



# Health Ecosystem Roundtable



# A word from our Secretary of State's office



Wes Streeting,  
Secretary of State for Health and Social Care

The vision set out in the 10 year plan for health wasn't about fixing the NHS so it catches up to where it should be. It was about a **leapfrog to propel our nation's most treasured public service** to the leading edge of innovative care. Neighbourhood health is at the heart of that change.

We all know that shifting activity out of acutes isn't a new ambition for our health service. We've been saying it for decades. We're all agreed on the what - **this is about the how**.

Neighbourhood health is not about doing more of the same, just closer to home. It's about a **fundamental reorganisation of how we deliver care and transformed services**. It's hybrid by design so it's as much about clicks as it is bricks.

And if Wes was here, he'd say that part of the reason we've previously failed to do the hospital to community shift was that we've failed to harness the **cross societal energy** we have got to create a **healthier nation** and the NHS has tried to go it alone. That's where you come in.

It's only through **active partnership and learning** from each other that we achieve our aims so together I hope that's what we can achieve

# Agenda

| Time          | Topic                                                                                                |
|---------------|------------------------------------------------------------------------------------------------------|
| 12:45 - 13:30 | <b>Lunch and networking</b>                                                                          |
| 13:30 - 13:50 | <b>Introduction</b>                                                                                  |
| 13:50 - 14:50 | <b>Consumer Empowerment:</b> How could we empower people to take informed ownership of their health? |
| 14:50 - 15:05 | <b>Break</b>                                                                                         |
| 15:05 – 15:50 | <b>Critical Enablers:</b> What needs to be in place to deliver Neighbourhood Health at scale?        |
| 15:50 - 16:00 | <b>Next Steps</b>                                                                                    |
| 16:00 – 16:20 | <b>Reflections and close</b>                                                                         |

# Objectives



To bring cross sector senior leaders together to shape a **shared strategic perspective on the future of the neighbourhood health** ecosystem.

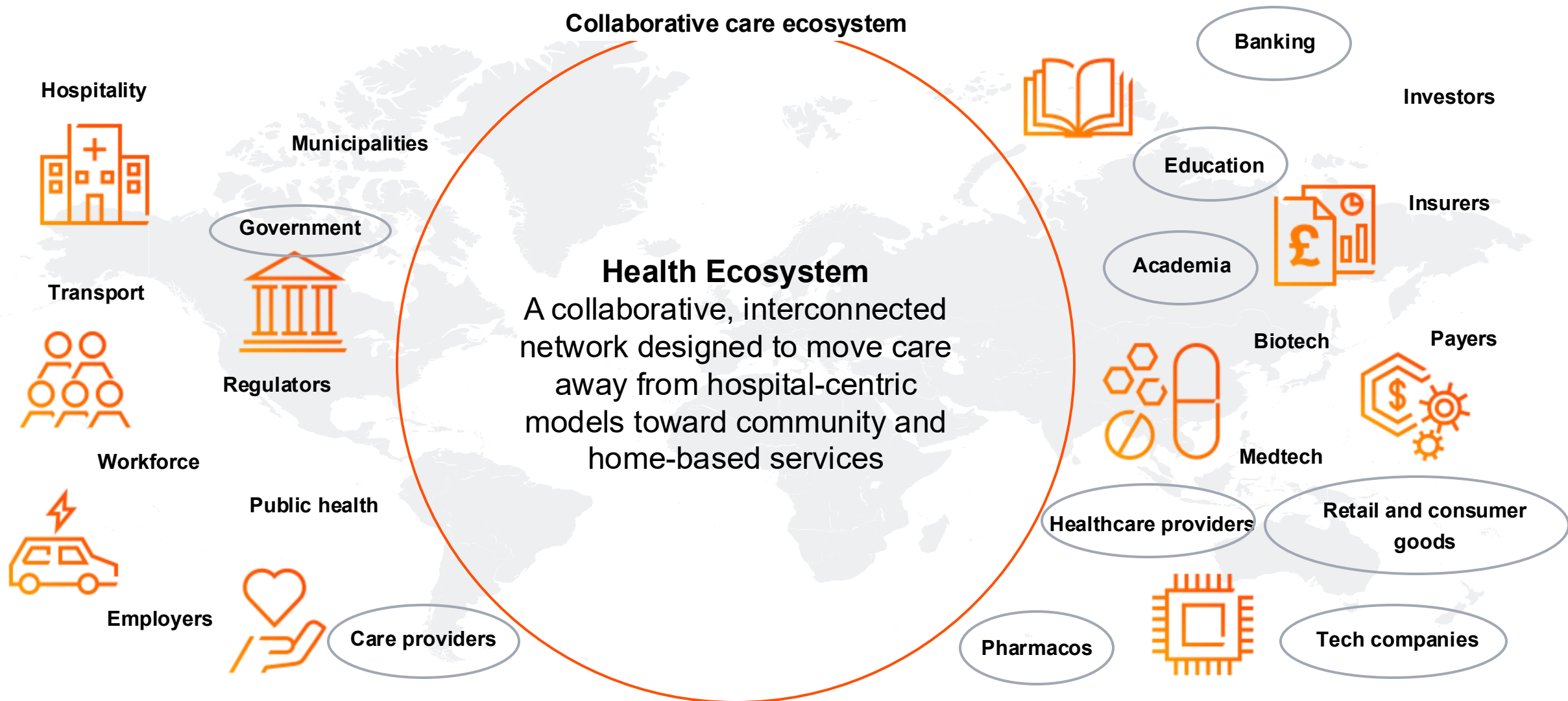


Align on the most **critical opportunities and tensions** across neighbourhood health.



