

GREEN PAPER - ADVANCING OUR HEALTH: PREVENTION IN THE 2020'S

Office of the Director for Public Health



I. SUMMARY

The Prevention Green Paper, published on 22nd July 2019, sets out a direction of travel for prevention into the 2020's. The proposals aim to help to deliver a government mission to: "ensure that people can enjoy at least 5 extra healthy, independent years of life by 2035, while narrowing the gap between the experience of the richest and poorest".

It should be noted that this is in a context where life expectancy is reducing in some of the most deprived groups nationally; and in Plymouth, is lower than the England averages.

The green paper sets out a vision for prevention in which health is treated as an asset, and the population empowered to 'co-create' their own health. Many of the measures announced focus on personalisation, and addressing inequalities between the most and least deprived members of the population.

While the focus on tackling health inequalities is welcomed, there is a strong focus on individuals and their responsibilities; less recognition of the wider determinants and how strongly that constrains choice (especially in light of emerging evidence around impacts of childhood trauma) than we would like to see.

The Department of Health and Social Care (DHSC) will support prevention by embedding genomics in healthcare, expanding and modernising screening programmes, and taking a predictive approach to prevention to identify risks before they manifest in a personalised way.

This has interesting potential to impact significantly on families where there has been a known or suspected hereditary disease. It is unlikely to impact significantly at the population level, at least not in the near future. There will need to be concerted efforts to ensure that this benefits all eligible, which will require more active case finding in more deprived areas. Funding needs to take this into account.

The NHS Long Term Plan has a key role to play in the wider approach to prevention, with measures such as expanding the diabetes prevention programme, introducing social prescribing and establishing alcohol care teams and support to stop smoking. There will be further support and advice for people to stay active including into old age.

The recognition that the NHS can play more of a role in prevention is welcomed. In Plymouth, we have demonstrated the importance of social prescribing (and the networks of VCSE that sit alongside it), and funding social prescribing through PCNs will add valuable resources; though the current funding does not recognise that different PCNs will have very different patient populations, and it is not weighted towards deprivation. The role of the wider system outside of the NHS has not been recognised as strongly; this is demonstrated by the decline in public health grant over the years, and the minimal mention of local authority role in the NHS Long Term Plan.

The green paper sets out ambitions to address the causes of ill health, and announces a 2030 smoke-free goal, action on childhood obesity, measures to improve food labelling, encouraging industry to reformulate foods and exploration of further levies on high sugar foods.

These actions are welcomed; it is the policy changes at a national level that are generally most effective and can make a significant difference.

The green paper addresses mental health as a key pillar of good health, and introduces a range of measures to support mental health in health services and schools, including a duty for schools to teach about mental health and campaigns to increase awareness of mental health.

Ensuring that mental health has parity of esteem with physical health is important and support for mental health and wellbeing promotion is also important.

The government will explore ways of supporting the wider determinants of health, including supporting local authorities to incorporate health into planning of places and services, and improve access to green spaces.

The recognition of local authority's role is welcomed. In Plymouth, we have been quick to adopt changes allowed under current planning guidance and would be keen to work with any new changes.

Below, further detail is provided on the themes within the green paper. It is at the consultation stage, and Public Health will facilitate a consultation response (the questions are listed in Appendix 1).

2. CONTENT OF THE PREVENTION GREEN PAPER

The paper cites a number of opportunities and challenges that are faced.

2.1. Opportunities

- Intelligent public health: using technology and data to provide targeted support, tailored lifestyle advice, and personalised care:
 - Launching Phase I of Predictive Prevention work programme from PHE
 - Intelligent screening (e.g. to maximise uptake, stratify risks)
 - Intelligent health checks (e.g. increasing uptake, more focused, digital delivery).
 - Precision medicine (e.g. National Genomics Healthcare Strategy autumn 2019 – integrating whole genome sequencing into healthcare system)

Whilst there are opportunities here, there are also risks, a key one being that there is a reduced take up in the areas of most need (the inverse care law) therefore widening inequalities.

