POSTER ABSTRACT

Planning health services for the 21st Century; using population health intelligence to guide integrated strategic planning and investment

19th International Conference on Integrated Care, San Sebastian, 01-03 April 2019

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Introduction: The evidence is clear that a positive start to life sets, to a significant extent, a person’s life trajectory. A great start to life is fundamental to lifelong health, wellbeing and learning. It contributes to improved economic prosperity and productivity. Investment in early childhood development creates better education, health, social and economic outcomes that reduce the need for costly social spending. ‘The best investment is in quality early childhood development from birth to five for disadvantaged children and their families’¹.

Short description of practice change implemented: In Queensland, Australia, Children’s Health Queensland Hospital and Health Service (CHQ) has initiated and led cross-Government working to develop a population and social determinant focused ‘health intelligence capability’. The ‘Our Children and Communities Matter’ (OCCM) program integrates population data from multiple Government agency partners to inform strategic and operational planning, identify opportunities to improve efficient and responsive person-centred service delivery and, importantly, translate these findings into practical, outcome orientated service improvements.

Aim and theory of change: The successful transformation of existing models of health service delivery, away from siloed ways of working and an ‘output – activity’ orientation, toward investment led, integrated systems that are person-centred and outcomes driven, will be achieved by those organisations able to understand, harness and utilise population metrics to inform organisational strategy to better predict need and ultimately invest in and configure services that can act early to meet that need.

Targeted population and stakeholders: CHQ is leading the OCCM program and working in partnership with a range of health, education and social care providers and funders across the Queensland context.

Timeline: OCCM was established early 2018.

Highlights (innovation, Impact and outcomes): Due to the intelligence obtained from the OCCM work, a range of targeted service improvements across primary and secondary care and establishment of a school based Community Hub (based in the suburb of Yarrabilba, in partnership with the Qld Department State Development and Queensland Department of Education and Training) have already occurred.

Sustainability: This approach is sustainable within CHQ; however, full scale adaptation is dependent on Government policy. CHQ aims to continue developing the enabling functions required for success (deliver health intelligence capability and cross-sector partnerships), embed existing
place-based activities as business-as-usual, and initiate, establish and embed new place-based activities based on population need and cross-government partnership drivers.

**Transferability**: This approach is transferable to other jurisdictions, as the concept is based on the core principles of best practice and integrated care using a participatory, partnership methodology. The data sets are state-wide, and can thus be deployed at any local level.

**Conclusions, discussions and lessons learned**: This presentation will highlight the importance of cross-agency work and the value of shared population health intelligence in driving integrated strategic planning resulting in service redesign that is outcomes focused and responsive to the needs of the community.

**Reference**:

1- Invest in Early Childhood Development: Reduce Deficits, Strengthen the Economy; Heckman, James, J. 2012.

**Keywords**: population health; cross-agency; health intelligence; childhood; development