



# PHE Board Paper

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| <b>Title of meeting</b> | PHE Board   |
| <b>Date</b>             | Wednesday 30 April 2014                               |
| <b>Sponsor</b>          | Jonathan Marron, Director of Strategy                 |
| <b>Presenter</b>        | Charles Alessi, Senior Advisor to PHE on Primary Care |
| <b>Title of paper</b>   | Personalisation of Healthcare                         |

## 1. Purpose of the paper

- 1.1 The purpose of the paper is to set the context and introduce the broad themes for a discussion (led by Dr Charles Alessi) on what opportunities advancements in both communications technologies and science; and the emergence of better informed patients could offer health systems in engaging entire populations of consumers, to manage their health and wellness.

## 2. Recommendation

- 2.1 The Advisory Board is asked to **NOTE** this introductory brief and **COMMENT** on the presentation on personalisation of healthcare.

## 3. Background

- 3.1 Personalisation in healthcare is not a new concept. In its traditional sense personalisation means that individuals are able to seek healthcare services and treatment tailored to meet the unique challenges of a particular disease or condition they are experiencing. This traditional interpretation of personalisation focuses on delivering services to treat, manage, or cure disease, illness, or injury; they are not so much “healthcare” systems, but rather, “disease management” systems.
- 3.2 The traditional approach does not focus on whether health systems are delivering value to the populations they are mandated to serve, either in terms of the nature of what they are delivering or in terms of the fact that people want to be treated as people and not the carrier of a disease or a condition that needs medical treatment.
- 3.3 To date, the personalisation of healthcare has only been examined relative to the delivery of genetic based therapies and treatments for disease. There has been little consideration for how the emerging information and communications technologies and advancements in genetic based therapies can be organized to achieve personalisation at the level of health systems that deliver value to the individual, defined in terms of quality of life, health and wellness.

## 4. Presentation

- 4.1 Charles Alessi (Senior Advisor to Public Health England) will introduce the themes emerging from the recently published paper *“It’s All About Me”: The*

*Personalisation of Health Systems* to inform the PHE Board and invite any comments on issues such as:

- How personalisation fundamentally challenges the existing relationships the health and care system has with citizens and patients?
- How citizen and patient expectations of health and wellbeing services is shaping public behaviours and interactions with professionals and services and what that means for future provision?
- What is stopping the health and care system from learning and implementing the lessons from other industries?

4.2 A copy of the paper can be found using this link:  
<http://sites.ivey.ca/healthinnovation/files/2014/02/Its-All-About-Me-The-Personalization-of-Health-Systems.pdf>

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