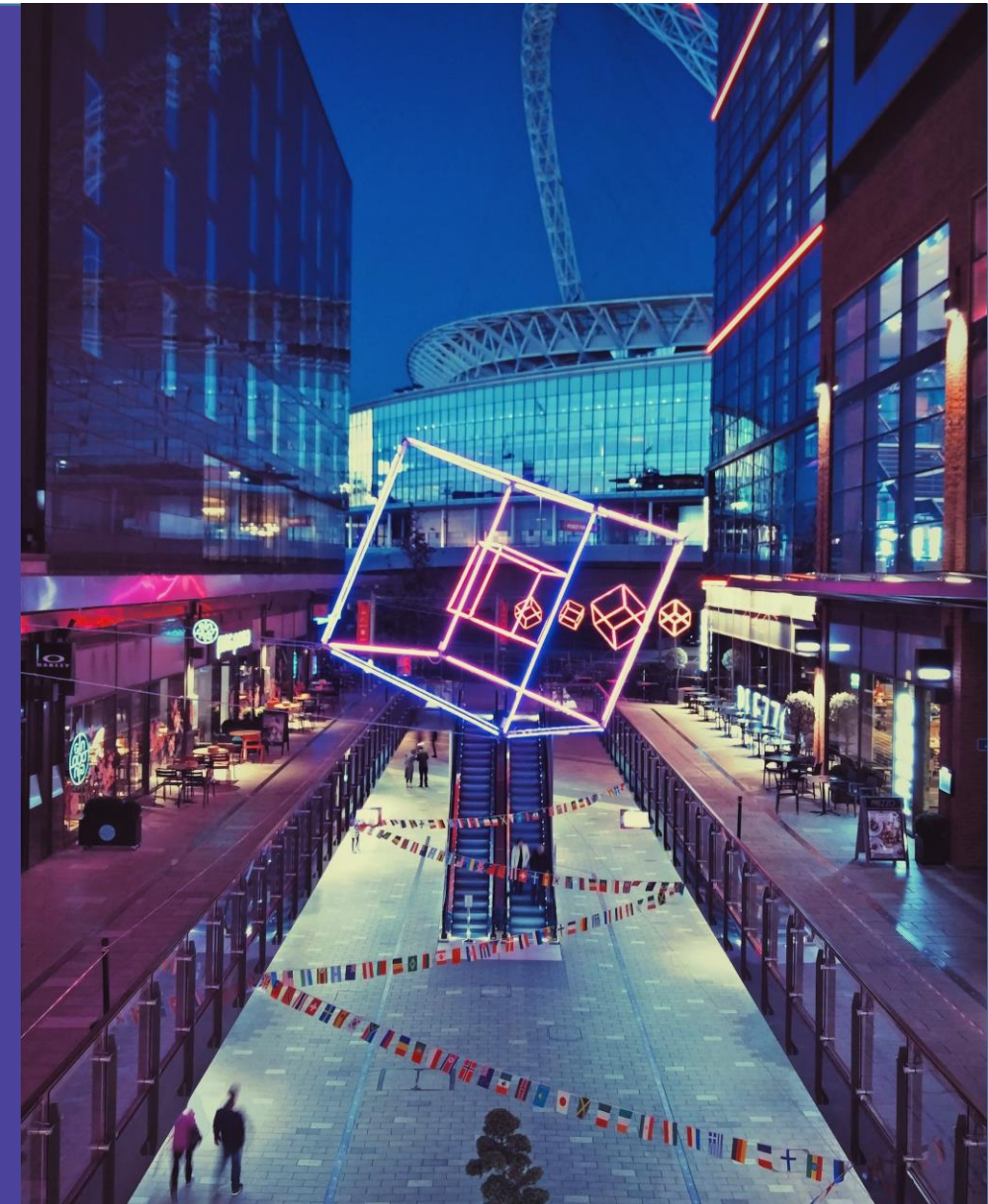


North West London Evaluation Toolkit

Launch Webinar: Thursday 10 April, 2.15pm



Professor Bob Klaber

Director of Strategy, Research and Innovation
Imperial College Healthcare NHS Trust