Inform **where investment should be directed to drive long-term outcomes** and incubate relationships to catalyse collaboration.

# Definition of the Health Ecosystem and players in the room today



# Attendees

Senior leaders across Government, the NHS, industry and academia

## Government & NHS

- Sam Jones** – Permanent Secretary, **DHSC**
- Eleanor Johnson** – Neighbourhood Health, **DHSC**
- Paul Maubach** – Director for Neighbourhood Health, **DHSC**
- Chris Thomas** - Policy and Transformation Advisor to the Permanent Secretary – **DHSC**
- Sally Warren** – DG, Adult Social Care - **DHSC**
- Paul Dinkin** - Director General, (DG Strategy and Healthcare Policy) - **DHSC**
- Claire Fuller** – Medical Director - **NHSE**

## Industry

- Victoria Graham** – Director, Healthcare, Corporate & Institutional Coverage, **Lloyds Banking Group**
- Distie Profit** – Vice President & Country General Manager, **Oracle Health**
- Magnus Hibbert** – Senior Vice President, Human Resources, **GSK Research & Development**
- Greg Pateras** – Chief Executive Officer, **Bestway Healthcare**
- Jennifer Scott** - Head of Healthcare, Commercial Banking Intermediaries, **Lloyds Banking Group**

## Innovation & Academia

- Roland Sinker** – Inclusive Innovation and Growth Lead, **University of Cambridge**
- Ben Bridgewater** – Chief Executive Officer, **Health Innovation Network, Manchester**

## PwC

- Rachel Taylor** – UK Government & Health Industries Leader
- India Hardy** – UK Health Services Leader
- Juliet Panissié** - UK Health Industries Market Activation Lead
- Raees Lunat** – Clinical Lead, Strategy & UK
- Elliot Richards** – Strategy & Innovation
- Cat Parry** – Strategy

ATTRACTIVE  
collaborations

PUBLIC and  
PRIVATE

PARTNERSHIPS  
to IMPROVE lives

SERVICES  
are  
~~DIVIDED~~

WHAT does HEALTH  
look like in  
a CONTEXT of  
CONSTANT

CHANGE?

community  
HEALTH requires  
an ECOSYSTEM

WELCOME  
to the  
NEIGHBOURHOOD  
health  
ROUND  
TABLE

EMBANKMENT  
PLACE. 12.05.26

NEED a  
MINSET  
→ shift  
and

CULTURE change

rethink INCENTIVES

OWNERSHIP and CONTRIBUTIONS

PREVENTION

INTEGRATED  
services

DIGITAL



EMPOWERED  
citizens

What can we

LEARN?

What can we

GET out of the WAY?

- TOP-DOWN leadership
- STRATEGIC
- CONSUMER focus

at the  
CENTRE  
of it ALL

FRONT and  
CENTRE  
of the 10 year  
PLAN...

a PLACE BASED  
MODEL

HUGE  
opportunity  
to SCALE

RESPONSIBLY  
+ ACCOUNTABLY...

PERSONALISED  
INNOVATIVE  
disruptive  
TRANSFORMATIVE  
INVESTABLE

# Consumer Empowerment

# Consumers are increasingly looking for personalised, digital healthcare with greater choice as well as an experience that goes beyond silos

Healthcare consumers are increasingly focused on:



## Personalisation

Tailored treatments and health plans based on individual lifestyles, genetics, and preferences.



## Digitalisation

The ability to manage their care and access information digitally as well as access convenient services through telemedicine and mobile apps



## Choice

The ability to make informed choices about where and how they receive care.



## Integration

Consumers are looking beyond traditional providers to support their health and prevention, e.g. tracking apps, wearables, transport, etc.

### Case Study: NOOM personalised weight management

Noom is a best-in-class example of a digital health company helping consumers take control of their weight through personalised, tech-driven recommendations for weight management beyond traditional provider settings.

Key features include:

1. **Personalisation:** Users are provided with personalised, science-backed courses to build sustainable habits.
2. **Digital:** The digital service offering enables users to access weight management care anytime, anywhere whilst maintaining access to a personal human coach.
3. **Convenience / patient choice:** Noom has an integrated GLP-1 prescription service through which users can obtain an online prescription via virtual consultation.

# Consumer Empowerment

How could we empower people to take informed ownership of their health?



How has your organisation or sector shifted towards personalised services and what lessons did you learn?



How could your organisation play a role in delivering localised health care?

BREAKS ILLOS  
and  
INNOVATE  
for  
EQUALITY

PLACE-BASED  
interventions  
SUPPORT in the  
COMMUNITY

health  
LIFE-  
STYLE  
EDUCATION  
LIFE CIRCUMSTANCE

LONG-  
TERM  
funding for  
HEALTH OUTCOMES...

