



CVS Rochdale Policy Briefing

Healthy Lives, Healthy People: The Public Health White Paper

Introduction

People in England are healthier and living longer than ever before. However health inequalities in life expectancy and disability-free life expectancy still exist.

This white paper outlines the government's commitment to protecting the population from serious health threats; helping people live longer, healthier and more fulfilling lives. It responds to Professor Sir Michael Marmot's Fair Society, Healthy Lives report 2010 (which is an independent review of health inequalities commissioned by government) and builds on "Equity and Excellence: Liberating the NHS.

The faculty of Public Health Defines public health as "The science and art of promoting and protecting health and wellbeing, preventing ill health and prolonging life through the organised efforts of society"

There are three domains

- 1) Health Improvement (including people's lifestyle, social, cultural, economic, psychological and environment as well as inequalities in health)
- 2) Health Protection (including infectious diseases, environmental hazards and emergency preparedness)
- 3) Health Services (including planning efficiency, audit and evaluation)

The new approach to public health

More integrated and innovative ways will be sought to empower people and communities to make healthier choices in their lives; a Big Society approach. Responsibilities will be shared across society as follows:-

Role of individuals - individuals should feel that they are in the driving seat for all aspects of their and their family's health, wellbeing and care. This applies to people maintaining their wellbeing and preventing ill health.

Role of Local government - responsibilities for public health will be embedded in local authorities to create solutions that will meet local needs and enable joint approaches with other areas of local government i.e. housing, environment and transport and with key partners such as the police, NHS and voluntary sector. Local government will be empowered to do more through increased freedoms, dedicated

resources and clear responsibilities, building on its existing role in public health. This role will include

- **Ring-fenced funding for public health** supported by public health outcomes framework and “a health premium” to incentivise improvements to health and reduce health inequalities
- **Directors of Public Health** – employed by local government and jointly appointed with Public Health England
- **Concise high- level commissioning strategies** – that will promote the development of joined up commissioning plans across local partners
- **Encouragement to contract services to a wide range of providers** across the public, private and voluntary sectors and to incentivise and reward organisations delivering the best outcomes. Grant funding is recognised to enable local communities to take ownership of highly focused preventative activities such as volunteering peer support, befriending and social networks

Role of the NHS – continues to have a crucial role in preventing ill health, screening for disease, supporting people with long term health conditions, improving access to care for the whole population and tackling health emergencies. This will also include the public health role of GP’s, community pharmacists and dental health.

Role of Public Health England – will be a new public health service, based in the Department of Health. It will work nationally (but may be organised at different levels of the system), with a protected budget to support local action through funding and provision of evidence (working with public health practitioners from all sectors), data and professional leadership. It will also:-

- Allocate budgets, weighted for inequalities, to upper tier and unitary authorities
- Ensure the provision of health protection, emergency preparedness, recovery from drug dependency, sexual health, immunisation programmes, alcohol prevention, obesity, smoking cessation, nutrition, health checks, screening, child health promotion and some elements of the GP contracts.

There will be shadow allocations to local authorities in 2012/13 before allocations are introduced in 2013/14

Role of Health & Wellbeing Boards – these will be established in every upper tier local authority with the flexibility to bring in district councils. Proposed minimum membership will include elected representatives, GP consortia, DsPH, Directors of Adult and Childrens Social Services, local Health Watch, and, where appropriate the NHS Commissioning Board. Local areas will also be able to include local voluntary organisations and other, however this is not a statutory requirement.

Role of the Secretary of State – Will have enhanced responsibilities, making accountabilities in the system clearer and creating Public Health England. They will lead public health works across civil society and business, brokering partnerships at national level with industry and the voluntary sector.

Voluntary and community sector – provide services to individuals and communities, act as advocates for excluded groups and catalysts for action. The new approach will encourage partnership working and opportunities for providers from this sector to offer relevant services

Businesses/Employers – businesses to take responsibility for the impact of their practices on people's health & wellbeing through a new Responsibility Deal. Employers should look to support the health and wellbeing of their staff

Central Government – will directly co-ordinate activity to protect people from serious health threats and emergencies. Will also create the right system and incentives to free up local communities to improve health and reduce inequalities, doing only what is necessary across central government to enable this

Methods of intervention

The Government's approach to improving health and wellbeing is based on:

- Strengthening self-esteem, confidence and personal responsibility
- Positively promoting "healthier" behaviours and lifestyles; and
- Adapting the environment to make healthy choices easier

Health & wellbeing throughout life

The approach to public health will be targeted across the lifespan, as advocated in the Marmot Review:

