

DATE	19th September, 2019
TITLE OF REPORT	Advancing our health: prevention in the 2020s, Green paper consultation
Organisation and Author	Karen Jackson Head of Healthy Communities and Place (Dudley Council)
Purpose	<p>This is an information item to alert the Board:-</p> <ul style="list-style-type: none"> to the launch by the Cabinet Office and Department of Health of the consultation on the proposals outlined in the green paper “Advancing our health: prevention in the 2020s”, published July 2019; to the workshop planned for September 2019, in order to coordinate a partnership response at the local level
Background	<p>The Cabinet Office and Department of Health and Social Care are seeking views on proposals to help people to live healthier, happier lives for longer, as outlined in the green paper “Advancing our health: prevention in the 2020s”, published July 2019.</p> <p>The government has asked for responses to this consultation by 14th October 2019. The government will be publishing its response to the consultation by spring 2020.</p>
Key Points	<ul style="list-style-type: none"> It is proposed to submit a partnership response to the consultation and in order to facilitate this, a workshop is planned to take place on 23rd September, 2019 from 9am - 1pm at DY1. Stakeholders from across the local health and care system have been invited to discuss views on the paper and other ideas for how to further the prevention agenda in Dudley. From this a consensus response will be collated for submission to the Department of Health and Social Care in October, 2019. To facilitate the process, the attached briefing report has been produced to provide a summary of the green paper. Page numbers for the relevant sections of the green paper are provided for reference. Organisations are also encouraged to consider submitting their own response to the green paper. Further to this, the Council has asked all Elected Members to provide their views on the green paper via a questionnaire link https://www.surveymonkey.co.uk/r/NLBY7NP by the 20th September, 2019. These will be compiled into a formal response from Dudley MBC.

<p>Emerging issues for discussion</p>	<p>Key questions will be tabled for discussion at the September, 2019 workshop along the lines of:</p> <ul style="list-style-type: none"> • How can your agency/system contribute to preventing ill health? • What support do we need from national government to deliver prevention services and support for Dudley residents? • Can you give any examples of good practice in preventing ill health that we should include in the response to the green paper? • What do you feel are the strengths of the green paper and how could it be improved?
<p>Key asks of the Board/wider system</p>	<p>It is asked that the Board members consider:-</p> <ul style="list-style-type: none"> • Attending the workshop and disseminating the workshop date to others within their organisation who could contribute; • Consider responding their own organisation's response.
<p>Contribution to H&WBB key goals:</p> <ul style="list-style-type: none"> • Healthy weight • Reducing loneliness & isolation • Reducing impact of poverty 	<p>Indirectly to all goals</p>
<p>Contribution to Dudley Vision 2030</p>	<p>Indirectly to all work-streams</p>

Advancing our health: prevention in the 2020s

Background:

The Cabinet Office and Department of Health and Social Care are seeking views on proposals to help people to live healthier, happier lives for longer, as outlined in the green paper “Advancing our health: prevention in the 2020s”, published July, 2019.

The government has asked for responses to this consultation by 14th October, 2019. This document aims to provide a short summary of the green paper to give elected members information to inform their response. Page numbers for the relevant sections of the green paper provided for reference. A survey accompanies this summary paper to enable Councillors to give their views. These will be compiled into a formal response from Dudley MBC. The government will be publishing its response to the consultation by spring 2020.

Introduction:

The proposals outlined in this green paper aim to personalise prevention and support to those who will benefit from it the most. This is in addition to a focus on individuals being responsible for doing their utmost to maintain their own health. The paper also aims to shift thinking from improving not only life expectancy (years of life), but disability-free life expectancy – the number of years a person can expect to live in good health. The paper also proposes a shift to thinking about our health as an asset to be invested in throughout our lives, rather than a problem to be fixed when it goes wrong. The proposals explored can be split into three categories: improving services, ensuring healthy choices are easier to make and improving the conditions in which we live.

