sickle Cell Disorder</b>
5	• Patients with <b>Autism, Learning Disabilities</b> and/or Neurodiversity.

**Cross cutting themes**  
These will be underpinned by a number of cross-cutting themes



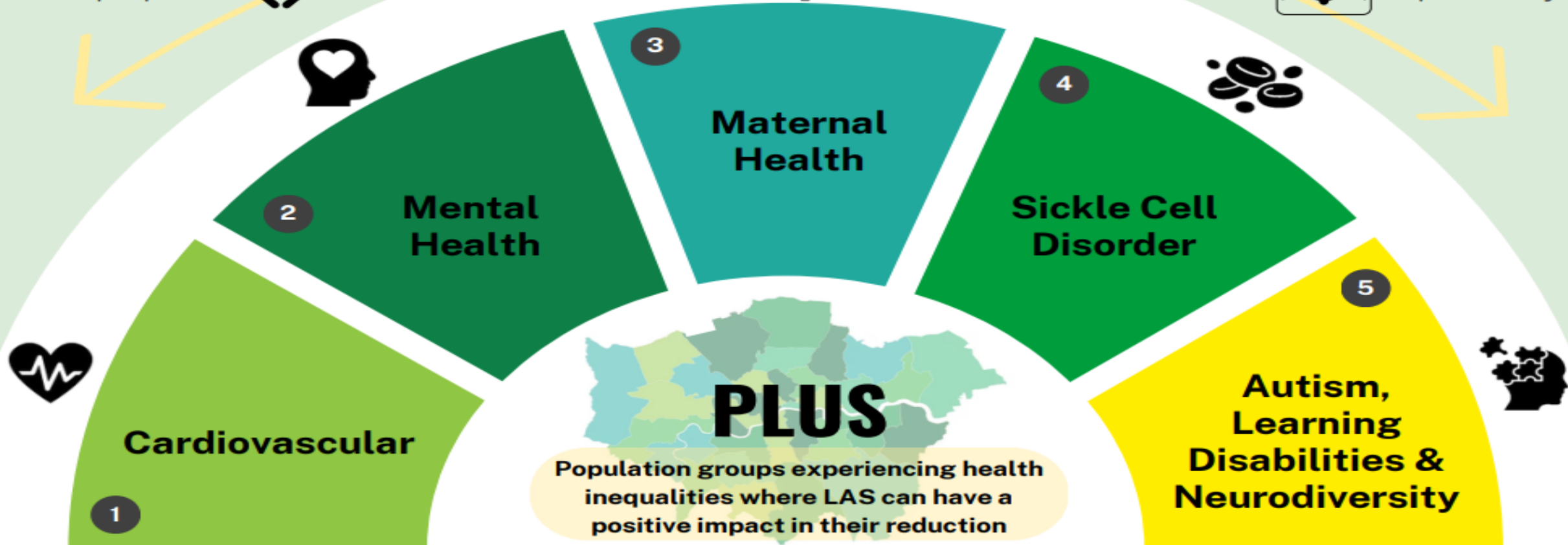


# Our LAS CORE20PLUS5

## CROSS CUTTING THEMES

Ethnicity  
Children & young people

Digital poverty & exclusion  
English language proficiency



# CORE20

20% of London's most deprived neighbourhoods

- London Life Savers
- Public Access Defibs

- Community First Responders
- Response Times

# Appendix 1 - LAS Plus prioritisation scoring criteria

Scoring Template		
Criteria	Definition of Criteria	Scoring
<b>Patient Safety</b>	Were there any potential patient safety incident investigations with this inequality identified as a contributory factor in the previous calendar year?	x 5
		1 2 3 4 5
<b>Clinical quality issue</b>	Is there evidence of a clinical quality issue? E.g. non-PSII incidents, an acknowledged risk, complaint(s) or feedback (from staff, other organisations, patients or the public), patient safety incident(s).	x 5
		1 2 3 4 5
<b>Influence</b>	Is this within LAS control to influence, within the control of the system, or wider?	x 4
		1 2 3 4 5
<b>Direct impact on patient outcome</b>	Is there potential for impact on health outcomes for patients?	x 4
		1 2 3 4 5
<b>LAS strategic objectives</b>	Is the area a strategic objective or priority for the LAS?	x 4
		1 2 3 4 5
<b>Strength of evidence</b>	Is there a strong evidence base that this inequality leads to poorer patient outcomes?	x 3
		1 2 3 4 5
<b>External alignment</b>	Is this inequality aligned with the 5 London ICS priorities and relevant national priorities (core20plus5)	x 3
		1 2 3 4 5



<b>Collaboration potential</b>	Are any of our health, care or emergency services partners already working on this priority and we could join in to collaborate?	x 2
		1 2 3 4 5
<b>New or revised clinical guidelines</b>	Is this in relation to a new or revised clinical guideline, relevant to LAS practice, where unintended consequences may not be fully known? E.g. new drug, intervention or clinical care pathway.	x 2
		1 2 3 4 5
<b>Cost</b>	Is the cost of this project within budget and what cost saving would success of this project bring to BAU?	x 1
		1 2 3 4 5
<b>Funding availability</b>	Is there a deadline associated with funding availability?	x 1
		1 2 3 4 5
<b>Volume</b>	Is there potential to affect large numbers of patients?	x 2
		1 2 3 4 5
<b>Outcomes</b>	Is outcome data available? Can we effectively measure success?	x 1
		1 2 3 4 5
<b>Sustainability</b>	Would this project contradict our environmental and sustainability commitments?	x -4
		1 2 3 4 5
<b>No potential for change</b>	Is the problem amenable to change either internally, externally or nationally?	x -5
		1 2 3 4 5