We certainly support the principle of better targeting of health checks; we have been working on this in Plymouth already, in efforts to target minimal resources at those most in need. We have found that a full NHS health check is not always the most attractive to those with most to benefit.

- Antimicrobial resistance: AMR contained and controlled by 2040

This is a priority programme for Public Health England and is being driven nationally.

- Immunisations: Vaccination Strategy spring 2020 – reaching over 95% uptake for childhood vaccinations, including second MMR dose and increase uptake of seasonal influenza vaccine.

Vaccination programmes are commissioned by NHS England, with oversight from the DPH. In Plymouth childhood vaccination coverage was generally above 95% in 2017/18, except for the second MMR dose (94.1%). However, flu vaccination uptake is low in at risk groups and those aged over 65.

2.2. Challenges

The four key behaviours targeted in Thrive Plymouth (diet, exercise, smoking, and alcohol) align well with the key challenges identified in the green paper.

2.2.1. Smoking

- Announcing smoke-free ambition in England by 2030.
- Focus stop smoking support on at need groups (e.g. pregnant women, those living in mental health institutions and those in deprived communities).
- Call for evidence to assess further the effectiveness of heated tobacco products

In Plymouth the prevalence of smoking in adults is higher than in England, but levels of smoking at age 15, time of delivery, and in adults with severe mental illness is in line with England. General Practices and Community Pharmacies provide stop smoking services for their patients and customers, as well as a very strong offer from Livewell SW (under 'One You Plymouth') who carry out considerable outreach into communities (including through our Wellbeing Hubs).

2.2.2. Maintaining a healthy weight

- Government will end the sale of energy drinks to children under the age of 16.
- Consulted on calorie labelling in out-of-home sector, promotions and advertising bans on unhealthy foods
- Working with local authorities, e.g. designing cities for active travel, takeaways near schools.

- Commission an infant feeding survey.
- PHE to publish guidelines for nutritional content of baby food and drinks in 2020
- Improve marketing and labelling of infant food and consult on success of current front-of-pack nutritional labelling scheme
- Food and drink reformation:
 - Consider extending the 'Sugar Tax' to sugary milk drinks
 - Reduce population's salt intake to 7g per day
- Improve quality of brief advice on health issues including weight management
- Continue to develop Our Family Health, a digital approach to support families with children aged 4 to 7 years with lifestyle behaviour change
- Improve support to families identified through the National Childhood Measurement Programme.

Our childhood obesity figures in Plymouth are mixed compared to England (lower at age 10-11, but higher at age 4-5 and adults), but remains a very significant health problem.

There are a wide range of system-wide measures that support reductions in obesity, and these are core to Thrive Plymouth and the Plymouth Plan. Our Local Plan for Plymouth embedded actions to reduce children's exposure to takeaways near schools and to prevent a proliferation of takeaways in any given area.

Local actions can only do so much and national measures such as better regulation of foods and of marketing are very helpful in tackling this issue.

2.2.3. Staying active

- Promote active travel
- Launch a new 'digital design challenge' for strength and balance exercises for at risk groups
- Support health professionals to promote physical activity in their patients (Moving Healthcare Professionals)

In England a third of all adults do not meet guidelines of for aerobic activity and this is similar in Plymouth. As one of the Thrive Plymouth risk factors, we are working across the city with partners to encourage physical activity, whether this is active travel, seated exercise classes for those with reduced mobility, or sports. Active for All is a service which supports and promotes physical activity in adults with mental health problems and/or learning disabilities in Plymouth.

The Manadon Sports and Community Hub was recently opened; this venture is run by Plymouth Argyle Community Trust and the focus is on getting the community engaged and helping people to be more active in a way that works for them. It is closely affiliated with the Four Green wellbeing Hub and thus brings in all of the dimensions of health, wellbeing and person-centred support that Wellbeing Hubs offer.

