

BACKGROUND DOCUMENT

OVERVIEW OF FORESIGHT PROGRAMMES IN HEALTH AND SOCIAL CARE

As background to the GTC Foresight event in March 2019, we have been reviewing other Foresight and related projects in the field of health and social care that have taken place in the past 10 years. Our aim has been to appreciate what has gone before, appreciate different methodologies and approaches, identify potential partners and funders, and build on key themes.

As this review makes clear, foresight is a flexible technique that can be tailored to meet the aims of a particular project and one of many possible approaches to fostering long-term strategic thinking. In our preparations for this event, we have been guided by the following basic principles:

- that it is a participatory process that is shaped and driven by stakeholders;
- that it makes use of the concept of alternative futures or scenarios to open up new ways of thinking about the future;
- that it is action-oriented, seeking to guide or enable decision-making; and
- that it is multi-disciplinary, drawing together a range of stakeholders, including academics, policymakers, healthcare providers, civil society, international organizations, health institutes, industry and health-care professionals.

Below we present a summary of nine foresight programmes related to health and care (their main focus, aim, methods, approach and outputs), and a summary of a recently published guide to foresight methodology. An overview of all 10 can be found in the Appendix on page 13.

1. FRESHER PROJECT (2015-2018) (PART OF HORIZON 2020)

Foresight and Modelling for European Healthy Policy and Regulation.

www.foresight-fresher.eu

Partners: OECD, Austrian Institute of Technology, Aix Marseiile Universite, Inserm, National Institute for Health and Welfare, Finland.

Primary focus: main drivers of change that could reshape the socio-economic and political context and have a high impact in creating healthy future

Methods: combination of qualitative and quantitative forecast approaches, including computer simulation, to assess burden of NCDs in Europe.

Approach: Representation of alternative futures 20-30 years away using emerging health scenarios to test research policies that tackle the burden of NCDs in Europe. Interactivity designed into the process to produce recommendations for policy makers and help shape the agenda for European Health Research. Involved 11 project partners across Europe and 3 workshops (Vienna, Brussels and Lisbon) for horizon scanning. Identified 8 key trends and completed survey asking experts to assess impact of these trends on NCDs and uncertainty.



USP: combines quantitative and qualitative approach using both foresight and modelling methodologies.

Key outputs: Generated four FRESHER health scenarios: Healthy Together, We Will Health You, The Rich Get Healthier, Desolation Health. These then fed into quantitative estimates of the future global burden of NCDs in the EU based on a microsimulation model (itself based on OECD model).

2. SUSTAINABLE HEALTH SYSTEMS: VISIONS, STRATEGIES, CRITICAL UNCERTAINTIES AND SCENARIOS, 2013

www3.weforum.org/docs/WEF_SustainableHealthSystems_Report_2013.pdf

Lead: WEF - begun in 2012 at DAVOS meeting - in collaboration with McKinsey.

Focus: Perceived crisis of healthcare expenditure outpacing GDP growth—and limits on potential for efficiency savings—meaning something 'radical' is needed. Key questions included: How can patients be given both more control over treatment and more responsibility for prevention and well-being? Will health be seen as a basic universal right protected by regulation or a commodity delivered through market forces?

Methods: Interviewed 200 experts, and held 8 workshops, including policymakers, medical professionals, academics, industry reps, civil society and providers. [No social care though]. A Steering Board made up of health system leader, along with a working group of experts, provided support. McKinsey helped with the workshops in The Hague, Berlin, Madrid, Tianjin and London. Vision question: What could health systems look like in 2040?

Approach: Promoting diversity of responses to health challenges while recognizing the need for information sharing between countries. Recognition of the need for radical solutions and creative thinking about the future. Identifying uncertainties outside of the health system.

USP: International approach to strategic health system challenges.

Outputs: Three scenarios: Health Incorporated, New Social Contract, Super-empowered individuals.

Critical Uncertainties



3. GLOBAL STRATEGIC TRENDS, THE FUTURE STARTS TODAY, 6TH EDITION, 2018

<https://www.gov.uk/government/publications/global-strategic-trends>

Lead: UK Ministry of Defence.

Focus: Drivers and trends that will shape the world in the future.

