

AHP appreciate and Progress 2024



#AHPappreciateandProgress

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NHS Lothian

AHPs in Public Health: Strengthening our approach to prevention

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Improving the health of our population

<https://services.nhslothian.scot/publichealth>

What is public health?

- **Public health is the science and art of preventing disease, prolonging life, and promoting health through the organised efforts of society**
 - Focused on tackling health inequalities
 - Protects and improves the health of communities and populations
 - Requires collective action
 - Data and evidence driven

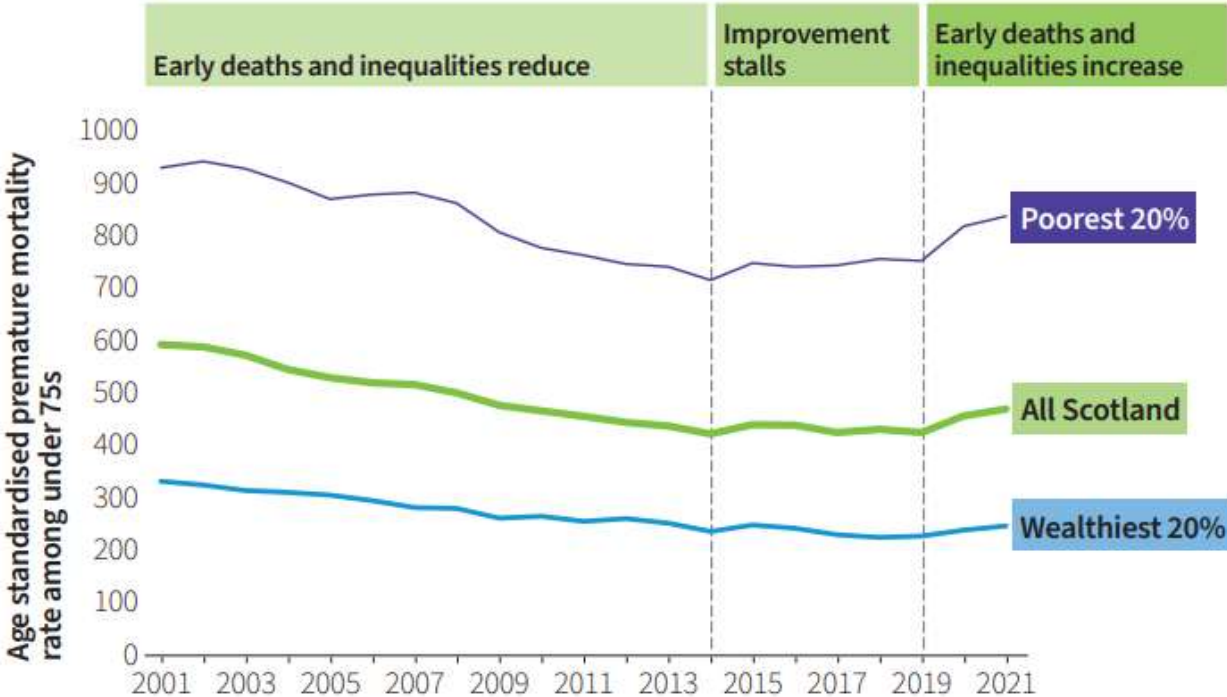
After decades of improvement, Scotland's health is worsening

People are dying younger.

The number of people dying early is increasing.

People are spending more of their life in ill health.

The gap in life expectancy between the poorest and the wealthiest is growing.



Source: National Records Scotland

Services look increasingly unsustainable



More people are being added to waiting lists than are being removed from them, and people are waiting longer for treatment.”

