



EDITORIALS

The NHS long term plan and public health

An opportunity to create a unifying “national service for health”

Rachel Chapman *specialty registrar in public health*, John Middleton *president*

UK Faculty of Public Health, London, UK

The NHS long term plan for England was published on 7 January.¹ It is rightly ambitious and sets out a vision for the NHS that is largely technocratic and pragmatic, and ostensibly dogma-free.² The plan comes in a time of deepening austerity, widening inequalities in health, and deep cuts in local government and public health budgets.³ Although it looks like a good plan for the NHS, is it a plan for health, wellbeing, equality, and care?

There is considerable expectation that demand for health services can be reduced through prevention, with an emphasis on the NHS delivering targeted interventions to reduce health risks. The NHS will offer hospital tobacco treatment services to all smokers admitted to hospital and will offer weight management programmes to obese patients with type 2 diabetes or hypertension. The national diabetes prevention programme will be expanded. Hospital food standards will be improved, as will nutrition training for medical professionals. Hospitals with high rates of admissions related to alcohol dependence will have specialist alcohol care teams. NHS related air pollution will be reduced.

Efforts to tackle antimicrobial resistance will continue. The NHS will take steps to reduce health inequalities in access to care and in outcomes.⁴ Action will be focused on vulnerable groups, including mothers from deprived communities, people with severe mental illness, people with learning disabilities and autism, carers, rough sleepers, veterans, and people with serious gambling problems.

Public health priorities elsewhere in the plan include improving outcomes for mothers and babies, better mental health services for children and young people, suicide prevention, and cancer prevention through screening programmes and expanding HPV vaccination to boys.

The NHS cannot answer all societal ills, particularly those caused collectively through national policy choices. But the plan acknowledges this and seeks to contribute what is within its compass. This is the first time an NHS plan has acknowledged any responsibility for reducing health inequalities. The plan recognises the vital role of the NHS as a good corporate citizen, as an anchor employer for the local economy and in its contribution to climate change. It is weak on harnessing community resources to tackle health problems but does

acknowledge the role of social enterprises, patient involvement in healthcare and health policy, and social prescribing.

Implementation

As others have commented,² successful delivery remains the plan's biggest challenge. Meaningful progress demands genuine partnership with local government and a clear commitment to more funds for local authorities' public health budgets. Uncertainty has been created around NHS involvement in services currently under local authority control, including sexual health, health visiting, and school nursing. The problem is inadequate funding not local government commissioning.^{7,8} Top-down initiatives such as diabetes prevention add cost pressures to already stretched local public health services and lack joint planning. However, an expanded acknowledgement of NHS responsibility for prevention is welcome and should bring opportunities for joint commissioning and investment. Strong, properly funded community involvement will be central to successful implementation. Implementation plans must create a culture of health rather than management of disease.

We need expanded capacity in population health management and public health skills,⁹ in NHS workforce planning, and in training budgets. Public health expertise has been lost since it moved to local government. Critical and independent analysis of wasteful healthcare spending has also been lost and must be regrown.

Governance of the NHS's role in prevention and reducing inequalities needs to be refined. The plan mentions statutory health and wellbeing boards once and sees all health improvement driven by integrated care systems. There is a need for specialist public health expertise in all NHS institutions.⁹ A “dashboard” for NHS interventions on health inequalities is also needed to track progress. Only during the 2000s was health inequality successfully reduced, when a raft of social policies were combined with targeted systematic NHS secondary prevention and overseen by the Department of Health inequalities unit.¹⁰

The secretary of state can only deliver his vision for prevention¹¹ by securing more investment in local government public health and in social care.^{12,13} The return on investment from prevention is clear.¹⁴ Without whole system investment, genuine

partnership, and joint planning, this NHS plan will fail, as so many have before. A prevention transformation fund would re-energise the role of local authority public health and restore confidence that local authorities were key partners in improving the health and wellbeing of the people they serve.¹⁵

Critically, the government must also show that its plans take full account of health in all policies—including housing, industrial and transport (to control air pollution), food and agriculture, welfare rights and taxation, and in the health of future generations.³ The health of the people should be the highest law. There is a rare opportunity here to create a “national service for health” in the next 10 years. Let’s not squander it.