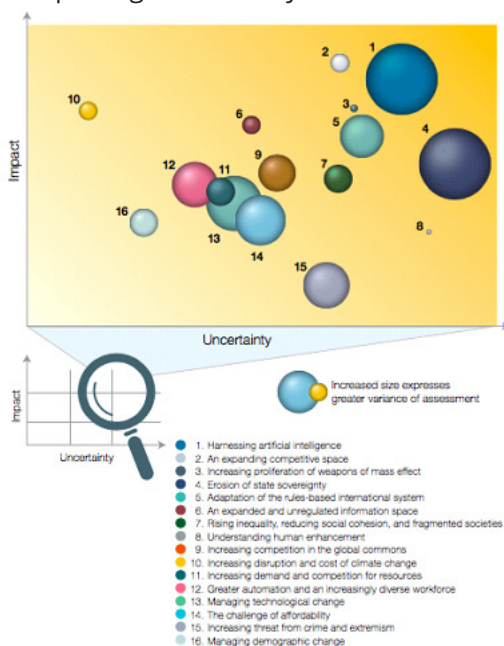
Methods: Literature review and review of previous editions, augmented by online survey, culminating in a workshop bringing together academic, government, industry and non-profit participants from UK and globally.

Approach: Broad approach to strategic change, with health one aspect of human development. Explores, e.g. the effect changes in health will have on human enhancement as people live longer with chronic disease; the impact of healthcare spending on government budgets; and the effects of ageing populations in East Asia and Europe. Health effects of climate change, environmental degradation, AMR and epidemics also noted, as well as potential for gains in health surveillance. Workshop identified 39 topics for research, with 3 more identified during research. Work on these topics was carried out by member of the Futures team, including literature review, interviews, commissioning further research papers (70, from 42 institutions). Collaboration with partners from 40 countries, some of whom were 'embedded' within the GST team.

USP: Broad thematic and geographic approach to drivers of change.

Outputs: Identification of trends and projection forward. Four future worlds on the axis of more/less concentrated power and more/less collaboration: multilateralism, multipolarity, network of actors, fragmentation. Five 'fused' themes based on 39 topics for research, 13 geographically specific chapters. Attempt to map uncertainty as well as impact (see figure).

Exploring Uncertainty



4. THE HEALTH FOUNDATION—SHAPING HEALTH FUTURES, ON-GOING

<https://www.health.org.uk/blogs/taking-a-long-term-view>

Lead: The Health Foundation.

Focus: How future trends and possibilities can best be prepared for in today's strategies. Looking at long-term issues affecting health and health services over the next 10-25 years, with a focus on areas where current understanding is limited. This programme of work is one part of the Health Foundation's wider commitment to securing the long-term sustainability of UK health and social care services.

Methods: Document and literature reviews, convening groups for deliberative discussion, direct engagement with policymakers.

Approach: Two year programme, still in design, aiming to deep dive on selected long-term issues, including the environment; data and data-driven technology; and work and working. There will be an initial focus on implications for NHS, social care and public health services in England.

USP: Engaging and supporting policymakers to better prepare for the future by incorporating thinking on these issues and the choices they present.

Outputs: Planned new insights on key trends and their implications for health and health services; increased awareness and engagement by policymakers.

5. THE GULBENKIAN REPORT ON THE FUTURE FOR HEALTH IN PORTUGAL, 2014

<https://gulbenkian.pt/en/project/a-future-for-health/>

Lead: Calouste Gulbenkian Foundation.

Focus: A look 25 years into the future with the goal of creating a 'vision for health and health care in Portugal', asking: 'what is necessary to create a new vision for health care in Portugal?'. Focusing on health promotion and disease prevention, provision of more community-based and integrated services for those with long-term conditions, greater patient participation, and impacts of new knowledge and technologies.'

Methods: Convened 4 Working Groups in an 'inclusive' process, based on health services and public health; citizens and the SNS; Staffing the Service; Harnessing Knowledge, Technology and innovation. Set up Advisory Board with senior professionals from health sector and a separate Young Professionals Advisory Group; met with stakeholders and held conferences to discuss working group reports; collected evidence on policy more broadly.

Approach: Less of a Foresight Approach that a call to action including recommendations for appropriate steps from citizens and other stakeholders, and a shift from a hospital- and illness-centred approach to health to a more person-centred and team-based health system.

USP: Commissioned as a result of awareness that 'the current system cannot meet the needs of the future in its current form'. Focus on actions of citizens and wider society in adapting to uncertainty and change.

Outputs: 7 key areas for action: new compact for health; action by citizens; action across society; continuous pursuit of improved quality; person-centered and team-based health system; new roles and strengthened leadership at all levels; financial sustainability.

