Health Reform

Health Reform Proposals at a Glance

The Government has recently published two white papers on health reform. The first, *Equity and Excellence: Liberating the NHS* outlines the long-term vision for the future of the NHS. The second, *Healthy Lives, Healthy People: Our Strategy for Public Health in England* focuses, in more detail, on the Government’s vision for public health over the next five years.

In essence, public health is concerned with protecting and improving the health of communities through education, the promotion of healthy lifestyles and the prevention of disease and injury. Taken together, these white papers are set to hand local authorities a wealth of new powers and responsibilities, particularly in relation to this issue.

**Equity and Excellence – key proposals**

- Primary Care Trusts (PCTs) to be abolished from 2013 and responsibility for commissioning to be transferred to groups of GPs (Clinical Commissioning Groups) who will be able to contract-out commissioning work to councils, the private sector and not for profit organisations.

- Responsibilities for local public health improvement to be transferred from PCTs to local authorities and Public Health England. Local authorities will be required to jointly employ the director of public health, supported by ring-fenced funding from the Department of Health.

- New legal requirement for local authorities to create health and wellbeing boards and produce a health and wellbeing strategy.

On 19 January 2011, the Health and Social Care Bill was introduced into parliament which takes forward the areas of Equity and Excellence that require primary legislation.
Healthy Lives, Healthy People – key proposals:

• More detail on the form and function of health and wellbeing boards which are to be established in every upper-tier and unitary local authority.
• The boards will:
  - have the flexibility to bring in the expertise of district councils;
  - require local authorities to prepare the Joint Strategic Needs Assessment (JSNA) via health and wellbeing boards;
  - develop a shared view about community needs and, as such, support joint commissioning of NHS, social care and public health services;
  - have a proposed minimum membership of elected representatives, Clinical Commissioning Groups, directors of public health, directors of adults’ and children’s services, local HealthWatch representatives and, where appropriate, the participation of the NHS commissioning board;
  - be able to expand membership to include voluntary groups, clinicians and providers.
• New powers for local authorities to remove licenses from bars and clubs to deal with problem drinking cultures.
• A focus on outcomes – a national outcomes framework for public health will set the broad public health and health inequalities outcomes for all areas and organisations to address.
• Creation of a new dedicated public health service – Public Health England (PHE) - within the Department of Health. Crucially, PHE will allocate ring-fenced funding to local government and it will reward them for their progress made against the proposed health outcomes framework. In addition, it will jointly appoint directors of public health in conjunction with the local authority.
Food for Thought: a summary of the main discussion points

The White Papers have generated several discussion points and a number of organisations have provided responses. These are summarised below.

Local Government Group

The LG Group response welcomes the adoption of a localist approach to health, but warns that large groups of professionals who can have a major impact on health and wellbeing – i.e. social workers, teachers, housing support workers, youth workers, leisure staff, planners etc – must not be ignored.

With respect to directors of public health, the Group is not convinced of the need for joint accountability to Public Health England and would like further clarification as to how this will work in practice, particularly in relation to the appointment and dismissal procedures for this post. It also believes that joint accountability marks the erosion of autonomy for councils to make decisions on the recruitment, selection and performance management of senior staff.

• Evidence-based approach to health improvement and a focus on improving health throughout the course of a person’s life. (Closely linked to the Marmot Review – Fair Society, Health Lives).
Centre for Public Scrutiny (CfPS)

The Centre for Public Scrutiny welcomes, in its response, the fact that the transparency and accountability are ‘threaded throughout’ the Government’s proposals, but it notes that more clarity is needed around accountability arrangements.

The Local Government Chronicle (LGC)

The LGC has written a number of articles which draw together many of the points raised here. However, they also note that the issue of how much money councils can expect in light of their more expansive public health role needs resolving. More specifically, they raise concerns about how the funding allocation from Public Health England (PHE) will work in practice. PHE will receive a ring-fenced budget for all of its activities, from which it will grant councils their ring-fenced budgets. As such, the big question is how the national/local split will work.

The King’s Fund

The King’s Fund raise a number of thought-provoking questions. In particular, they ask whether the Government plans are ambitious enough to address the significant and growing gap in life expectancy between rich and poor.
They also discuss the health reforms in the context of localism and the Big Society and they speculate as to whether the application of nudge theory (the notion of using incentives to encourage people to change their behaviour) could be used to correct certain unhealthy behaviours – for example displaying healthy food more prominently in canteens and supermarkets. As they note however, a critical question is whether the wider application of nudging will widen or narrow inequalities in health. In many cases, the more educated and wealthy will be most capable of responding. Thus, the King’s Fund argue that the Government ought to evaluate the impact of nudge policies on the behaviour of different groups.

**NHS Future Forum**

In response to the controversy raised by the introduction of the Health and Social Care Bill, the Government undertook a listening exercise to gather feedback. As part of this exercise, NHS Future Forum was launched on 6 April 2011. Since then its 45 members have attended around 200 events and have met more than 6,700 people face to face. More than 25,000 people have sent their views to the Forum by email, while a further 4,000 have sent private comments, completed questionnaires or website responses. Set up as an independent group in order to ‘pause, listen and reflect’ on the content of the existing Health and Social Care Bill, the Forum has made a series of recommendations.
The Key Recommendations are as follows:

- The Health and Social Care Bill should be amended to ensure that the primary duty of the health service regulator (Monitor) is not to promote competition. The report said that “Monitor’s role in relation to competition should be significantly diluted in the Bill.”
- The membership of new Clinical Commissioning Groups, which are designed to take control of 65% of the NHS budget, should be widened to ensure there is “effective multi-professional involvement in the design and commissioning of services.”
- The original 2013 deadline for the completion of the reforms should be relaxed.
- The new consortia should only “take on their full range of responsibilities when they can demonstrate that they have the right skills, capacity and capability to do so.”
- Private providers should not be allowed to “cherry pick” patients and the Government “should not seek to increase the role of the private sector as an end in itself.”
- The health secretary “must remain ultimately accountable” for the NHS, in contrast to Lansley’s original proposal in the Bill which made him mainly responsible for the promotion of public health.

Useful Links

North West Employers – Health Reform Transition Page
www.nwemployers.org.uk/?page_id=1161

The King’s Fund – Health Inequalities
www.kingsfund.org.uk/topics/health_inequalities/
Talk to us

For general enquiries about this Quick Guide or for more information on North West Employers:

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[www.nwemployers.org.uk/northwestconnex/](http://www.nwemployers.org.uk/northwestconnex/)

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- A Councillors’ Role in Public Health
- Health Terminology
- Workplace Health
- Health Reform
- Local Government Terminology
- Health Inequalities
- Health Literacy