

Summary of Government Green Paper

**Advancing our health: prevention in the 2020s – consultation
document**

Introduction

From life span to health span

Developments in public health and healthcare means people to live longer lives.

Life expectancy has increased by almost 30 years over the past century.

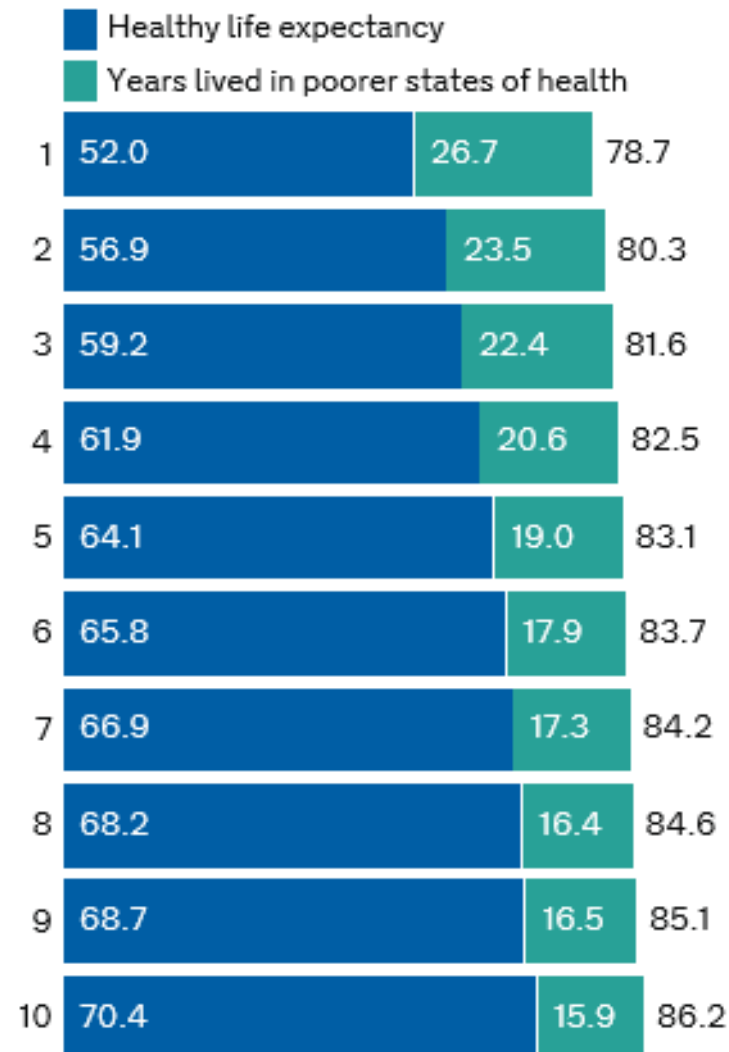
Cancer survival rates are up

Mortality rates from heart disease and stroke are down.

However, improvements in life expectancy are slowing and over 20% of years lived are expected to be spent in poor health.

There is also a clear social gradient to healthy life expectancy. That is, people in deprived areas tend not only to live shorter lives, but they also spend more of those years in poor health. For example, [women living in the 10% most deprived areas can expect to live 18 fewer years in good health than those in the 10% least deprived areas.](#)

Female healthy life expectancy at birth and years lived in poorer states of health by national deprivation deciles, England, 2015 to 2017