Chapter 1: Opportunities (Improving Services)

Using data and technology for personalised prevention and support (pages 13-18):

- The paper discusses the uses of technology in delivering predictive prevention services and support at scale e.g. offering an online NHS Health Check (sent via text message) to those people who do not initially respond to invitations for a face-to-face Health Check. The government proposes to work with partners to build a portfolio of new innovative projects. This includes exploring ways to support a West Midlands Combined Authority Radical Prevention Fund to test and learn from the application of new technology to support both health and wealth.
- The paper outlines a vision for future screening in the NHS to be supported by a strategic review of IT. The vision includes:
 - Uptake to be maximised
 - Existing screening programmes to be personalised and stratified by risk
 - Focused screening within high risk populations to be offered for a greater range of conditions e.g. lung cancer screening for smokers
 - Better use of technology and genomics e.g. incorporating DNA testing into screening and diagnostics
 - Developing recommendations in a coordinated way, with faster implementation of recommendations and programmes.

- The paper proposes that data obtained with consent from personal phones and devices, alongside anonymised healthcare records, will be utilised in order to:
 - Personalise prevention services e.g. providing targeted advice to support healthy behaviours through social media.
 - Tailor the NHS Health Check programme to different age groups and for people with certain risk factors. The government will commission an evidence based review of NHS health checks to maximise the benefits it delivers.

DNA testing (pages 18-20):

- DNA testing offers a further method of personalised prevention. Analysis of DNA now offers the opportunity to inform someone of diseases they are at risk of in the future, allowing them to make lifestyle changes to reduce the risk of disease. It can also enable earlier diagnosis of certain diseases, allowing earlier treatment. The green paper states that the government will be publishing a national genomics health care strategy in the autumn and that there is an ambition to embed DNA testing into routine healthcare in the UK.

Antibiotic resistance (AMR) and immunisations (pages 21-23):

- Antibiotic resistance is one of the UK's most pressing public health issues. If no action is taken, up to 10 million people per year could die globally from drug-resistant infection. The government has the ambition to contain and control AMR by 2040, supported by five year action plans. The government proposes to maintain the UK's position as a world leader on AMR in order to deliver international action, and a 'One Health' approach across the health, agricultural and environmental sectors. The green paper also announces that the government will test new models to pay drug companies for antibiotics based on their value rather than the quantity produced.
- Immunisations are critical to the prevention of infectious disease. The green paper states that the government will launch a Vaccination Strategy by Spring 2020. This will describe ways to: increase the vaccination uptake rate to 95% or higher; enhance the use of local immunisation coordinators and primary care networks; improve the immunisation programme to incorporate new vaccines and find new uses for existing vaccines.

Chapter 2: Challenges (The Choices We Make)

This chapter discusses the challenges to living a healthy life. The main challenges were identified as:

Being smoke-free (pages 25-27):

- Smoking is higher in certain groups, such as those living in areas of deprivation, people who identify as Lesbian Gay Bisexual and Transgender (LGBT) and those living with mental health conditions. It will be key to tackle these inequalities. The paper acknowledges that stop smoking services are commissioned mainly by the NHS or local authorities and that pressures on local budgets can impact on delivery of these. The paper give the example of how other countries use a 'polluter pays' policy, which requires tobacco companies to pay towards the cost of tobacco control.

Maintaining a healthy weight (pages 28-35):

- Energy drinks typically have significantly higher caffeine and sugar content than other soft drinks. The paper proposes that the government ends the sale of energy drinks to under 16s.
- Part of the government's Childhood Obesity Plan has been published within the Green paper and sets out plans in the following areas:
 - infant feeding: to include action to increase breast feeding
 - challenge businesses to improve the nutritional content and labelling of baby food and drink
 - reformulating the nutritional content of food and drink to further reduce sugar and also reduce salt. The ambition is to reduce the population's salt to 7g/day.
 - support for individuals to achieve and maintain a healthy weight including improving the brief advice on health issues given in general practice; the review and promotion of digital support solutions; and enabling families identified through the national child measurement programme (NCMP) to more easily access healthy weight support.

Staying active (pages 35-38):

- The government has asked the Chief Medical Officer to review the current guidelines on physical activity which will be published in September 2020.
- The government wants to explore ways of using electronic devices to support people doing strength and balance exercises to prevent falls.
- The paper proposes an expansion of a programme aimed at supporting healthcare professionals to promote physical activity.
- The government plans to work with Public Health England (PHE) and Sport England to launch of a new physical activity campaign, aimed at those living with health conditions.
- There will be work across government to encourage local authority planning decisions to promote active lifestyles. This would include encouraging people to switch from driving and nurseries building being active into their daily routines.

