

## New focus for public health – *The Health and Social Care Act 2012*

“The Government’s commitment to put the public’s health centre stage has been applauded by those we have heard from.” ...“At a local level, the move of public health services into local authorities is widely supported.” *NHS Future Forum Report* (June 2011).

### Context

1. There are huge opportunities to improve health and wellbeing in England. People living in the poorest areas die on average seven years earlier than people living in richer areas, and have higher rates of mental illness; disability, harm from alcohol, drugs and smoking.
2. We are pulling together every aspect of Government to improve our nation’s health. **At the national level**, this will be through Public Health England, which will be established as an executive agency of the Department of Health, and by delivering concerted cross-government action through the dedicated public health cabinet sub-committee that we have established. **At the local level**, this will involve putting local authorities in charge of driving health improvement, pulling together the work done by the NHS, social care, housing, environmental health, leisure and transport services.

### Key legislative changes

1. The reforms give Secretary of State a duty to take steps to protect the health of the people of England.
2. At the national level there is a clear rationale for accountability for health protection to rest with central Government, as the nature of various threats to health (ranging from infectious disease to terrorist attacks) are not generally amenable to individual or local action. Instead, they require clear “command and control” arrangements, resting on a clear line of sight from the centre of Government down to local services.
3. To do this the Act abolishes the Health Protection Agency (HPA) and transfers its functions to the Secretary of State. Abolishing the HPA is part of a wider programme of reform that abolishes several other public health organisations in

order to streamline a fragmented public health system. The aim of the reform is to exploit synergies across services and reduce inefficiencies due to overlapping responsibilities. Public Health England will bring together a range of organisations into one organisation in a public health system directly accountable to Secretary of State.

4. At the local level, the Act gives local authorities the responsibility for improving the health of their local populations. The Act says that local authorities must employ a director of public health, and they will be supported by a new ring-fenced budget. The Act requires directors of public health to publish annual reports that can chart local progress.
5. The Government believes that many of the wider determinants of health (for example, housing, economic development, transport) can be more easily impacted by local authorities, who have overall responsibility for improving the local area for their populations. Local authorities are well-placed to take a very broad view of what services will impact positively on the public's health, and combine traditional "public health" activities with other activity locally to maximise benefits.
6. The NHS will continue to have a critical part to play in securing good population health. The public health system will support the NHS at every level to do this, for example by supporting and encouraging GP practices to maximise their impact on improving population health.

**Factsheet B4** provides details regarding public health changes in the Health and Social Care Act 2012. It is part of a wide range of factsheets on the Act, all available at: [www.dh.gov.uk/healthandsocialcarebill](http://www.dh.gov.uk/healthandsocialcarebill)

## **CASE STUDY 1 – HEALTHY LIVING PHARMACIES, PORTSMOUTH**

Healthy Living Pharmacies (HLPs) are making a real difference to the health of people in Portsmouth, with 10 pharmacies awarded HLP status by NHS Portsmouth. HLPs have to demonstrate consistent, high-quality delivery of a range of services such as stopping smoking, weight management, emergency hormonal contraception, chlamydia screening, advice on alcohol and reviews of the use of their medicines. They proactively promote a healthy living ethos and work closely with local GPs and other health and social care professionals.

Early indications show that HLPs have greater productivity and offer higher-quality services. Early evaluation results include a 140% increase in smoking quits from pharmacies compared with the previous year; and 75% of the 200 smokers with asthma or chronic obstructive pulmonary disease who had a medicines use review accepted help to stop smoking.

In the future system, we expect to see local authorities leading on more innovative public health improvement schemes such as this one in close collaboration with local partners from all sectors.

[www.portsmouth.nhs.uk/Services/Guide-to-services/resources-for-professionals.htm](http://www.portsmouth.nhs.uk/Services/Guide-to-services/resources-for-professionals.htm)

## **CASE STUDY 2 – THE BIG BOLTON HEALTH CHECK**

The Big Bolton Health Check was launched in 2008. It is commissioned and managed by NHS Bolton and supported by the local council. The programme was set up to address high rates of cardiovascular disease in the local area.

The scheme is still running today and is made available in a wide range of community venues, from supermarkets and betting shops to pubs and places of worship to capture those people who do not usually frequent their GP surgery. This offer supplements the offer from local GPs. Feedback from patients and the public is overwhelmingly positive.

Results have shown that take-up of the scheme was high in its first years (approximately two thirds of the target population). Moreover, nearly 30% of those assessed were found to be at high risk (i.e. with a risk score of over 20% in the next 10 years) of CVD. One estimate suggests that the check revealed 900 cases of diabetes, 2,000 people with reduced liver function and 2,000 people with blood pressure problems.

For the people who are diagnosed as part of this scheme, the action taken as a result was and is potentially life-saving. For the local community the return on investment, in terms of preventing circulatory events, is expected to be considerable over the long term.

By protecting the public health budget, local authorities will be able to carry out more preventative projects such as this one to improve the health of the public on a long-term basis.

## **FURTHER INFORMATION**

- [“Healthy lives, healthy people – our strategy for public health in England”](#) – The Public Health White Paper sets out the Government’s long-term vision for the future of public health in England (November 2010).
- [“Healthy lives, healthy people – update and way forward”](#) - This policy statement reaffirms the Government's bold vision for a new public health system. It sets out the progress we have made in developing our vision for public health, and a timeline for completing the operational design of this work through a series of Public Health System Reform Updates (July 2011).