

**RCP response to DHSC consultation on public health system reform
April 2021**

What do local public health partners most need from the UKHSA?

Sustainable funding for public health is essential so that local authorities can address the needs of their populations – the Advisory Committee on Resource Allocation has calculated that public health needs an extra £3.2 billion. The RCP also has concerns that the delayed proposals outlined in MCHLG's Fair Funding Review could negatively affect public health funding. Replacing the public health grant with funding through business rates retention could risk widening health inequalities, especially in light of the economic damage caused by the pandemic.

Local health partners will also need support for their work and leadership roles, including recognition of the important role of specialist public health skills in the NHS. Coordination will also be an important role for UKHSA, with structures in place enabling integrated approaches at the local, national and international level. Appropriate infrastructures at regional level will also be vital for those activities that are appropriate for the intermediate size populations.

Collaboration with the different tiers within public health is needed too, to ensure the links between health protection, improvement and public health are strengthened.

How do you think the health protection capabilities we need in the future should differ from the ones we have had to date?

Population health should be viewed as a capability, recognising the importance of reducing health inequalities across entire populations to not only improve the resilience of the health system, but wider society and the economy.

The health protection capabilities of UKHSA should also include a focus on clinical research. The value of clinical research in the NHS has been clearly demonstrated throughout the pandemic, with the success of the RECOVERY trial and the identification of successful treatments like dexamethasone. Although the UK has a very successful life sciences sector, pre-pandemic this did not tend to translate to the NHS where clinical research is often not prioritised as part of everyday clinical care or well-resourced, especially in more rural settings.

Climate change is a global threat to health. Tackling it needs to be recognised as an important part of health protection, with the heating of the planet already hitting global health – from respiratory diseases, food production to access to clean water.

The pandemic has also demonstrated that another important principle of health protection should be the recognition of the need to have a "resource buffer" to be able to tackle future emergencies, including equipment and workforce.

How can UKHSA excel at listening to, understanding and influencing citizens?

UKHSA should work closely with those who know citizens and their communities to ensure health information from this new government agency lands with all communities it needs to reach. At a

minimum, UKHSA should work with the health sector, voluntary, community and social enterprise (VCSE) sector, and local authorities and their public health teams to communicate its messages.

Coordination with the Office for Health Promotion (OHP) will also be important, especially given the OHP's proposed 'incubator function' to develop behaviour change interventions.

Within the structure outlined, how can we best safeguard the independence of scientific advice to Government?

As a default position, the advice to government from the CMO and CSA should be published with the exception of very limited criteria such as national security.

The strengthened leadership role of the CMO should also help to ensure the independence of advice, and greater effectiveness of the public health system across all levels.

Where and how do you think system-wide workforce development can be best delivered?

Recognising the importance of cross-system working to improve public health, it makes sense for the workforce for all health and social care roles to be planned and delivered together. This will align with government's intention to take a more cross-government approach to addressing health inequalities.

The importance of academic public health roles also needs to be considered, as part of developing the evidence base for public health measures.

How can we best strengthen joined-up working across government on the wider determinants of health?

The pandemic has shown that the causes of health inequalities are extremely varied – the type of housing you live in, where you are in the country and your job can all affect health and have led to very differing outcomes from COVID-19. The RCP is therefore pleased to see the commitment from government to working across government to address the wider determinants of health.

A cross-government approach, and the creation of the OHP alongside a cross-government ministerial board on prevention, could play a hugely positive role in tackling the wider determinants of health. The best way to strengthen joined-up working on this agenda would be for government to develop a cross-government strategy to reduce health inequalities, backed by funding and strong political leadership.

While government may decide to amplify particular elements of its work to address health inequalities when communicating with the public, it is vital that its plan is underpinned by action to address the numerous social determinants of health.

Having a central plan – with a part of government clearly responsible for delivering it – will ensure all parts of government are bought into the overarching aims of protecting and promoting good health,

while providing clarity on the specific actions each department needs to take to play its part in achieving those central aims.

To support delivery, shared metrics should also be explored – across national, regional and local government.

How can we design or implement these reforms in a way that best ensures prevention continues to be prioritised over time?

The importance of effectively funding public health in the long term must again be emphasised. It will also be vital that integrated care systems (ICSs) are enabled to take an effective approach to public and population health. Health and social care public health skills will be key to developing integrated services for population needs.

How do we ensure that future arrangements encourage effective collaboration between national, regional and local actors across the system?

Enabling a strong public health approach within ICSs is key. Governance arrangements will need to ensure that local VCSE organisations are not sidelined, and their prevention plans should set out a framework for bringing together national objectives with local circumstances, developed in partnership with councils.

There will also need to be planning to ensure that action is being taken at the right level - whether that is national, regional or place.