Taking care of our mental health (pages 38-42):

The paper says that action is needed to tackle the risk factors that can lead to poor mental health, such as adverse childhood events, violence, poverty, problem debt, housing insecurity, social isolation, bullying and discrimination. Investment in the factors that keep people mentally well is also required. The paper proposes that:

- The Department of Health and Social Care takes action to invest in programmes to raise awareness, promote positive mental health, reduce stigma and strengthen suicide prevention.
- The Department of Education take action to strengthen support to parents, children and young people in schools and colleges. It is recommended that teachers are required to undergo mental health training and mental health is introduced into the school curriculum in order to embed mental health within all aspects of the school.
- A statutory Breathing Space scheme is established to provide respite to those in problem debt.
- Work with PHE and DEFRA is taken forward to embed nature-based interventions into strategies, and social prescribing to prevent and treat mental health.

- Work with industry takes place to increase the availability of alcohol free and low alcohol products, and consult on increasing the alcohol free descriptor from 0.05% abv. to 0.5%.
- Action to improve policy and practice in relation to prescribed and illicit opioid use and the prevention and treatment of cannabis related mental health issues.
- A review of the evidence on sleep and health and NHS action to ensure those in care settings get enough sleep e.g. a roll out of protected sleep time in hospitals.

Prevention in the NHS (pages 45-48):

The paper reiterates the chapter in the NHS Long Term Plan on prevention including commitments to: double the funding of the NHS Diabetes Prevention Programmes; expand the offer for free NHS stop smoking programmes to hospital patients, pregnant mothers, mental health and learning disability patients; establish alcohol care teams in hospitals with the highest rates of alcohol dependence and reduce health inequalities. The paper proposes that the next step is to move the NHS to be a national 'wellness' service by helping people to help themselves through access to their own data, personalised advice and support tools. Action proposed includes:

- A new Social Prescribing Academy is set up to help to champion social prescribing and support national plans to make it available throughout England.
- Expanding the role of community pharmacists and other healthcare professionals to support more people in the community to manage and improve their health and wellbeing.
- Embedding the Healthy Living Pharmacies programme into the national community pharmacy contractual framework.
- Commissioning more services from pharmacies and support them to be further integrated into local NHS provider networks.

Chapter 3: Strong foundations (Improving the conditions in which we live)

- The paper discusses that health is an 'asset' to be invested in throughout our lives but recognises that some people find this easier than others with the difference being due to the circumstances into which they are born and live. The paper proposes that everyone has the right to a solid foundation on which to build their health. It outlines that parents and carers have a fundamental role in supporting their child's early development. Children in deprived areas are more likely to be exposed to avoidable risks. It is observed that school readiness is lower and teenage smoking rates are higher in these areas.

The early years (pages 49-50):

- The government recognises that parental wellbeing impacts children's health. The Reducing Parental Conflict programme aims to provide the right support and positive relationships, so that vulnerable children can thrive.
- To further support parents, the Healthy Child Programme will be modernised by: making linkages to other health records; developing the digital red book; and creating new pathways for speech and language development and pre-conception and pregnancy advice. The upper age range of the programme will also be extended from 19 to 24 years for young people who need extra support, and there is an aim to improve both perinatal mental health support and the healthy social and emotional development of babies and young children.

Children's Oral Health (pages 51-52):

- Tooth decay is the most common oral disease among children in England. The paper proposes that the government will consult on rolling out a school tooth brushing scheme in more pre-school and primary school settings.
- The paper proposes that the government will explore ways to remove the funding barriers to fluoridating water to encourage more areas to seek fluoridation. There is also a proposal to encourage local partnerships between councils and the NHS, with councils being rewarded for their fluoridation efforts.