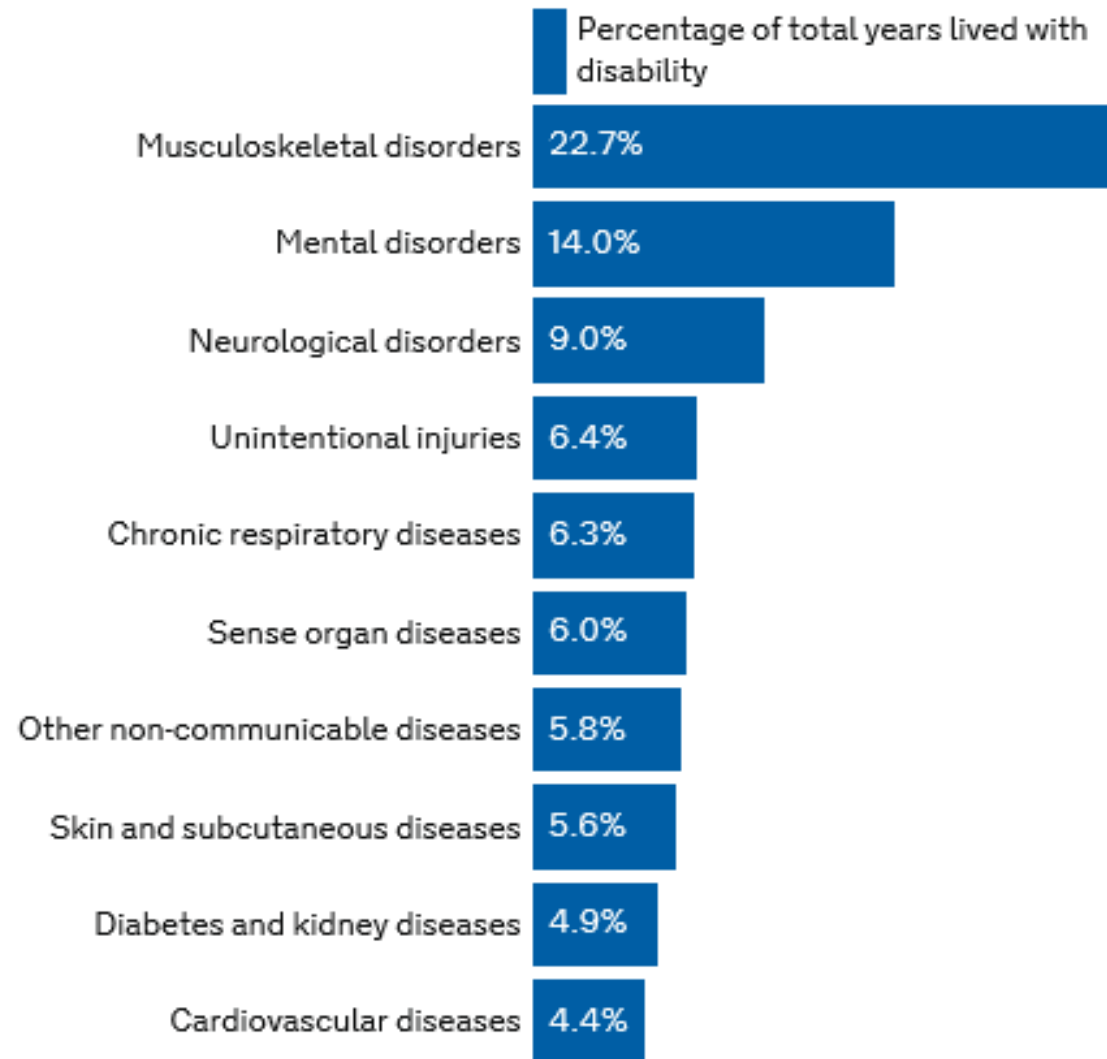
Consultation Question

Question: Which health and social care policies should be reviewed to improve the health of people living in poorer communities or excluded groups?