6. YOUNG PEOPLE'S FUTURE HEALTH INQUIRY - FROM THE HEALTH FOUNDATION, 2018

Listening to our Future - <http://reader.health.org.uk/listening-to-our-future>

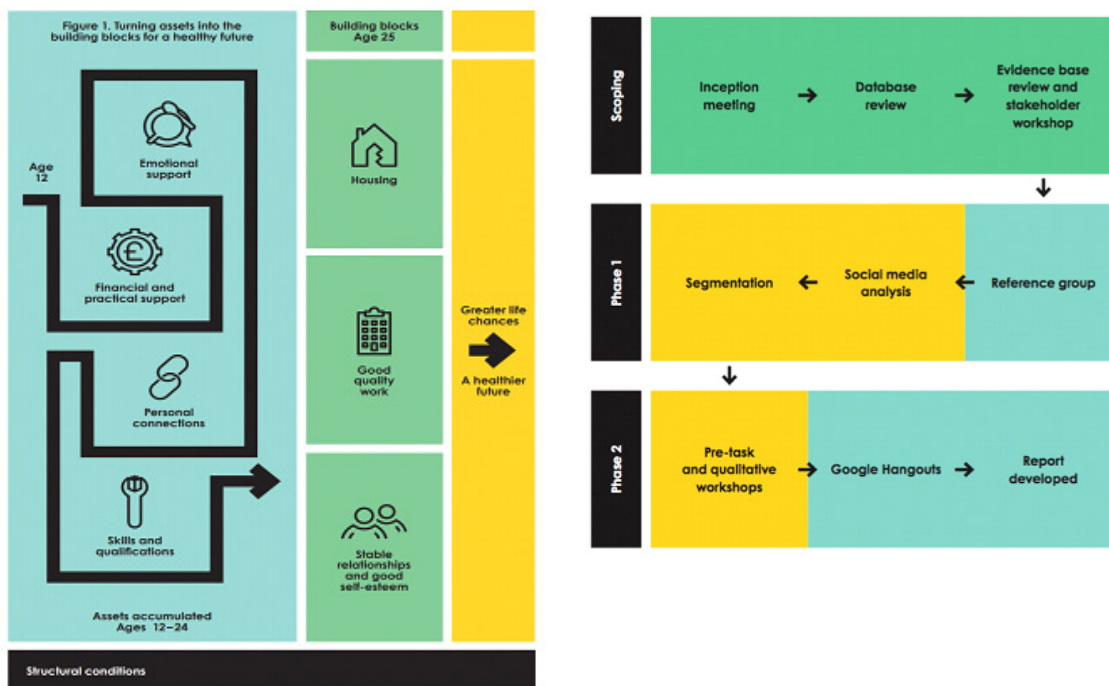
A place to grow - <https://www.health.org.uk/publications/a-place-to-grow>

Lead: Health Foundation

Focus: The Young People's future health inquiry aims to build an understanding of the influences affecting the future health of young people. Between the ages of 12 to 24 many factors shape young people's future health. Most aspire to move through education into employment, become independent and leave home. This period provides a window of opportunity for young people to build the resources for a strong, healthy future.

Methods: Engagement work with young people, including qualitative research and online survey of 2000 young people; 5 site visits across the UK; academic research undertaken by Association for Young People's Health and UCL Institute of Child Health.

Approach: Two year inquiry, combining site visits with a research programme focused on: key social determinants of health that influence young people's (age 12-24) future health prospects, how experiences at this age affect young people throughout their lives, the main issues that young people face as they become adults, links between external environmental factors (eg, housing) and internal factors (eg, resilience, self esteem), and support and opportunities young people need for a healthy future.



USP: links the future of health to what young people are experiencing today, with an emphasis on how instability and insecurity in employment and housing affects their well-being and ability to thrive.

Outputs: policy analysis and recommendations to come in 2019.

7. THE LONG-TERM SUSTAINABILITY OF THE NHS AND ADULT SOCIAL CARE, 2016-2017

<https://publications.parliament.uk/pa/ld201617/ldselect/ldnhssus/151/151.pdf>

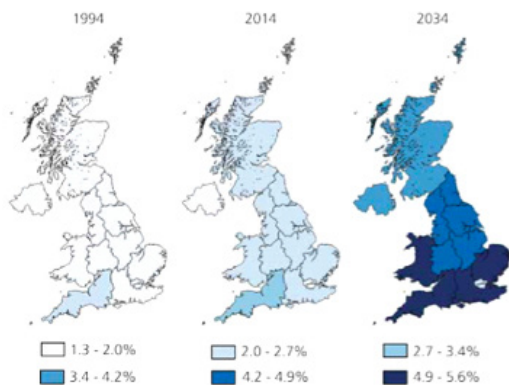
Lead: UK House of Lords.