PRIORITISE  
and SCALE?

pwc

DEPARTMENT of HEALTH & SOCIAL CARE

LIFESCIENCES  
BETTER STANDARDS  
for DATA INTEROPERABILITY  
for PERSONALISED  
care...  
DATA OWNERSHIP  
→ When a  
who to share  
with?

LIFE  
STYLE  
VS HEALTH  
DATA...

HOLISTIC  
view  
of  
PEOPLE

WHAT'S  
the  
PLAY &  
RETURN?

GENOMICS  
The right  
INVESTMENT?

BUILD  
Trust!

EMPOWER  
employees  
to ADVISE for  
better OUTCOMES  
→ PHARMACISTS  
→ GPs  
→ etc

SHARE  
anonymised  
DATA...

LEARN from  
CUSTOMER  
BEHAVIOUR

PREDICT  
and RECOMMEND  
move  
focus on  
SENSITIVE  
ANALYSIS...

ALREADY collecting  
DATA for  
INSIGHTS.  
DESIGN-MAKING  
BETTER PERFORMANCE  
and  
DIAGNOSTICS

WORK as  
an  
ECOSYSTEM  
and  
REMOVE  
barriers for  
ENGAGEMENT



HOSPITAL

vs the  
jungle

COMMUNITY/  
GP...

YOU DON'T KNOW what  
you'll GET

CONSUMER  
EMPOWERMENT

PERSONALISATION • CHOICE  
INTEGRATION • DIGITALIZATION

BALANCE DISRUPTION  
and DELIVERY for the FUTURE



# Critical Enablers

# Delivering Neighbourhood Health at scale would require key enablers aligned across the entire healthcare system

Successful delivery of Neighbourhood Health would require key enablers including:

| Infrastructure                                                                                                                                                                            | Technology & Data                                                                                                                                                                                                                                                                                                                                                       | Partnerships                                                                                                                                                      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Investment in neighbourhood health centres as local “one-stop shops”</p> <p>Modern, accessible estates designed for multi-disciplinary teams that support integrated care delivery</p> | <p>Digital-first access through online prescription services, telemedicine, etc.</p> <p>Shared patient records that follow individuals across services</p> <p>Data-driven, proactive care, moving from reactive contact to anticipatory intervention</p> <p>Harnessing AI to deliver low-cost personalised care and save clinician time to enable more F2F contact.</p> | <p>Holistic integration across healthcare providers, primary care and social care</p> <p>Clear roles for private, voluntary and community sectors in delivery</p> |

## Why this matters

Without these enablers, neighbourhood health remains aspiration, not reality. They are critical component in unlocking Scale, Integration, Productivity across the entire health ecosystem leading to patient outcomes.

## Case Study: Women’s Health Hubs (Tower Hamlets)

Women’s health hubs have emerged in response to fragmented service provision, where women often have multiple appointments in different settings, which exacerbates health inequalities for women less able to navigate a complex system.

They bring together women’s health services as well as public health education in preconception care and cervical screening.

At the Tower Hamlets Health Hub (launched Dec 2023), all non-urgent referrals to gynae are first triaged through the hub as a single point of access. A high proportion are then offered an appointment in the hub, enabling women to receive care more quickly in a neighbourhood setting.

### Key learnings:

- **Multidisciplinary:** the hubs harness the skills of multidisciplinary teams.
- **Partnerships:** collaborative commissioning between NHS and local authorities supports streamlining of appointments (and therefore improved patient experience).
- **Digital:** the hubs use virtual engagement events and virtual group consultations to provide advice and care at scale and cost-effectively.

# Critical Enablers

What needs to be in place to deliver Neighbourhood Health at scale?



What would successful partnership working look like for your organisation?



How could we use AI to accelerate progress and how do we bring our stakeholders on this journey with us?

# CRITICAL enablers...



REALTIME DATA  
and THINK of REASONS  
Why we SHOULD use it

Previous attachment

DON'T NEED more  
TECH. but  
USE BETTER  
WHAT we  
HAVE...



best for  
PREVENTION  
THEN  
A.I.

CONGRUENCE  
PREVENTION  
COST

TRUST in  
LIFE SCIENCES  
and across the  
ECOSYSTEM

ACCESSIBLE, GOOD DATA SETS

it's a PEOPLE  
and ORG ISSUE  
but ENCOURAGE  
use of TECH

TRANSPARENT  
CLEAR partnerships

"WILL  
not  
SKILL"

the  
ART of the  
POSSIBLE

AI LEADERSHIP  
efficiencies  
INNOVATION  
DATA  
DIGITAL  
inclusion

organise  
& have a COHERENT  
MODEL to be  
ATTRACTIVE &  
INVESTABLE



they INCREASE  
CHANCE of SUCCESS!  
a CLEAR SHARED  
GOAL

and  
TIME for  
relationships



MOST COMPLEX  
CASES  
WILL NEED SPECIAL  
attention

we've TRIED this BEFORE...  
WHAT WILL be DIFFERENT?

# Thank you

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