Starting Well:

- More health visitors with a "Big Society" role in building strong communities in partnership with local voluntary and community groups
- Double the capacity of the Family Nurse Partnership programme
- Community Budgets for families with complex needs which focus on prevention
- Children's centres will engage with families where children are at risk of poor outcomes and act as hubs for family support and for voluntary and community groups
- Wider society, including employers

Developing Well

- Schools will draw on expertise from local health professionals and children's services and will teach aspects of public health. Improving self-esteem and positive social norms throughout the school years should be the focus of local strategies.
- Change 4 Life and The Healthy Child Programme will be broadened to take a more holistic approach, for instance covering mental wellbeing, talking

therapies and helping parents talk to their children about other health issues and behaviour

- The Department of Health is developing a new vision for school nurses, reflecting their broad public health role in the school community
- For young people with mental health problems interventions that promote mental health and effective treatment will be supported
- Self-esteem and personal responsibility will be promoted through the National Citizen Service, piloted summer 2011

Living Well

- A Public Health Responsibility Deal – working collaboratively with business and the voluntary sector to create voluntary agreements will “launch” early 2011. There are five networks on food, alcohol, physical activity, health at work and behaviour change.
- Local sustainable transport, including active travel, will be supported through the Department for Transport Sustainable Transport Fund
- A Mass Participation and Community Sports Legacy programme will improve community sports facilities
- DCLG is working with Defra to protect green areas of importance to local communities and providing guidance to support community groups in the ownership of public spaces, enabling people to have improved access to land and grow their own food
- Defra will lead a campaign to increase tree planting
- Reducing smoking will continue to be a focus. Department of Health will align funding streams on drugs and alcohol treatment services
- NHS Health Checks will continue to be offered to all those aged 40 to 74
- An integrated model of service delivery will help allow easy access to confidential, non judgemental sexual health services
- Social marketing will be sequenced through the life course
- Working with other agencies, public health services will also have a role in tackling violence and abuse

Working Well

- An accredited process for the occupational health service standard is being developed. Employers will be encouraged to contract only fully accredited services, and seek preventative interventions
- The Change4 Life programme will be developed to raise awareness of the clear case for investing in the health of employees.

Ageing Well

- Neighbourhoods and houses better designed to support people’s health eg. By creating Lifetime Homes and maintaining benefits such as winter fuel allowance and free bus travel and continuing the Warm Front scheme until 2012/13, providing grants to improve housing warmth and sustainability. Funding homes for adaptations will continue.
- Partnerships between communities, business and the voluntary sector will help address a range of health challenges such as depression.

- Local government will be more closely linked with the NHS through its role in supporting re-enablement; and district nurses and allied health professionals will contribute to keeping people at home
- *The Vision for Adult Social Care* sets out the ambition for preventative action
- Age discrimination needs to be tackled through the Equality Act 2010
- The Department for work and Pensions will provide Active@60 grants to voluntary and community groups to establish Community Agents in their area, reaching out to those at risk of isolation and exclusion
- Department of Health will continue to promote the implementation of the End of Life Care Strategy to assist people reach this critical point of life prepared

Consultation as part of the Public Health White Paper

The proposals outlined are just an overview. The government will be publishing further documents in December on the proposed public health outcomes framework and on commissioning and funding. The timescales for the transition to the new system is as follows

Dec 10 to March 11	Consultation on White Paper, public health outcomes framework and funding and commissioning of public health
Dec 2010	NHS operating framework and announcements of PCT allocations for 2011/12 (setting out expectations for the NHS over the first transition year)
Early 2011	Further detail on the public health system published, based on responses to a range of consultations taking place
Early 2011	Detailed roadmap for the whole system published
Early 2011 (possibly January)	Health & Social Care Bill introduced into Parliament
Early 2011	Human resources framework published, setting out the approach to managing people moving between organisations in the new systems
During 2011	Shadow form of Public Health England established
During 2011	Start to set up working arrangements with local authorities
Autumn 2011	Develop and consult on the public health professional workforce strategy
Until April 2012	Accountability for delivery of public health continues to rest with Strategic Health Authority and Primary Care Trusts (Strategic Health Authorities will also be responsible for overall transitions in their regions, working with Regional Directors of Public Health who will lead transition of public health)
April 2012	Public Health England take on full responsibilities
April 2012	Publish shadow ring-fenced public health allocations to local authorities
April 2013	Grant ring-fenced allocations to local authorities

The full paper and consultation questions can be found at www.dh.gov.uk