Focus: Short-termism in the NHS and adult social care where time horizons are limited to a few years asking: how can we retain the basic principles of the NHS - healthcare largely free-at-the-point-of-use - for all citizens? How can we secure an adult social care system which needs the needs of a rapidly changing population? Can we envisage a long-term future for an integrated health and care service? Starting points include that social care in crisis puts pressure on health system, a lasting settlement for social care can alleviate some of this, and that UK lags behind similar OECD states on health spending and performs poorly on outcomes.

Methods: Evidence review plus interviews.

Approach: House of Lords established an ad hoc committee focussed on four themes: resource issues, workforce, models of service delivery, prevention and public engagement, digitisation of big data, services and informatics. Also recognized that social care is a key concern even if not explicitly part of the committee's remit. Evidence gathered from >200 in writing and interview; 3,000 letters from the public. Two specialist advisors assisted the committee, as well as 3-5 staff. Identified lack of clarity on who should be driving innovation in health and care. Advocates for adoption of innovation as a priority across the NHS. Strong judgement that 'poor lifestyle choices' are having negative impact on NHS and must be addressed by more active government intervention into public health.

Figure 1: Proportion of the population in the UK aged 85 in 1994, 2014 and (projected for) 2034



Source: ONS data cited in written evidence from Professor Chris Whitty (NHS0194)

Key vision question asked of witnesses: What does the healthcare system of 2030 look like and what do we need to get there? Responses included shift from acute to primary and community care; integrated health and social care; resolve fragmented health system by moving towards place-based systems of care.

USP: Future looking, plus sustainability, and recognition of the need to focus on health and social care.

Outputs: 34 policy recommendations, including proposal for an Office for Health and Care Sustainability tasked with 15-20 year time horizon, with focus on demographic trends, workforce and skills implications, stability of health and social care funding (and alignment between the two). Emphasis on service transformation and need for reform of statutory framework with strong local governance features.

8. EUROPEAN COMMISSION'S 2018 AGEING REPORT: ECONOMIC AND BUDGETARY PROJECTIONS FOR 28 EU MEMBER STATES

https://ec.europa.eu/info/publications/economy-finance/2018-ageing-report-economic-and-budgetary-projections-eu-member-states-2016-2070_en

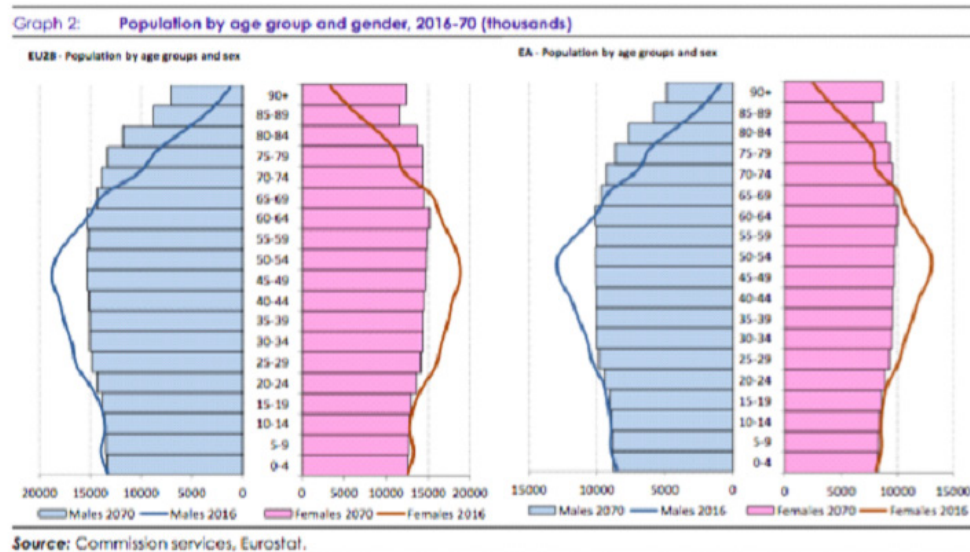
Lead: Economic Policy Committee of the Economic and Financial Affairs (ECOFIN) Council.

Focus: Changing demographics and ageing populations.