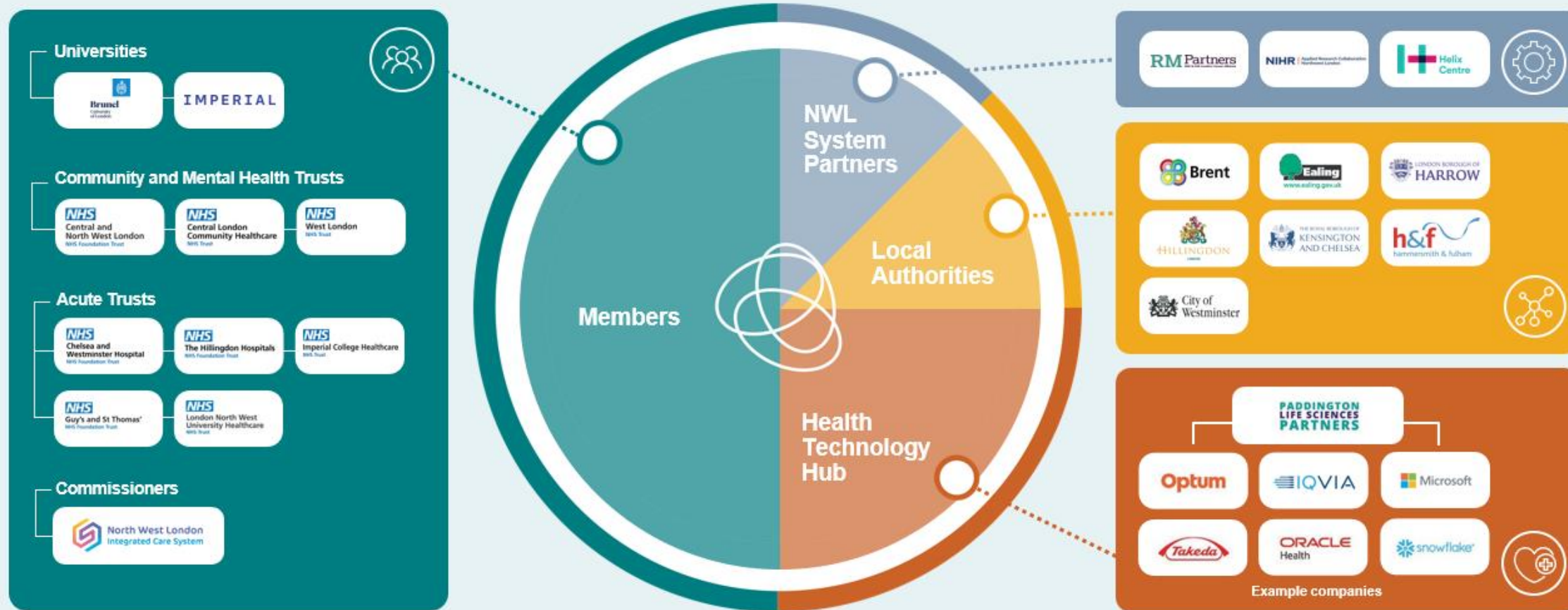


Welcome and housekeeping

- Welcome to the launch of a brand new evaluation resource for North West London!
- Please keep your microphones on mute until the Q&A
- Feel free to drop questions, comments or reflections into the chat as we go



NW London is lucky to have a rich ecosystem of research and innovation partners...



Evaluation to support system-wide decision-making

“Our ICS needs to become a learning system that applies best evidence to make sure we are doing the right things, avoiding the pressure to defend the status quo or expend effort implementing ineffectual and unevidenced initiatives.”

NW London ICS Health and Care Strategy – Research & Innovation

Today's Agenda

- **Background and Context**

- **Matthew Chisambi**, Director at Imperial College Health Partners

- **Live Demo of the Website**

- **Matthew Harmer**, Head of Population Health Management at North West London Integrated Care System

- **Evaluation Case Study**

- **Grazia Antonacci**, Deputy Lead for the Innovation and Evaluation Theme at NIHR ARC NWL
- **Trecina Allen**, Health Improvement Programme Manager at Chelsea and Westminster Hospital
- **Ghaida Al-Jaddir**, Paediatric Dentistry Consultant/Service Director at Chelsea and Westminster Hospital

- **Support Offer: Evaluation Surgeries**

- **Matthew Chisambi**, Director at Imperial College Health Partners

- **Q&A**

Matthew Chisambi

Director
Imperial College Health Partners



North West London Evaluation Consortium

NW London Research and Innovation Board



NW London Evaluation Consortium

Founding members

NW
London
ICS

ICHP

Imperial
College
Healthcare
Trust

Imperial
College
London

Brunel
University

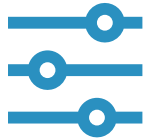
NIHR ARC
NWL

3ST

Why this collaborative approach?