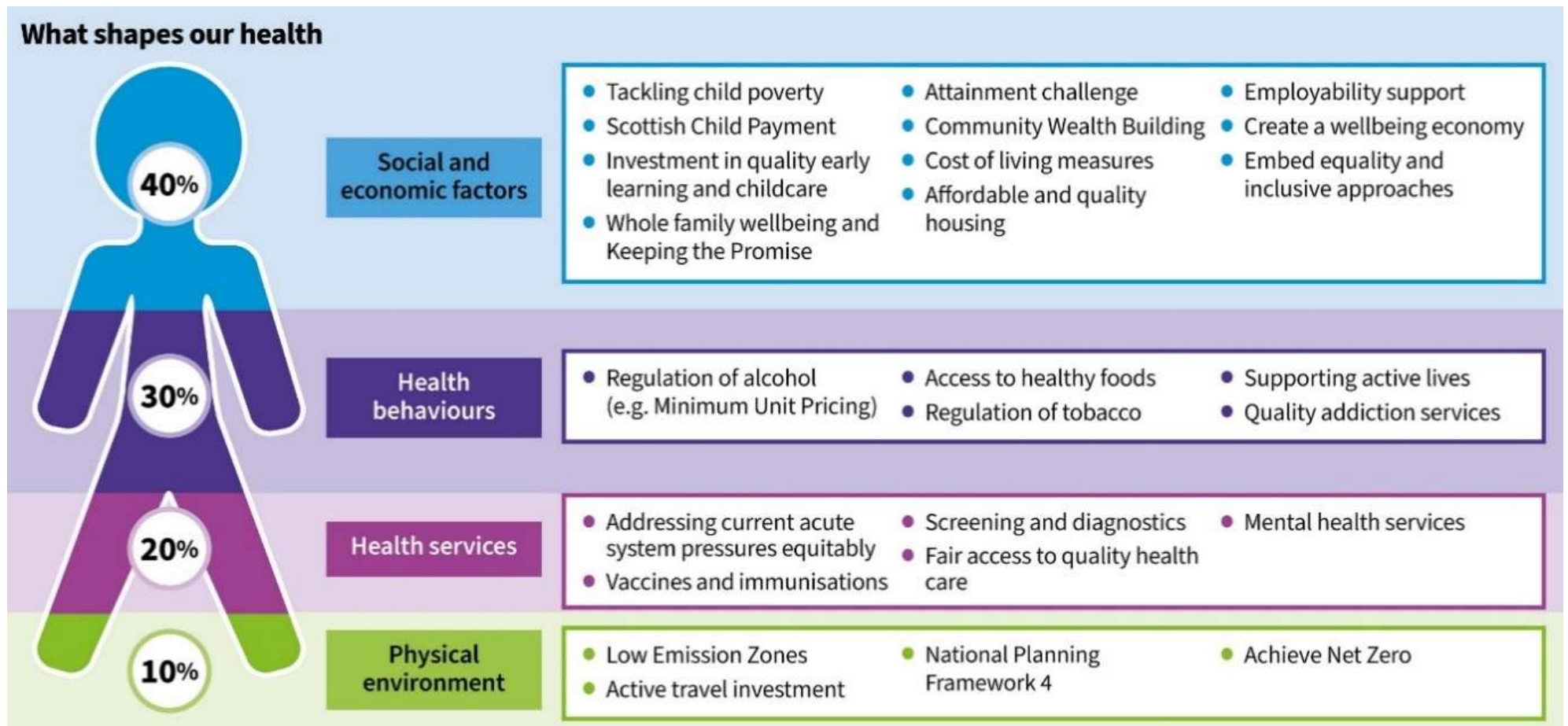
Audit Scotland assessment of NHSScotland, February 2023

Available at: https://www.audit-scotland.gov.uk/uploads/docs/report/2023/nr_230223_nhs_overview.pdf

Marmot principles

1. Give every child the best start in life
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill-health prevention.
7. Address structural racism
8. Tackle climate change

What shapes our health



Adapted from The Kings Fund (<https://www.kingsfund.org.uk/publications/vision-population-health>)



Lothian Public Health

- **Purpose**

- To improve and protect the health of the people of Lothian

- **Corporate objectives**

- Develop collaborative strategies which address the social determinants of health, poverty and inequality by taking a place and wellbeing approach and embedding a programme of prevention activity
- Demonstrate our role as an Anchor Institution
- Lead compliance with our statutory equality duties and delivery of NHS Lothian Equality and Human Rights Strategy

Improving and protecting the health of the people of Lothian

Population Health	Health Protection	Health Care Public Health	Business and Administration
<ul style="list-style-type: none"> ▪ Partnership and Place teams focus on inequalities and improving population health ▪ Public Health Intelligence Team ▪ Maternal and Children's health ▪ Sexual Health Improvement team ▪ Tobacco Control team 	<ul style="list-style-type: none"> ▪ Protect the local population from communicable and infectious diseases and environmental hazards. ▪ Provides specialist advice and operational support to NHS Lothian, local authorities and other agencies. 	<ul style="list-style-type: none"> ▪ Provide oversight across the six National Screening Programmes ▪ Dental Public Health ▪ Immunisation Programmes ▪ Pharmaceutical public health 	<ul style="list-style-type: none"> ▪ Provide administrative and clerical support. ▪ Departmental Governance role re: processes and procedures ▪ Monitor and track workforce performance.

