



**UCL**

# Health Justice Partnerships

**Network for Justice  
Insights and Learning Session**

25<sup>th</sup> April 2023

A graphic of interlocking gears. One large gear is light blue with a dark blue center, and another is a darker teal. They are set against a teal background.

**Health Justice  
Partnership**

# Next Steps for Health Justice Partnerships

Professor Dame Hazel Genn





**National  
Strategy for  
Health Justice  
Partnerships  
2018-**

# Policy context for Health Justice Partnership



# Death of two-year-old from mould in flat a 'defining moment'

Awaab Ishak died in 2020, eight days after his second birthday, following 'chronic exposure'

As Awaab's parents said:

*"We cannot tell you how many health professionals we have cried in front of and Rochdale borough housing staff we have pleaded to expressing concern ... We shouted out as loudly as we could."*





Law In Action

14 March 2023

Health Justice Partnerships

<https://www.bbc.co.uk/sounds/play/m001k0nn>

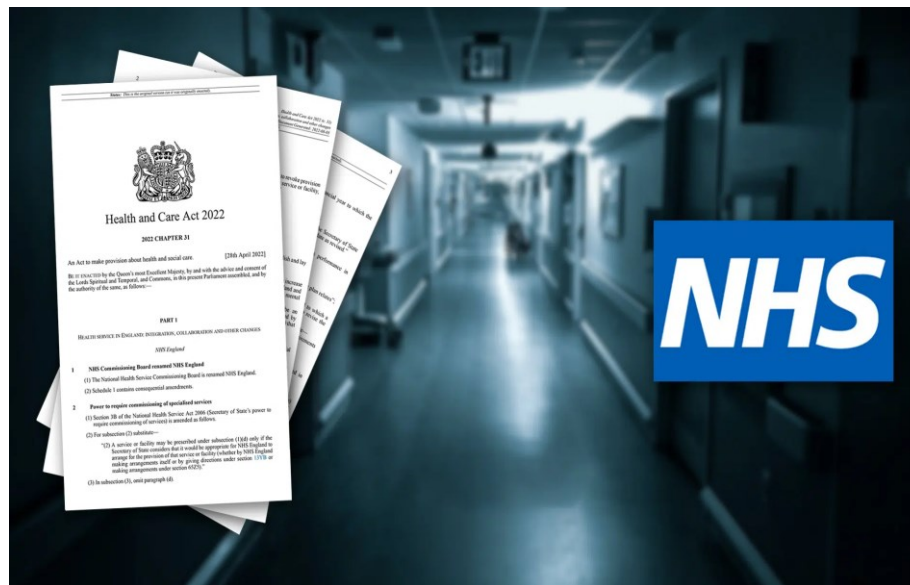
9.04 minutes into  
programme



Ministry  
of Justice

## Legal Support: The Way Ahead

An action plan to deliver better support to  
people experiencing legal problems



# Now is the time for strategic action



## Health and Care Act 2022

2022 CHAPTER 31

An Act to make provision about health and social care. [28th April 2022]

BE IT ENACTED by the Queen's most Excellent Majesty, by and with the advice and consent of the Lords Spiritual and Temporal, and Commons, in this present Parliament assembled, and by the authority of the same, as follows:—

### PART 1

#### HEALTH SERVICE IN ENGLAND: INTEGRATION, COLLABORATION AND OTHER CHANGES

##### *NHS England*

#### 1 NHS Commissioning Board renamed NHS England

- (1) The National Health Service Commissioning Board is renamed NHS England.
- (2) Schedule 1 contains consequential amendments.

#### 2 Power to require commissioning of specialised services

- (1) Section 3B of the National Health Service Act 2006 (Secretary of State's power to require commissioning of services) is amended as follows.
- (2) For subsection (2) substitute—

"(2) A service or facility may be prescribed under subsection (1)(d) only if the Secretary of State considers that it would be appropriate for NHS England to arrange for the provision of that service or facility (whether by NHS England making arrangements itself or by giving directions under section 13YB or making arrangements under section 65Z5)."
- (3) In subsection (3), omit paragraph (d).