- **Improve the evaluation capability** of health and care staff in NW London



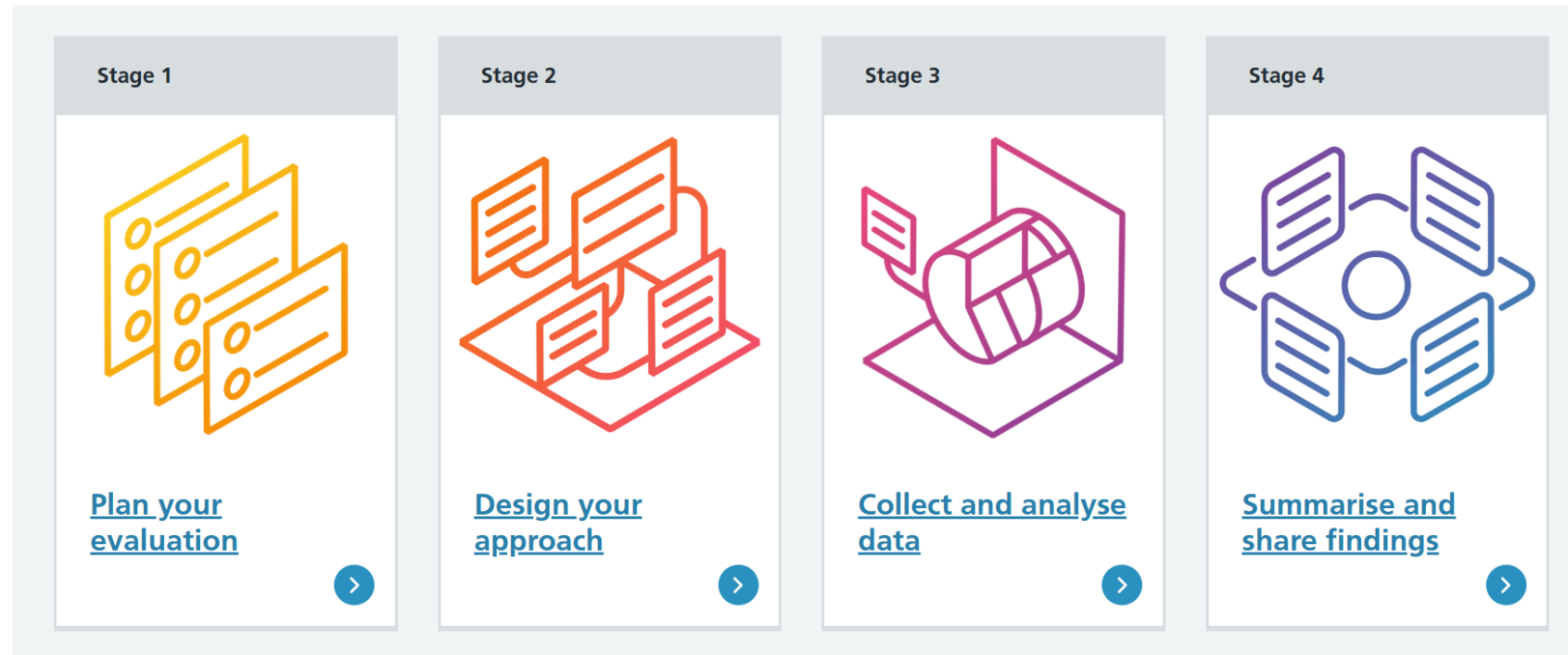
- **Standardise the approach** we use to do evaluation in NW London



- **Enable improved decision-making** through better use of qualitative and quantitative evidence

Why evaluation?

As a health and care system we want to make choices about how best to serve and improve the health and wellbeing of our community, while making the most of the limited resources we have.



And the best way to determine that we are spending our finite resources on initiatives that have the greatest impact? Effective evaluation.