2.2.4. Taking care of our mental health

- Improve mental health literacy
- Mental health in the school curriculum and training for all new teachers
- Advice for children and young people on dealing with difficult emotions and situations (Rise Above programme in schools and online)
- Encourage local authorities to put in place mental health promotion plans
- Strengthening suicide prevention plans
- Support university students with mental health
- Every Mind Matters Campaign in October 2019, which will also include advice to parents on supporting their children's mental health and wellbeing
- Breathing Space scheme to provide respite to those in problem debt
- Embed nature-based interventions as part of strategies for preventing and treating mental ill health
- Alcohol: increase availability of alcohol-free or low-alcohol products by 2025

- Drug use: policy development around issues with prescribed and illicit opioids.
- Sleep: review the evidence on sleep and health

In Plymouth the estimated prevalence of common mental disorders in over 16s and school pupils with social, emotional and mental health needs are greater than the national average. However, self-reported wellbeing scores are in line with the national average.

Alcohol and illegal drug misuse in Plymouth is higher than the national average and is concentrated in our most deprived and vulnerable populations. Our services are efficient, effective and amongst the lowest unit cost in the region. We have been developing a 'whole system' approach to service design and delivery, removing divisions between services and responding collectively to complex presentations.

The Health Improvement Service (One You Plymouth) delivers personalised information and support for people to make lifestyle improvements, including smoking cessation, weight management, physical activity interventions and brief interventions for alcohol. The service targets face to face support within the most deprived neighbourhoods.

Thrive Plymouth year 4 focused specifically on mental wellbeing, and there is considerable work underway across the city through our Thrive Plymouth Network.

Prevention in the NHS

- Expand role for community pharmacies for minor illnesses and health advice.

2.3. Strong Foundations

2.3.1. Early years

- Modernise the Healthy Child Programme – universal in reach, personalised in response.
- Consult on school toothbrushing scheme
- Explore ways to remove barriers to fluoridating water

The Healthy child programme in Plymouth has recently been re-procured as an integrated offer, delivered by Livewell SW. This is developing and modernising the service.

Child oral health metrics in Plymouth are either in line or better than the national average; we have strong partnerships across the city with the Peninsula Dental School and the associated CIC.

2.3.2. Creating healthy places

Employment and workplaces

- Million more disabled people in work by 2027
- Health is Everyone's Business: consultation on measures to reduce ill health-related job loss
- Explore how to align support for people with mental and physical health conditions across the NHS, employers and occupational health
- Launch a call for evidence on MSK problems in the workplace

We are working closely with partners such as PLUSS and the Jobcentre through Wellbeing Hubs to ensure that people are supported to find work and to stay in work.

One area of Thrive Plymouth is the Workplace Wellbeing where we have supported local employers to support the health (physical and mental) of their workforce.

Homes and Planning

- Improve homes for people living with a disability, including dementia
- Launch the 'Home of 2030' design competition bringing together clean growth and ageing society grand challenges.
- Publish Putting Health into Place principles for local systems as they plan, design and manage new neighbourhoods, streets, parks and buildings so that they prioritise health and wellbeing.

- Improve public awareness about pollution sources and improve data on health impacts of air quality

The Plymouth Plan (and associated documents) describes the ambition for development for Plymouth to be a healthy city and to ensure there is housing fit for the needs of the population.

- Safer communities: public health approach to tackle serious violence with a focus on prevention and multi-agency working to tackle the issue.

We have a strong Safer Plymouth partnership; trauma-informed practices will support the prevention agenda around serious violence.

- Loneliness: loneliness strategy: will publish annual reports on loneliness agenda.

We have a loneliness Action Plan, in support of a Pledge to tackle loneliness throughout our communities.