Competing interests: We have read and understood BMJ policy on declaration of interests and have no relevant interests to declare.

Provenance and peer review: Commissioned; not externally peer reviewed.

- 1 NHS England. The NHS long term plan. January 7th 2019. <https://www.longtermplan.nhs.uk/wp-content/uploads/2019/01/nhs-long-term-plan.pdf>
- 2 Alderwick H, Dixon J. The NHS long term plan. *BMJ* 2019;364:l84. 10.1136/bmj.l84 30617185
- 3 Middleton J. Time to put health at the heart of all policies. *BMJ* 2017;357:j2676.
- 4 NHS. Equalities and health impact assessment. <https://www.england.nhs.uk/wp-content/uploads/2019/01/ehia-long-term-plan.pdf>
- 5 United Kingdom Faculty of Public Health. The role of the NHS in prevention. 2018. <https://www.fph.org.uk/policy-campaigns/campaigns/public-health-funding/prevention-within-the-nhs/>

- 6 United Kingdom Faculty of Public Health. Developing the long term plan for the NHS: Consultation response from FPH (30.9.18). <https://www.fph.org.uk/media/1918/nhs-plan-fph-response.pdf>
- 7 Golding N. Public health must stay local. *Local Government Chronicle* 2019 Jan 9. https://www.lgcplus.com/7027355.article?utm_source=newsletter&utm_medium=email&utm_campaign=LGC_EditorialNewsletters.Paid:%20Send%20-%20LGC%20Briefing&mkt_tok=0P1M1F1O1Z1S1R1O1V1Z1P1C1A1S1O1V1S1Y1O1V1E1X1M1K1P1B1A1P1
- 8 ADPH. Investment in public health is vital to stop the growth of drug resistant sexually transmitted infections Press release, 10 Jan 2019. <http://www.adph.org.uk/wp-content/uploads/2019/01/The-Association-of-Directors-of-Public-Health-Response-to-drug-resistant-STI-cases-Jan-2019.pdf>
- 9 United Kingdom Faculty of Public Health. FPH workforce strategy. 2018. <https://www.fph.org.uk/media/1265/fph-workforce-strategy-march-2018.pdf>
- 10 Barr B, Higginson J, Whitehead M. Investigating the impact of the English health inequalities strategy: time trend analysis. *BMJ* 2017;358:j3310. <https://www.bmj.com/content/358/bmj.j3310>. 10.1136/bmj.j3310 28747304
- 11 Department for Health and Social Care. Prevention is better than cure: our vision to help you live well for longer. 2018. https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/753688/Prevention_is_better_than_cure_5-11.pdf
- 12 United Kingdom Faculty of Public Health. FPH president welcomes NHS long-term plan. Press release, 7 Jan 2019. <https://www.fph.org.uk/news-events/media-centre/fph-press-releases/recent/fph-president-welcomes-nhs-long-term-plan/>
- 13 ADPH. Long term plan “undeliverable” without investment in public health. Press release, 7 Jan 2019. http://www.adph.org.uk/wp-content/uploads/2019/01/ADPH-statement_NHS-Long-Term-Plan-1.pdf
- 14 Masters R, Anwar E, Collins B, Cookson R, Capewell S. Return on investment of public health interventions: a systematic review. *J Epidemiol Community Health* 2017;71:827-34. 10.1136/jech-2016-208141. 28356325
- 15 United Kingdom Faculty of Public Health. Prevention transformation fund discussion paper. <https://www.fph.org.uk/media/1917/prevention-transformation-fund-discussion-paper-final.pdf>

Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to <http://group.bmj.com/group/rights-licensing/permissions>