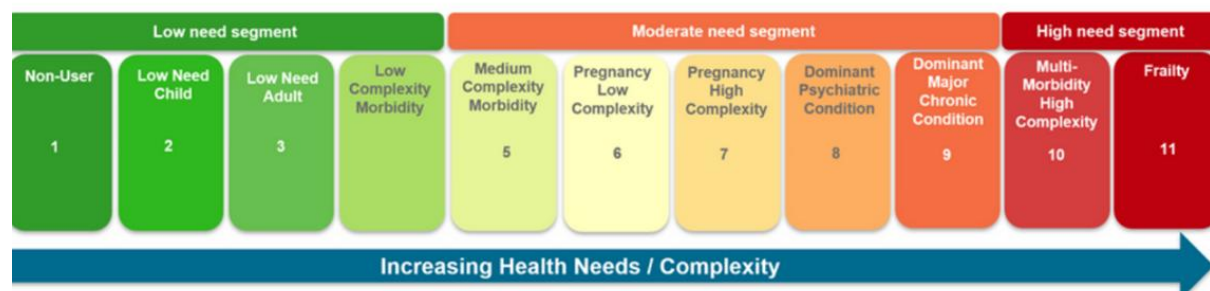


Segmentation – Patient Needs Group (PNG)

You may notice a test result appear in your NHS APP referring to “segmentation” or “Johns Hopkins Adjusted Clinical Groups (ACG) system score”.

Segmentation/Johns Hopkins Adjusted Clinical Groups (ACG) system score is a simple way of categorising patients based on their specific health needs. It helps us as a practice understand the individual needs of our patients based on their health and wellbeing to support personalised care and ensures you get the right support in a timely way.

Johns Hopkins Adjusted Clinical Groups (ACG) – Patient Need Groups (PNG)



What is segmentation?

We use segmentation to group people based on shared characteristics, needs, or behaviours. This allows us to tailor care delivery and policies to better meet the specific needs of each group.

When we do this for all groups we get healthier people and a healthier population.

What are the Johns Hopkins Adjusted Clinical Groups?

In Kent and Medway ICB, we use a well tested set of 11 segments/groups based on research by Johns Hopkins University. These are in the image above. Factors used for grouping include the number of conditions a person has and how severe those conditions are. This helps us decide what level of support that patients might need.

The categories break down into:

- Low need (PNG 1-4) (Green): Patients without significant health issues who need less intervention. Preventative care may stop them becoming unwell.
- Moderate need (PNG 5-9) (Orange): Patients who have a condition that is, generally, well managed. These patients may need occasional support to remain stable.
- High need (PNG 10-11) (Red): Patients who have several conditions. They may need regular monitoring or a more coordinated healthcare approach.
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You may have seen this score in your NHS APP as “Johns Hopkins Adjusted Clinical Groups (ACG) system score” – see example (note the final implementation may be slightly different from that shown).



How do we do segmentation?

1. **Data Collection:** The process begins with collecting data from various sources.
2. **Identifying Segments:** The TVS Care Record platform runs the Johns Hopkins algorithm. This groups people into the 11 segments listed above. It uses information like what conditions a person has and how often they see a doctor.
3. **Analysis Tools.** Health and care staff use tools to identify groups with different needs. We use the 11 segments plus other factors and expert input to determine which these groups are. We may do this for everyone in our area, a group of GP surgeries or within one GP surgery
4. **Intervention.** We can use this analysis in one of three ways. (1) Provide active treatment to the selected group (e.g. inviting them for a blood pressure check up, etc.).

(2) Change how we work for that group (e.g. longer appointments for more complex patients, etc.). (3) Change the services we provide (e.g. increasing the number of specialist nurses in certain clinical specialities, etc.).

What are the benefits of segmentation?

- **Personalised Care.** By understanding the needs of each group better, we can personalise care to those patients. This leads to improved health outcomes and patient satisfaction.
- **Resource Allocation.** By using the best treatment for each group it helps us make best use of our money and staff. It also means we can direct patients to the right place first time.
- **Improved Health Outcomes.** We can better identify those patients who need early interventions or tailored care plans. This leads to improved health outcomes, particularly for patients with chronic conditions.
- **Preventative Care.** We can identify patients who may need treatment before issues occur. By preventing complications, we can keep people healthier for longer.