HIC response: *Excluded groups could be people sleeping rough, people leaving care, ex-offenders, and Gypsy, Traveller and Roma communities.*

See section 14 on Poverty

Leading causes of years lived with disability, England, 2017

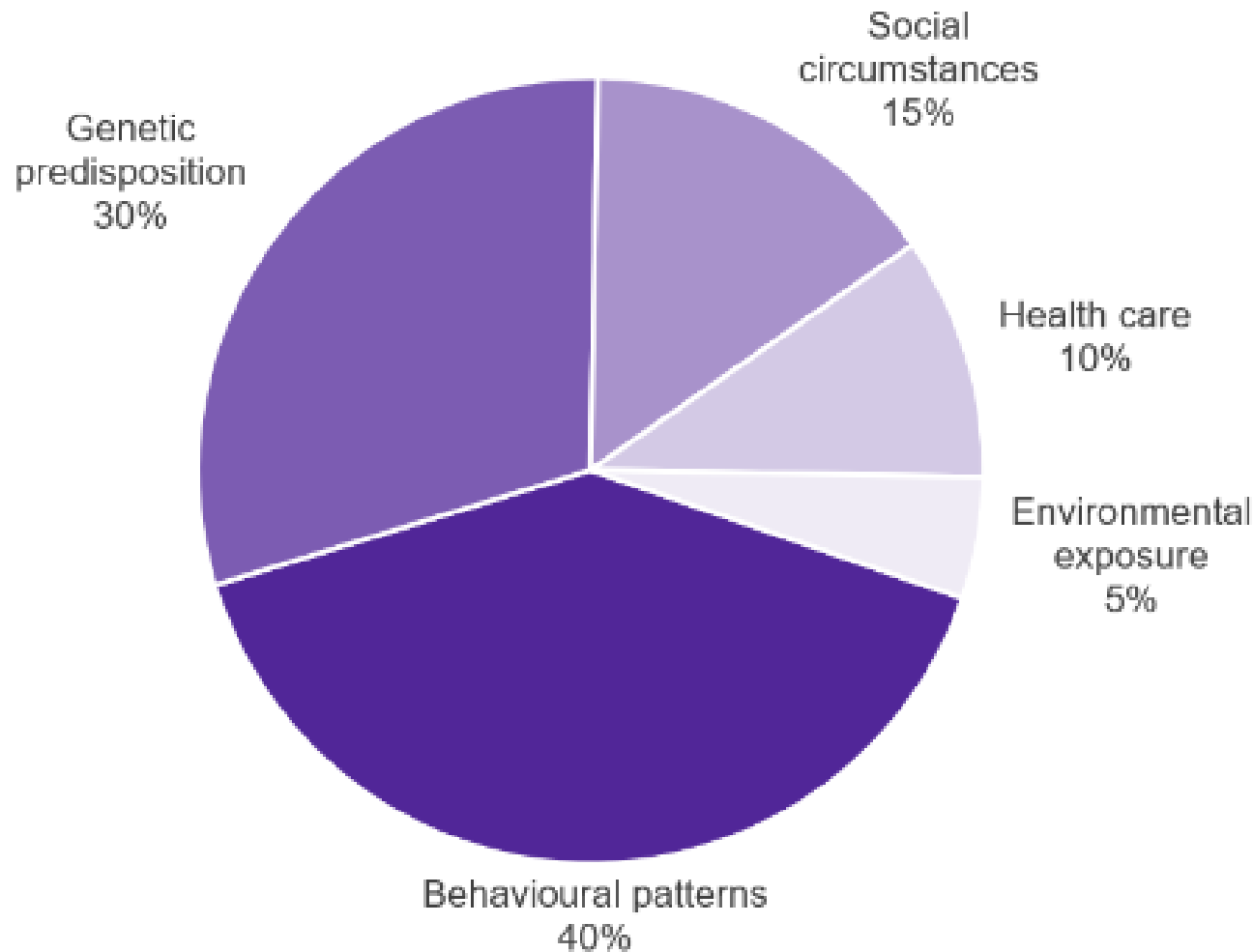


Drivers of Good Health

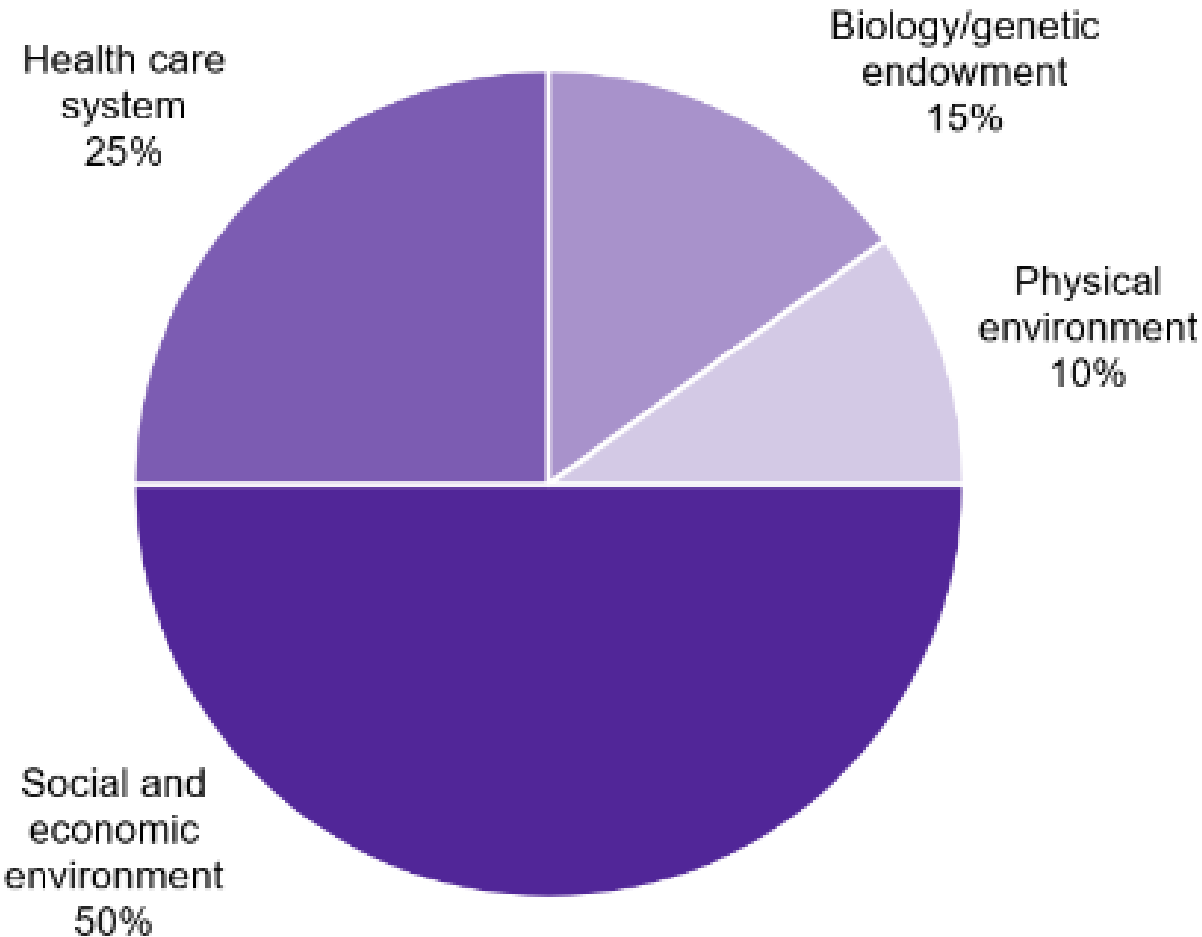
Factors that shape our health.

- the services we receive (Chapter 1)
- the choices we make (Chapter 2)
- the conditions in which we live (Chapter 3)
- our genes, which we inherit from our parents

Determinants of premature mortality and their contribution



Impact of determinants on health status



Chapter 1: Opportunities

- Intelligent public health
- Predictive prevention
- Focused support and advice
 - Intelligent screening
 - Intelligent health checks
- Precision medicine – genomics
- Tackling current and future threats
 - antimicrobial resistance
 - Immunisations

Consultation Question

Question: Do you have any ideas for how the NHS Health Checks programme could be improved?