Methods: develop set of long-term projections based on 'no-policy-change' assumption, to determine effect of demographic projections on age-related public spending in areas of health and long-term care, education, pensions and unemployment benefits.

Approach: Migration to the EU projected to decrease while life expectancy for men and women expected to rise and converge around 90 in 2070. Old age dependency ratio is almost doubling over the long-term. More women and older people will be in the workforce as a result of pension reforms. Population flattens out over time. Demographic ageing is really demographic flattening.

USP: long term, cross European, demographic projections.



Outputs: projections that feed into policy debates at EU level, including Europe 2020 strategy for growth.

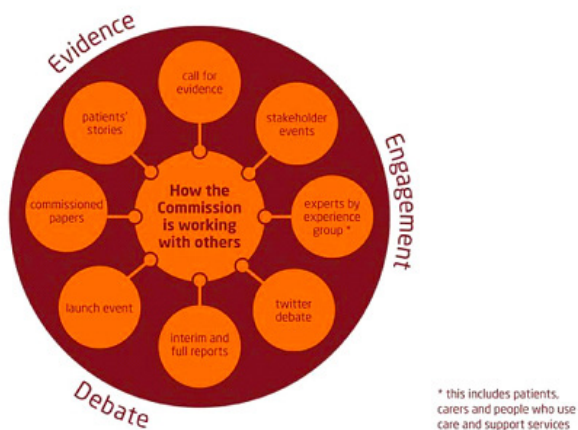
9. THE FUTURE IS NOW: THE INNOVATIONS OF TODAY THAT POINT TO BETTER HEALTH CARE TOMORROW A REPORT OF TIME TO THINK DIFFERENTLY PROJECT 2012-13,

<https://www.kingsfund.org.uk/reports/thefutureisnow/>

Lead: King's Fund.

Focus: case studies of innovative approaches to health and care in England with an emphasis on patients as partners and experts, citizens as agents of change, holistic approach to primary care, breaking away from professional hierarchies, pioneering remote care, personalizing medicine, taking diagnosis out of the hospital, aligning hospitals in systems of care and moving beyond fragmentation.

Methods: 6 commissioners on the Barker Commission, including Mark Pearson (OECD), engaged stakeholders, patients and carers in events, and produced varied outputs, including via twitter, commissioned papers, calls for evidence, patient stories.



Approach: The Time to Think Different project sought to move beyond inadequate traditional central planning to address future health and care needs. 'We are living in a complex, uncharted, extremely 'messy' environment'. Solutions may be as varied and complex as the problems they are trying to address.' Offers this 'profound' insight: what is needed is not a shift from one rigid system to another rigid system but to a 'more uncertain and unpredictable world characterised by change.' Places a premium on flexibility and agility. Decommissioning and disinvesting as important as investing. One way forward is partnerships. Led to Barker Commission on health and care in 2013-2014, an independent commission, which was distinguished from other reviews of NHS and social care by a focus on the terms of the post-war settlements under which the NHS and social care remain separate.

USP: Focus on the innovative changes to service provision and the role of patients and citizens to enable health systems to be sustainable in the future; plus case studies demonstrating innovative practices already in place.

Outputs: Interactive report and case studies.

