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What's happening in England with the changes to its public health system

Professor Maggie Rae PrFPH, FRCP Hon, FRSPH, FRCP Edin
President, Faculty of Public Health

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Public health in England is rapidly changing

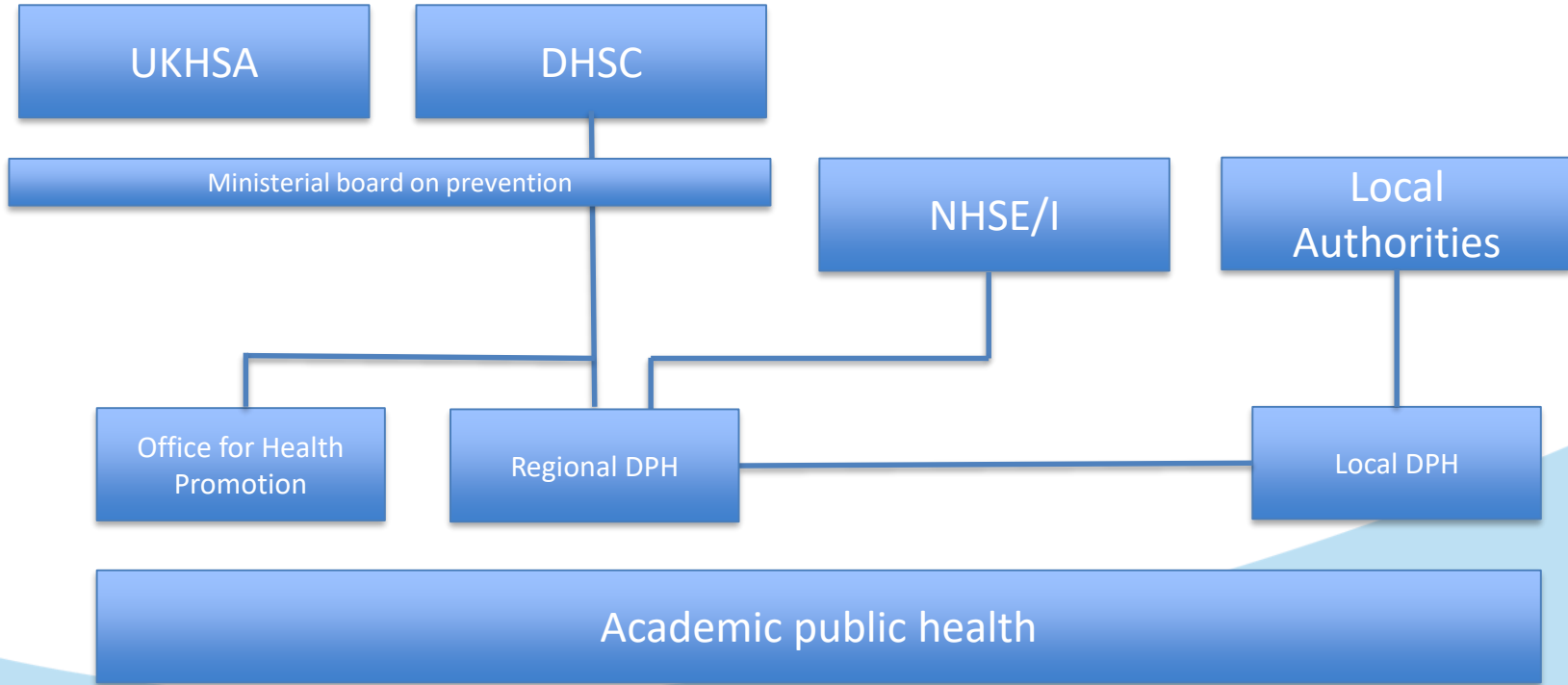


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- The 'announcement' of the re-organisation of Public Health England came in August 2020
- A new UK Health Security Agency, and a new Office for Health Promotion working within the Department for Health and Social Care
- We are particularly interested in the roles of Local Directors of Public Health and Regional Directors of Public Health
- There will be a new cross-Ministerial Board on Prevention
- This re-organisation occurs within the context of wider changes to the healthcare system; Health and Social Care White Paper and ICSSs