North West London Evaluation Toolkit

Website to serve as the future home of evaluation for the NW London health & care system.



<https://www.nwevaluationtoolkit.org.uk/>

Key features:

- The agreed four-step standardised approach to evaluation for our system
- Tools, resources and guidance to support users to conduct their own evaluations
- Signposting for users to access expert evaluation support via the Consortium

Matthew Harmer

Head of Population Health Management
North West London Integrated Care System



Grazia Antonacci

Deputy Lead for the Innovation and Evaluation Theme
NIHR ARC NWL



Evaluation of a targeted universalism, paediatric oral health promotion programme in a hospital setting



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The Problem

- Tooth decay: most common reason for child hospital admissions (5–9 yrs)
- £33M annual NHS cost
- CWFT catchment: 3 in 10 children with visible tooth decay
- In 2016–17: 1,555 extractions, 85% with multiple extractions, 2/5 from most deprived areas



The Programme

- A three-year programme (2019-2021)
 - Multi-partner oral health programme (OHP)
 - Delivered using a targeted universalism approach
-
- Aim: to equitably improve the oral health of paediatric patients admitted to CWFT through 3 intervention components:
 - (i) promotion activities (HPA)
 - (ii) Evidence-based targeted supervised toothbrushing (STB)
 - (iii) Tailored oral health (OH) staff training



Intervention Design

- Developed and overseen by an OHP team (RBKC public health department, PHE and CWFT)
- Quarterly governance meetings
- Evaluation supported by NIHR ARC NWL
- Delivery and monitoring supported by CWFT



Chelsea and Westminster Hospital **NHS**
NHS Foundation Trust



Public Health
England



THE ROYAL BOROUGH OF
KENSINGTON
AND CHELSEA

NIHR | Applied Research Collaboration
Northwest London

Measurement

Data collection (November 2019 and August 2021)

- STB and HPA – bedside survey
- Training - online booking platform and an online staff feedback survey

Data analysis

- Statistical Process Control (SPC) charts
- Summary statistics and
- Qualitative analysis



Results

Health promotion

- 93 posters/ videos deployed
- 41% of families recalled seeing OHP materials across the hospital site (lower amongst Asian British -29.3% vs White or White British ethnicity -46.0%)



STB

- 737 children received STB (57% belonged to BAME; 54% from deprived areas)
- 96% learned something new; 91% committed to change
- 100% signposted to dental services

Training

- 737 children received STB (57% belonged to BAME; 54% from deprived areas)
- 96% learned something new; 91% committed to change
- 100% signposted to dental services

BMJ Open Quality Oral health promotion in acute hospital setting: a quality improvement programme

Grazia Antonacci ^{1,2}, Laraib Ahmed,³ Laura Lennox,¹ Samuel Rigby,³ Sophie Coronini-Cronberg ^{1,4}

To cite: Antonacci G, Ahmed L, Lennox L, *et al*. Oral health promotion in acute hospital setting: a quality improvement programme. *BMJ Open Quality* 2023;**12**:e002166. doi:10.1136/bmjopen-2022-002166

► Additional supplemental material is published online only. To view, please visit the journal online (<http://dx.doi.org/10.1136/bmjopen-2022-002166>).

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ABSTRACT

Tooth extraction is the most common hospital procedure for children aged 6–10 years in England. Tooth decay is almost entirely preventable and is inequitably distributed across the population: it can cause pain, infection, school absences and undermine overall health status.

An oral health programme (OHP) was delivered in a hospital setting, comprising: (1) health promotion activities; (2) targeted supervised toothbrushing (STB) and (3) staff training. Outcomes were measured using three key performance indicators (KPI1: percentage of children/families seeing promotional material; KPI2: number of children receiving STB; KPI3: number of staff trained) and relevant qualitative indicators. Data were collected between November 2019 and August 2021 using surveys and data from the online booking platform.

OHP delivery was impacted by COVID-19, with interventions interrupted, reduced, eliminated or delivered differently (eg, in-person training moved online). Despite these challenges, progress against all KPIs was made. 93 posters were deployed across the hospital site, along with animated video 41% (233/565) of families recalled seeing OHP materials across the hospital site (KPI1). 737 children received STB (KPI2), averaging 35 children/month during the active project. Following STB, 96% participants stated they learnt something, and 94% committed to behaviour change. Finally, 73 staff members (KPI3) received oral health training. All people providing feedback (32/32) reported learning something new from the training session, with 84% (27/32) reporting that they would do things differently in the future.