Creating Healthy Places (pages 52-53):

The paper recognises the importance of good work for good health and that health problems can be a barrier to gaining and staying in employment. The paper proposes:

- That the government will explore ways to align support for people with physical and mental health conditions across the NHS, employers and occupational health so that responsibilities are clear and good information and support is available.
- Given the prevalence of musculoskeletal (MSK) problems, the government wants to help out businesses by: reviewing existing guidance around MSK interventions and developing a package of information for employers about preventing and managing MSK in the workplace.

Safer Communities (page 54):

- The paper recognises that the homes and communities in which we live have a big impact on our health. Reducing knife crime and tackling violence is a government priority. With investment and the help of media campaigns, the government is hoping to help prevent and support those at risk of violent crime, and increase police activity to reduce crime.

Connected Communities (pages 54-55):

- Feeling lonely is linked to an increased risk of heart disease, stroke, depression and cognitive decline. The government published a tackling loneliness strategy in 2018 and will begin to publish annual reports on progress.

Homes and Neighbourhoods (pages 55-57):

- The government wants to help support people with complex care needs stay independent for longer in their own homes. Home adaptations, assistive technology and supported housing will be crucial to achieve this and the government aims to shape this emerging market and test new ideas and innovations. For example it will launch the 'Home 2030' design competition.
- The government will also shortly be publishing a set of principles for 'Putting Health into Place' to guide local systems to design and manage new neighbourhoods, streets, parks and buildings so that they prioritise health.

Green Spaces and Clean Air (pages 57-58):

- Air pollution is the top environmental risk in the UK. The government will be working closely with DEFRA in order to improve public awareness about pollution sources and health impacts, and to improve data and research on the health impacts. This will build on the 25 year Environment Plan to cut the costs of air pollution.

Active ageing (pages 58-60):

- The government believes the 2020s need to be a decade of active ageing, where ageist stereotypes are forgotten and replaced with a positive view of older age. With an older population, the challenge will be to ensure the growing number of people in later life are healthy, empowered and able to continue making a full contribution to society. To support this shift, Public Health England with the Centre for Ageing Better and national partner organisations are developing a Consensus Statement on Healthy Ageing in order to set out a review of how we can focus more attention on older people's issues.

Prevention in Wider Policies (pages 60-61):

- Many wider government policies already contribute towards the prevention agenda and the government wants all policies to be "pulling in the same direction" on prevention. They strive to do this by developing and launching a new Composite Health Index, which will help model future trends in health and to inform health impact assessments of non-health policies.

World Class Research (page 62)

- The paper advises that transformative change in prevention will only be achieved if it is underpinned by high quality research and proposes that the government will set ambitious goals for community based research into how to: create and maintain built and natural environments to support health; encourage input from disciplines such as engineering or education; focus research in areas with the greatest health challenges; and attract the best people into prevention research.

Local Action (pages 62-65):

- Councils play a key role in prevention and given they have specific responsibilities around prevention, control many of the assets for good health (e.g. parks and leisure facilities). They also have decision making powers for areas like housing policy, planning and social care and shape wider policies related to health. The government wants to see the NHS and local authorities working more closely with more collaborative commissioning approaches especially in relation to key services e.g. health visiting, school nursing and sexual and reproductive health.

Sexual and Reproductive Health (page 66):

- New diagnoses of HIV have reduced since 2015, and teenage pregnancy rates are at an all-time low. However, there has been an increase in some sexually transmitted infections, notably gonorrhoea. In order to maintain the momentum in those areas where we are doing well, the government is proposing to develop a new sexual and reproductive health strategy for England.

Conclusion:

In conclusion, the green paper has a strong focus on the role of the NHS in preventing ill health. It introduces new ideas on how technology can support preventing ill health, and focuses on individual's responsibility for keeping themselves healthy. However, it provides little recognition of the role that councils play in commissioning ill health prevention services through public health teams or how councils will be supported to upscale their work. There has been a year-on-year reduction in the public health grant provided to councils to deliver ill health prevention services since 2015, and this is not

mentioned in the paper. Furthermore, there is very little mention to the action the government will take to prevent ill health through the root causes of poor health, such as poverty, poor housing, education and the environment. Finally, there is no reference to the support that councils will receive to apply health in all policy approaches, which would enable wider council services to contribute to prevention.