2.3.3. Healthy ageing

2020 to be the decade of active ageing

- Develop a Consensus Statement on Healthy Ageing

2.3.4. National action

- Develop and launch a new Composite Health Index, which can be tracked alongside other top-level indicators like GDP
- Expand PHE's capacity to project and model the impact of future trends in health
- Improve the quality and coverage of health impact assessments of non-health policies.
- Develop a new Sexual and Reproductive Health Strategy for England.

Rates of sexually transmitted infections in Plymouth are high when compared to England averages and rates in nearest neighbour areas. Rates of teenage conceptions in Plymouth are slightly above the England average but the lowest when compared to nearest neighbours. Sexual Health in Plymouth operates as part of a broader system of sexual and reproductive healthcare services commissioned by the CCG and NHS England that include abortion services, HIV treatment and care services, a Sexual Assault Referral Centre and cervical screening programme. Plymouth City Council also commissions General Practice and Community Pharmacies to provide long acting reversible contraception, emergency contraception and chlamydia screening and treatment.

2.3.5. Local action

- Health and wellbeing boards should form a key part of the local infrastructure on prevention, working with integrated care systems.
- Want the NHS and local authorities working more closely with more collaborative commissioning, making the best use of health and wellbeing boards.
- Local authorities will continue to be responsible for commissioning sexual and reproductive health, health visiting and school nursing services.

3. APPENDIX I CONSULTATION QUESTIONS

Prevention Green Paper : Advancing our health – prevention in the 2020's

The Green Paper is available here;

<https://www.gov.uk/government/consultations/advancing-our-health-prevention-in-the-2020s/advancing-our-health-prevention-in-the-2020s-consultation-document>

Consultation responses can be made here;

<https://consultations.dh.gov.uk/prevention/a09d31b8/consultation/subpage.2019-07-02.2217589679/>

The specific questions in the consultation are as follows;

1. Which health and social care policies should be reviewed to improve the health of: people living in poorer communities, or excluded groups?
2. Do you have any ideas for how the NHS Health Checks programme could be improved?
3. What ideas should the government consider to raise funds for helping people stop smoking?
4. How can we do more to support mothers to breastfeed?
5. How can we better support families with children aged 0 to 5 years to eat well?
6. How else can we help people reach and stay at a healthier weight?
7. Have you got examples or ideas that would help people to do more strength and balance exercises?
8. Can you give any examples of any local schemes that help people to do more strength and balance exercises?
9. There are many factors affecting people's mental health. How can we support the things that are good for mental health and prevent the things that are bad for mental health, in addition to the mental health actions in the green paper?
10. Have you got examples or ideas about using technology to prevent mental ill-health, and promote good mental health and wellbeing?
11. We recognise that sleep deprivation (not getting enough sleep) is bad for your health in several ways. What would help people get 7 to 9 hours of sleep a night?
12. Have you got examples or ideas for services or advice that could be delivered by community pharmacies to promote health?
13. What should the role of water companies be in water fluoridation schemes?
14. What would you like to see included in a call for evidence on musculoskeletal (MSK) health?
15. What could the government do to help people live more healthily:
 - In homes and neighbourhoods
 - When going somewhere
 - In workplaces
 - In communities

16. What is your priority for making England the best country in the world to grow old in, alongside the work of Public Health England and national partner organisations?
- Support people with staying in work
 - Support people with training to change careers in later life
Support people with caring for a loved one
 - Improve homes to meet the needs of older people
 - Improve neighbourhoods to meet the needs of older people
 - Other [specify]
17. What government policies (outside of health and social care) do you think have the biggest impact on people's mental and physical health? Please describe a top 3
18. How can we make better use of existing assets - across both the public and private sectors - to promote the prevention agenda?
19. What more can we do to help local authorities and NHS bodies work well together?
20. What are the top 3 things you'd like to see covered in a future strategy on sexual and reproductive health?
21. What other areas (in addition to those set out in this green paper) would you like future government policy on prevention to cover?

3.1. Heading 3

Normal

3.1.1. Heading 4

Normal