Results highlight the importance of flexibility and resilience when delivering QI projects under challenging conditions or unforeseen circumstances. While results suggest that hospital-based OHP is potentially an effective and equitable way to improve patient, family and staff

WHAT IS ALREADY KNOWN ON THIS TOPIC

- ⇒ Tooth extraction is the most common hospital procedure for children aged 6–10 years in England.
- ⇒ Tooth decay is almost entirely preventable and is inequitably distributed across the population.
- ⇒ Oral health education and promotion can be effective in improving oral health literacy and stimulating positive behaviour change, particularly when based on the Health Belief Model and when involving both parents/carers and children.

WHAT THIS STUDY ADDS

- ⇒ The implementation of an Oral Health Programme (OHP) in a 'non-traditional' health promotion and prevention setting, is potentially an effective and equitable way to improve knowledge of good oral health practices and encourage positive behaviour change.
- ⇒ The use of patient demographic data throughout the intervention allowed for enhanced services and supported the monitoring of health inequalities.

HOW THIS STUDY MIGHT AFFECT RESEARCH, PRACTICE OR POLICY

- ⇒ Health promotion programmes deploying a targeted universalism approach in a hospital setting could potentially be an effective approach to equitable population health improvement.
- ⇒ Key OHP components and overall learning could be applied to other National Health Service hospitals.
- ⇒ Future work should include rigorous 'down stream' evaluations to demonstrate long-term impact, for example, future dental decay rates in those receiving supervised toothbrushing.

Challenges and learning

- COVID-19 paused some activities
- Staff availability influenced reach
- Needed a flexible delivery model
- Evaluation highlighted real-time issues



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¹Department of Primary Care and Public Health, National Institute for Health and Care Research (NIHR) Applied Research Collaboration (ARC) Northwest London, Imperial College London, London, UK
²Imperial College Business

Paediatric Oral Health Evaluation - Impact on ChelWest

Ms Ghaida Al-Jaddir

**Paediatric Dentistry
Consultant/Service Director**

Trecina Allen

**Health Improvement
Programme Manager**

1. Recommended next steps from the Evaluation

Targeted Universalism



“Teachable Moment” in the hospital setting

Dental extraction
admissions insight

Health equity insight –
ethnicity and
deprivation

Sustainable
intervention into BAU

Behaviour change
follow-up
- Post-discharge



■ 2. Impact and value-add from the Evaluation

Unlocking funding

- The department has since transitioned under WLCH
- Potential alignment under borough level Obesity agendas

Review and scale-up

- ✗ Basic oral health screening tool was not scalable
- ✓ Oral Health training embedded into staff training programme

Patient outcomes and productivity

- 100% antenatal class attendees would change their habits
- Health messaging at inpatient ward level

Value add

- Downstream behaviour change from ward to families
- Interface with Play Team intervention



Matthew Chisambi

Director
Imperial College Health Partners

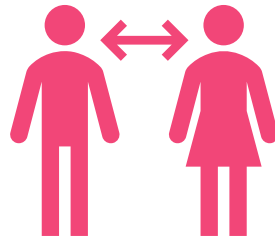


What are Evaluation Surgeries?

As part of our support offer, and in order to operationalise evaluation across North West London, we are introducing bespoke Evaluation Surgeries to provide support and advice to users.



60 minute



Tailored support



Connect with experts

The aim of these surgeries is to empower NW London staff to plan and carry out effective healthcare evaluations

How does it work?



**Complete our
Outcomes
Measurement Tool**



**Fill in our
Evaluation Surgery
sign-up form**



**The Consortium
will match you to
an expert**



**A 60-minute
session will be
added to your diary**

Who is it for?

- **Any health, care, research or innovation staff** in NW London
- Colleagues seeking help with an **evaluation they are conducting or planning**
- This could be a **frontline delivery staff member** who has little evaluation experience...
- ... or a colleague relatively experienced in evaluation and looking for **more specialist expertise**

Q&A

Over to you!

Thank you!

Visit the North West London Evaluation Toolkit at nwlevaluationtoolkit.org.uk