- HIC response:
- See below re Community pharmacists role
- More systematic approach to alcohol risk screening and intervention including training of HC staff, and clear referral pathways [though Public Health budget cuts have had an impact on local Alcohol services]

Chapter 2: Challenges

Evidence suggests our biggest challenges are: being smoke-free, eating a healthy diet and staying active, and taking care of our mental health

- Being smoke-free
 - Discouraging people from starting
 - Supporting smokers to quit

Consultation Question

- [Question: What ideas should the government consider to raise funds for helping people stop smoking?](#)
- HIC response: Government should look into ways of including smoking cessation into existing service contracts so it becomes part of business as usual within current financial envelope rather than something bespoke. E.g. why are medicines management teams in the hospitals not already offering NRT as part of their ward rounds. Why not also include smoking cessation as part of the GMS contract.

Chapter 2: Challenges

- Maintaining a healthy weight
 - Eating a healthy diet
 - Infant feeding
 - Clear labelling
 - Improving the nutritional content of food and drink
 - Support for individuals to achieve and maintain a healthier weight

Consultation Questions

[Question: How can we do more to support mothers to breastfeed?](#)

HIC Response: No further comment

[Question: How can we better support families with children aged 0 to 5 years to eat well?](#)

HIC response:

- Why not have priority for making the UK/England the best place in the world to be born in (there is a similar aspiration in the Green Paper for the elderly, and reference in the Green Paper to a 'good start in life')
- Reduce Child poverty see section 14
- Incentivise healthy food
- Extend sugar tax to milky drinks
- Address marketing and promotion of unhealthy foods (e.g. supermarket layouts)

Consultation Questions

Question: How else can we help people reach and stay at a healthier weight?

HIC response:

- Embedding the MECC principles within the workforce
- Encouraging professional group uptake of 'raise the issue of weight' training
- Supporting the co-commissioning of services across the weight management pathway

Chapter 2: Challenges

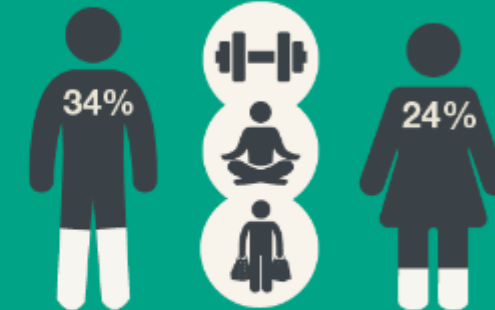
- **Staying active**

How active are we?

1 in 4 women and 1 in 5 men in England are classed as physically inactive – doing less than 30 minutes of moderate physical activity per week.



Only 34% of men and 24% of women undertake muscle-strengthening activities at least twice a week.



Men are more likely than women to average 6 or more hours of total sedentary (sitting) time on both weekdays and at weekends.



Consultation Questions

Question: Have you got examples or ideas that would help people to do more strength and balance exercises?

HIC response: *Strength and balance exercises include yoga, pilates, tai chi...dance, or even carrying heavy shopping bags. National campaigns?*

Question: Can you give any examples of any local schemes that help people to do more strength and balance exercises?

HIC response: No

Chapter 2: Challenges

- Taking care of our mental health

Good health is much more than the absence of illness. It's a state of wellbeing that includes our mental as well as our physical health. Parity of esteem was enshrined in law back in 2012.

- Tackling risk factors and strengthening protective factors
- Taking action

Consultation Questions

Question: 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?

HIC response:

- See Poverty section 14
- Funding / resource to support the roll out of programmes including Connect 5, and Mental health first aid, dementia friends programmes etc.

Question: Have you got examples or ideas about using technology to prevent mental ill-health, and promote good mental health and wellbeing?