# Health service context Health & Care Act 2022

## Use of non-medical interventions to promote health and reduce inequalities

## Integrated Care Systems: statutory 'duty to collaborate'

## Cross-sector partnerships with VCS organisations



# Integrated care systems (ICSs)

Key planning and partnership bodies from July 2022

**NHS England**  
Performance manages and supports the NHS bodies working with and through the ICS

**Care Quality Commission**  
Independently reviews and rates the ICS

## Statutory ICS

**Integrated care board (ICB)**

**Membership:** independent chair; non-executive directors; members selected from nominations made by NHS trusts/foundation trusts, local authorities, general practice; an individual with expertise and knowledge of mental illness

**Role:** allocates NHS budget and commissions services; produces five-year system plan for health services

**Integrated care partnership (ICP)**

**Membership:** representatives from local authorities, ICB, Healthwatch and other partners

**Role:** planning to meet wider health, public health and social care needs; develops and leads integrated care strategy but does not commission services

Cross-body membership, influence and alignment



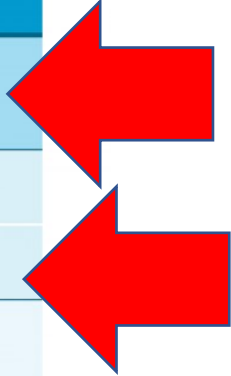
Partnership and delivery structures		
	Name	Participating organisations
<b>System</b> Usually covers a population of 1-2 million	<b>Provider collaboratives</b>	NHS trusts (including acute, specialist and mental health) and as appropriate voluntary, community and social enterprise (VCSE) organisations and the independent sector; can also operate at place level
<b>Place</b> Usually covers a population of 250-500,000	<b>Health and wellbeing boards</b>	ICS, Healthwatch, local authorities, and wider membership as appropriate; can also operate at system level
	<b>Place-based partnerships</b>	Can include ICB members, local authorities, VCSE organisations, NHS trusts (including acute, mental health and community services), Healthwatch and primary care
<b>Neighbourhood</b> Usually covers a population of 30-50,000	<b>Primary care networks</b>	General practice, community pharmacy, dentistry, opticians

**Geographical footprint**

**System**  
Usually covers a population of 1-2 million

**Place**  
Usually covers a population of 250-500,000

**Neighbourhood**  
Usually covers a population of 30-50,000



# Legal services context

**Early resolution**

**Targeted assistance**

**Integration with healthcare**

**Co-locate services**



# Welfare Advice and Health Partnerships

## [WAHPs] 2021 - £3m+ investment



The Scottish Government



- Reduce pressure on GPs and primary care services
- Allow them to focus on clinical care and treatment for patients
- Dedicated advisor addresses patients' social and economic needs

### 2022 Nicola Sturgeon extends funding


*“Dedicated money and welfare advice in the same location where people are already receiving mental and physical health support is about providing people with more convenient access to the help they need, whilst also reaching those who do not engage with traditional advice services.”*



Forge Medical Practice Glasgow 2022

# Professional and Interprofessional Education





**Recognising the  
need for legal  
assistance is not  
intuitive to health  
professionals**

# Medical education

## Education and training essential for effective HJP collaboration

Traditional focus on knowledge-based learning (legal and medical)

Scope for more context-based problem-solving education

## Knowledge, skills, mindset and approach

Social/economic determinants of health and how they manifest as legal needs.

Confidence and skills to analyse root causes of problems



# What can clinicians do?

- Team-based problem-solving for complex patients
- Knowledge of community resources and barriers to those resources
- Community partnerships
- Advocacy for policy and system change



# Breaking down educational disciplinary silos is helpful

## Value of interprofessional education

### Legal and medical professionals share core values

Fiduciary duty to patient/client

Evidence based decisions

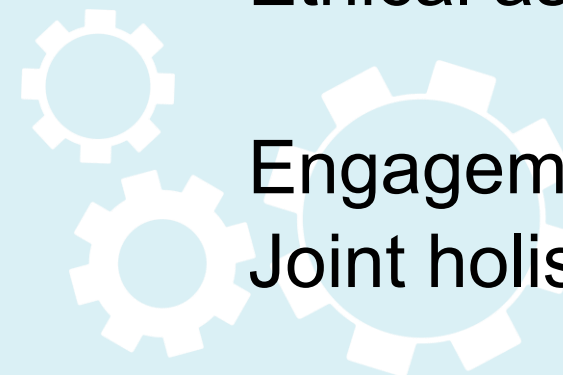
Value of professional judgement and experience

Shared focus on social inequality and effect on health

Ethical aspirations and obligations to provide services to the poor

Engagement with social inequity

Joint holistic approach to complex challenges







# **Health Justice Partnerships**

## **Where now?**

**Co-ordinated policy**

**Focus on benefit to the public**

**Funding**

**Evaluation**

**Professional education**

Thank you!  
Any questions?

[https://www.ucl.ac.uk/health-of-public/sites/health\\_of\\_public/files/law\\_for\\_health\\_hjp\\_final.pdf](https://www.ucl.ac.uk/health-of-public/sites/health_of_public/files/law_for_health_hjp_final.pdf)