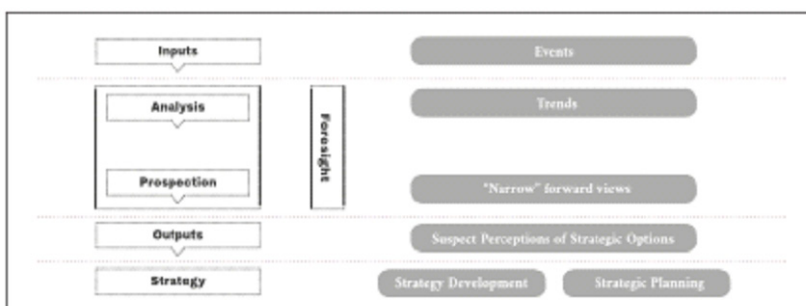
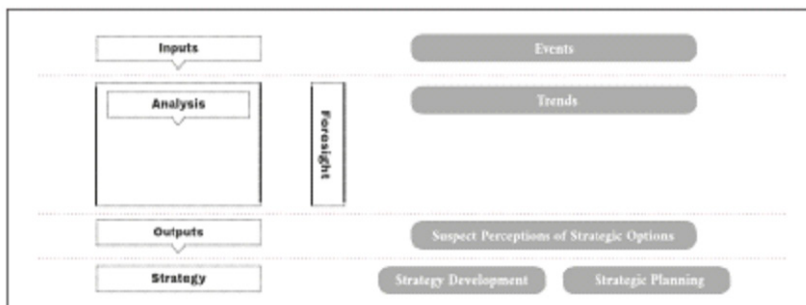
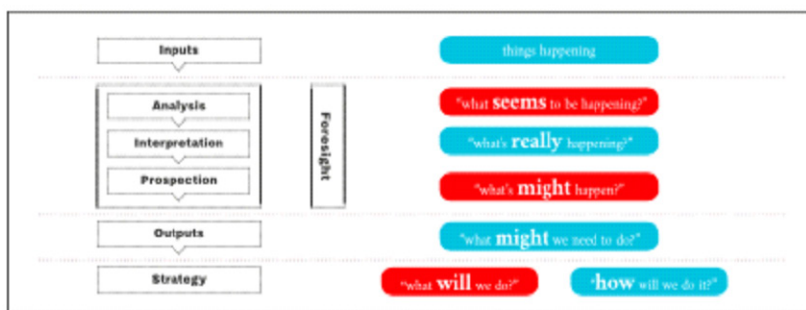
10. UNITED NATIONS DEVELOPMENT PROGRAMME FORESIGHT MANUAL, 2018

www.undp.org/content/undp/en/home/librarypage/capacity-building/global-centre-for-public-service-excellence/ForesightManual2018.html

Not a project but a guide to foresight methodology, specifically for meeting the Sustainable Development Goals. Useful advice includes, e.g.

- Ask people to assess their own cognitive and behavioural biases,
- only high quality insight will lead to good action plans ('there are no short cuts'), so don't necessarily plan for action before good insight is there,
- stay in the ambiguous 'fluid' state of inquiry for as long as possible,
- simply producing a good report will not lead to meaningful action,
- it may be better to have a distributed approach, eg foresight teams within individual line ministries, rather than a dedicated 'in-house' foresight team,
- culture needs to change as well as ideas, and
- a shallow (middle image, figure) or narrow (bottom image) risks reducing foresight to forecasting or minimizing interpretation.

Foresight
A Manual
Graph 1



APPENDIX: OVERVIEW OF FORESIGHT PROGRAMMES REVIEWED

Project Name and Organization	Subject	Geographic scope	Time horizon	Methodology	USP	Outputs
Foresight Fresher: OECD	Health care policy for healthy future	Europe	2050	Foresight approach via horizon-scanning; key trends identified, 4 scenarios generated	Joins qualitative and quantitative methods, including computer simulation	4 scenarios; quantitative modelling of future GBD
Sustainable Health Systems: WEF	Sustainable health care for the future	Global	2040	Foresight approach via interviews, workshops, scenario generation	International approach to strategic health system challenges	3 scenarios; country-level workshops
Global Strategic Trends: UK MoD	Trends shaping global change	Global	2048	Foresight approach via literature review, survey, workshops, and scenario development	Broad thematic and geographic focus (not health specific)	4 future worlds, five themes
The Health Foundation: Shaping Health Futures	Future trends affecting healthcare	Initial focus on NHS, social care and public health in England	2029-2044	Document and literature reviews, convening groups, direct engagement with policymakers	Engaging and supporting policymakers to incorporate long-term thinking	New insights into key trends
Gulbenkian report on the future of health for Portugal	Trends affecting future health care in Portugal	Portugal	2044	Working groups, advisory boards	Focus on citizen action	7 key elements identified
Listening to Our Future: The Health Foundation	Healthy futures for young people	UK	2050	Engagement work with young people, including online survey	Linking present and future well-being of young people 12-24 with emphasis on security	Policy analysis and recommendations to come
Long-term sustainability of the NHS and Adult Social Care: House of Lords	Future of health and social care	UK	2030	Evidence review plus interviews	Linking health and care	34 policy recommendations
EC 2018 Ageing Report	Changing demographics of 28 EU member states	EU	Up to 2070	Long-term demographic projections based on 'no-policy change' assumptions	Long-term, broad European focus	Economic projections for policy
Future Is Now: King's Fund	Innovative approaches to health and care	England	Contemporary	Case studies of current innovative approaches	Role of patients and citizens and innovative changes to service provision	Report and case studies
UNDP Foresight manual	Review of foresight methodology for SDGs	Global	n/a	Foresight literature and methodology review	Insightful review of foresight approach	n/a

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