HIC response: No

Chapter 2: Challenges

- Wider factors

- Alcohol
- Drug use
- Sleep

- Prevention in the NHS

Commitments in the NHS Long Term Plan include:

- obesity – the NHS will fund a doubling of the NHS Diabetes Prevention Programme over the next 5 years, and provide access to weight management services in primary care for people with diabetes or hypertension with a BMI of 30 plus
- smoking – by 2023 to 2024, all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services, including a new smoke-free pregnancy pathway for expectant mothers and their partners. A new smoking cessation offer will also be available as part of specialist mental health and learning disability services for long-term users
- alcohol – over the next 5 years, alcohol care teams will be fully established in those hospitals with the highest rates of alcohol dependence-related admissions
- inequalities – the NHS will set out specific, measurable goals for narrowing inequalities, including those relating to poverty, through the service improvements set out in the plan

Consultation Questions

Question: 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?

HIC response: National campaigns to promote this? Encouraging good sleep hygiene / reducing use of IT before bed etc.

Question: Have you got examples or ideas for services or advice that could be delivered by community pharmacies to promote health?

HIC response:

- Community pharmacists could have bigger role in ensuring appropriate prescribing after the NHS Health Check to ensure the 'effector' arm strengthened (e.g. statin prescription for high CVD risk).
- Community pharmacists have a huge role they could play including being involved in the MECC agenda, care home services, healthy lifestyle advice, weight management services, BP services, Cholesterol services, sexual health services, smoking cessation services as well as their wider role in medicine provider. Community pharmacy engagement with national/local campaigns.
- New pharmacy contract should assist with this.

Chapter 3: Strong foundations

- The early years
 - The first 1,000 days of life are a critical time for brain development
 - Wellbeing of their parents or primary carer
 - Speech, language and communication skills
- Children's oral health

Consultation Questions

- **Question:** What should the role of water companies be in water fluoridation schemes?
- HIC response: No comment.

Chapter 3: Strong foundations

- Creating healthy places
 - Workplace health – good jobs are good for health
 - Long-term health conditions like musculoskeletal problems, mental ill-health, and other conditions
- Homes, neighbourhoods and communities
- Safer communities
- Connected communities
- Homes and neighbourhoods
- Green spaces and clean air

Consultation Questions

Question: What would you like to see included in a call for evidence on musculoskeletal (MSK) health?

HIC response: No comment.

Question: What could the government do to help people live more healthily: in homes and neighbourhoods, when going somewhere, in workplaces, in communities?

HIC response:

- In homes and neighbourhoods national, impactful campaigns
- When going somewhere ???
- In workplaces – funding / resource / national coordination of schemes such as the health at work charter
- In communities

Chapter 3: Strong foundations

- Active ageing

The decisions we take at midlife (around 45 years old) will have an important bearing on our later lives. Hence, there are steps we can take – both as individuals and as a society – to set ourselves up for longer, happier lives.

- The menopause and women's health
- Active ageing to prevent disability and maintain independence

Consultation Question

Question: What is your priority for making England the best country in the world to grow old in, alongside the work of PHE 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:

HIC response: The priority should be assisting people to live longer, healthier, happier, independent lives, with more disease free years.

Chapter 3: Strong foundations

- National action
 - Prevention in wider policies
 - Value for money
- World-class research
- Local action
 - The Wigan Deal
 - 'Our Dorset': Prevention in an Integrated Care System
 - Sexual and reproductive health

Consultation Question

[Question: 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.](#)

HIC response:

Whilst the harnessing of new technology (genomics, AI) is to be welcomed as part of a high risk strategy to target prevention (personalised prognostic prevention) and building the evidence base especially for intervention, this approach alone will be less cost effective and lead to more inequity than addressing whole population issues. Foremost of these is tackling poverty which has myriad effects on health, some of which are recognised in the Green Paper. The Social Metrics Commission's 2019 report

Link: <https://li.com/reports/measuring-poverty-2019-a-report-of-the-social-metrics-commission>

has highlighted that in the UK in 2017/18 over 14 million people (22%) were in poverty. This figure is greater than the population of Belgium with impacts including poor diet ('food poverty', manifest in the growing use of foodbanks), warmth ('fuel poverty') and mental health. Half of those in poverty are in persistent and often deep poverty. One in three children in the UK live in poverty (34%, 4.6 million) and this is projected to rise by 2021/22 (Institute of Fiscal Studies). Poverty rates are highest in: lone parent families (47%); those with more than 2 children (43%); households where no one is in work (70%); ethnic minorities (45%); and in those where there is a disabled member (48%).