The new public health system in England



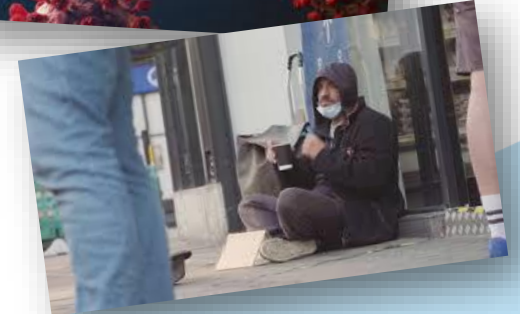
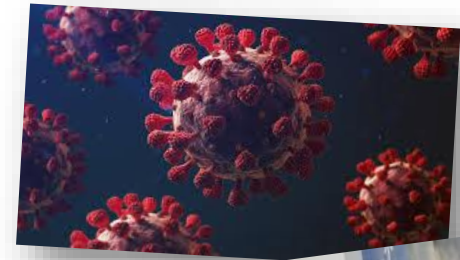
Questions that we need to answer

- What are the opportunities and risks of the reorganisation?
- What are the strengths of the current system and what are the areas for improvement?
- What conditions are required for the new public health system to succeed?



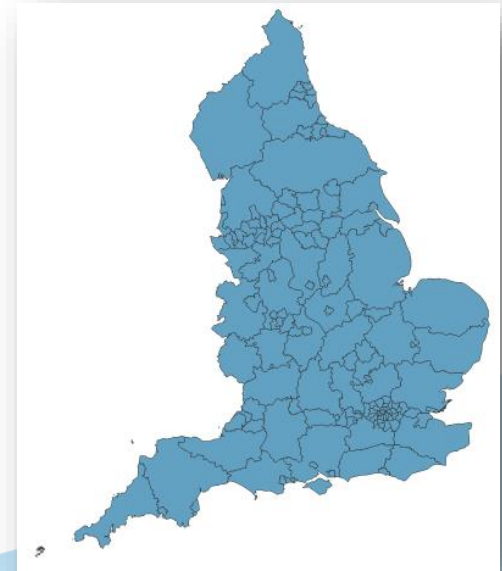
The challenges

- Separating the different functions of public health poses significant challenges – we need to avoid siloed working
- There is a lack of clarity on responsibilities for Healthcare Public Health, including screening and immunisation, dental public health and health and justice
- Who is responsible? We need clarity of responsibilities, and clear lines of accountability and communication between local and national bodies and agencies including ICSs
- The changes are happening against a backdrop of stalling life expectancy, rising homelessness and widening health inequalities – problems further exacerbated by the pandemic



We must have a joined-up local, regional and national public health system

- For a public health system to perform, there must be strong collaborative working between all levels of public health; local, regional and national
- The system must work with the NHS, Local Authorities and the voluntary sector, as well as other partners e.g. Animal Health, Food Standards Agency, Environment Agency, Utility Companies
- There must be clarity of responsibilities between bodies and agencies, with better communication and accountability
- The pandemic has also shown us the importance of continued collaboration with international partners – vaccine equity must be a priority



The importance of Public Health teams

- COVID-19 has emphasised the importance of public health teams, including the excellent work of Practitioners and PH Specialty Registrars
- We need an effective public health system with all tiers working coherently - but local leadership, ownership and involvement requires more priority
- We need a place-based public health system, led by Directors of Public Health and their teams supported by Regional and National public health colleagues
- Which works to address health inequalities and empowers local communities



We need the future public health system to be properly resourced

- The Public Health Grant 2021/22 is inadequate considering the challenges faced by local public health teams - FPH have called for a £1 billion increase in public health funding
- A percentage of ICS spend should fund work on Prevention and Health Inequalities, there is a clear return on investment
- Public health specialists and practitioners have demonstrated their value and FPH are lobbying to have enough specialists and practitioners in every level of public health – local, regional and national
- Ensure that future education and training allows practitioners to develop their careers in public health across the different tiers of the system