The Joseph Rowntree Foundation <https://www.jrf.org.uk/report/uk-poverty-2018>

has highlighted the scale of destitution where households cannot afford basic necessities, this was estimated at 1.5 million in 2017. The key triggers pushing people in poverty into destitution include debt repayments (usually to public authorities); benefit delays and sanctions; and high living costs of which housing costs are a key element.

Consultation Question response continued...

[Question: 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.](#)

HIC response continued:

- There is a shortage of affordable homes, which is contributing to a crisis of homelessness. Families on typical incomes are over-dependent on insecure and expensive private rented sector, which has more than doubled as a sector since 2001.
- (Shelter:https://england.shelter.org.uk/__data/assets/pdf_file/0011/1597709/2018_10_19_Shelter_briefing_-_Building_more_affordable_home)
- 268,000 people are homeless in England (2018), including 123,000 children; with 80,000 families in temporary accommodation. Rough sleeping has increased and concealed homelessness (including people who become homeless but find a temporary solution by staying with family members or friends, living in squats or other insecure accommodation) is growing, with 1.2 million households on the council house waiting lists in 2017.
- Central Government has a key role in addressing poverty which is largely absent from the Green Paper. Approaches to tackle these interlinked problems include:
- Substantial revision of universal credit by DWP to ensure timely and fair system of benefits (including not penalising those with more than 2 children);
- Reducing housing costs through access to affordable safe quality housing through large increases in housebuilding especially for social rent;
- Wealth distribution through more progressive taxation;
- Wider introduction of the living wage.

Consultation Questions

Question: How can we make better use of existing assets – across both the public and private sectors – to promote the prevention agenda?

HIC response: Pooled budgets.

Question: What more can we do to help local authorities and NHS bodies work well together?

HIC response: Integration and analysis of data on wider determinants of health with health and social care data.

Question: What are the top 3 things you'd like to see covered in a future strategy on sexual and reproductive health?

HIC response:

- Sexual health – reduction of sexually transmitted infections across the sexually active lifecycle (especially, reducing Chlamydia and late diagnosis of HIV).
- Reproductive health – increasing more effective access to LARC as a first choice
- Blood Borne Viruses – a strategy that recognises the role of sexual health in the transmission of BBVs.

Conclusion

- Shift from helping people live longer to keeping people healthier for longer
- Both national and local government working more closely with the NHS
- Prevention at the heart of decision making
- '5 more years of healthy, independent life by 2035 while reducing the gap between richest and poorest'
- individuals and communities must play their part too

Consultation Question

[Question: What other areas \(in addition to those set out in this green paper\) would you like future government policy on prevention to cover?](#)

HIC reponse:

- Alcohol as there is very little of weight in the Green Paper, the obvious missing intervention is minimal unit pricing, information from Scottish evaluation might help support the case. The more systematic use of NHS Health Check c mentioned above , and alcohol calorie labelling;
- Drug misuse including opioid;
- Air pollution given greater priority as a modifiable risk that contributes to health inequity, linking it to climate change, so 'green is healthy';
- Need to foster a 'culture of health' through school and college education;
- Clarify role of social prescribing to include helping individuals deal with impact of poverty and alleviate it where possible;
- Greater focus on tackling contribution of Big corporations to unhealthy lives (Big Alcohol, Tobacco, Food and Drink, Gambling, Car/Oil);
- NHS lead the way as a healthy workplace;
- Need to transform the way society and communities are organised and structured, green/climate change agenda offers opportunity to address transport, physical activity, processed food and drink (carbon footprint in manufacture and transport), and energy efficiency.
- Need to increase Public Health funding for important prevention activities, for example smoking cessation especially with the Green Papers 2030 tobacco free country aspiration