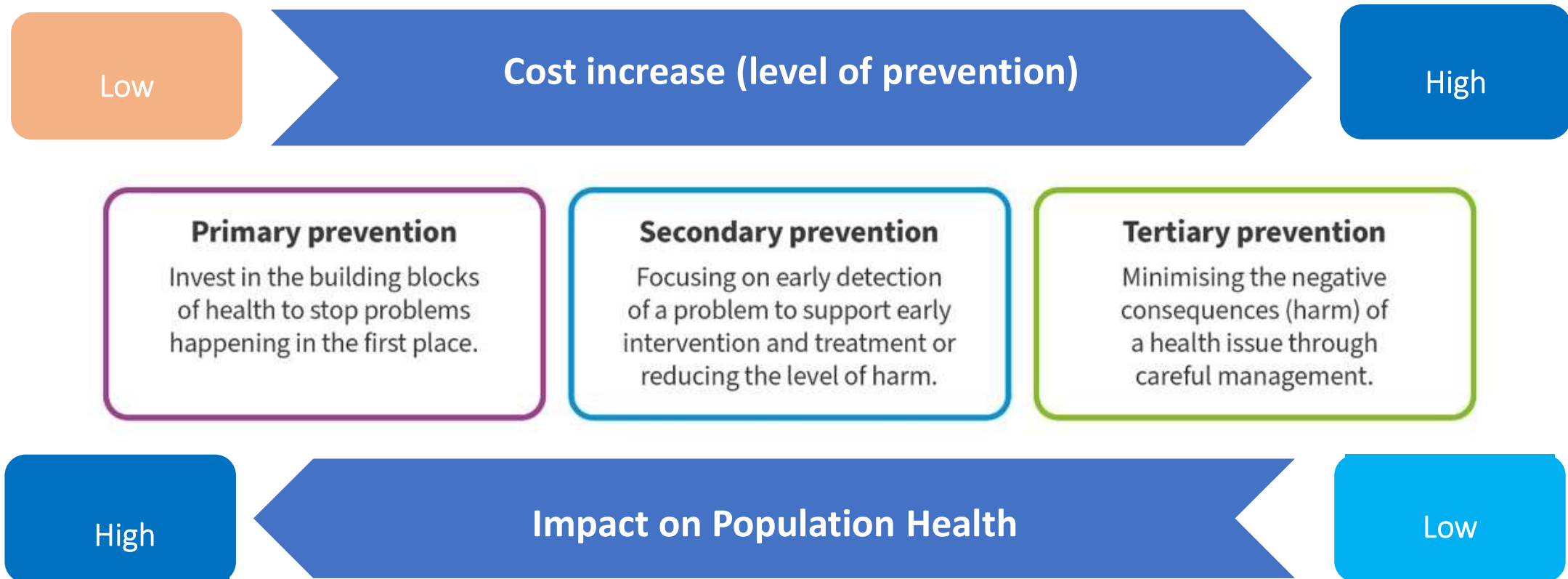
AHPs in Public Health

- **Scottish AHPs Public Health Strategic Framework Implementation Plan**
 - Developing the AHP workforce
 - Demonstrating impact
 - Increasing the profile of the AHP public health role
 - Strategic connections and leadership
 - Health and wellbeing of the workforce
- **HCPC revised Standards of Proficiency**

Public health in action: strengthening prevention

- Prevention is one of the most cost-effective interventions the NHS and wider system can make to improve population health and reduce health inequalities
- Prevention is critical in delivering long-term sustainability and reducing further burden on the health and care system
- Protecting investment in prevention can help to minimise the risks associated with short-term financial decisions in terms of population health and inequalities

Three levels of prevention



The case for prevention

- Primary prevention stops health problems occurring in the first place and is the most cost effective with a median ROI of more than 14:1
- It can be 3-4 times more cost effective than investing in treatment
- For every £1 invested in health service public health prevention (secondary and tertiary), the median ROI was £5

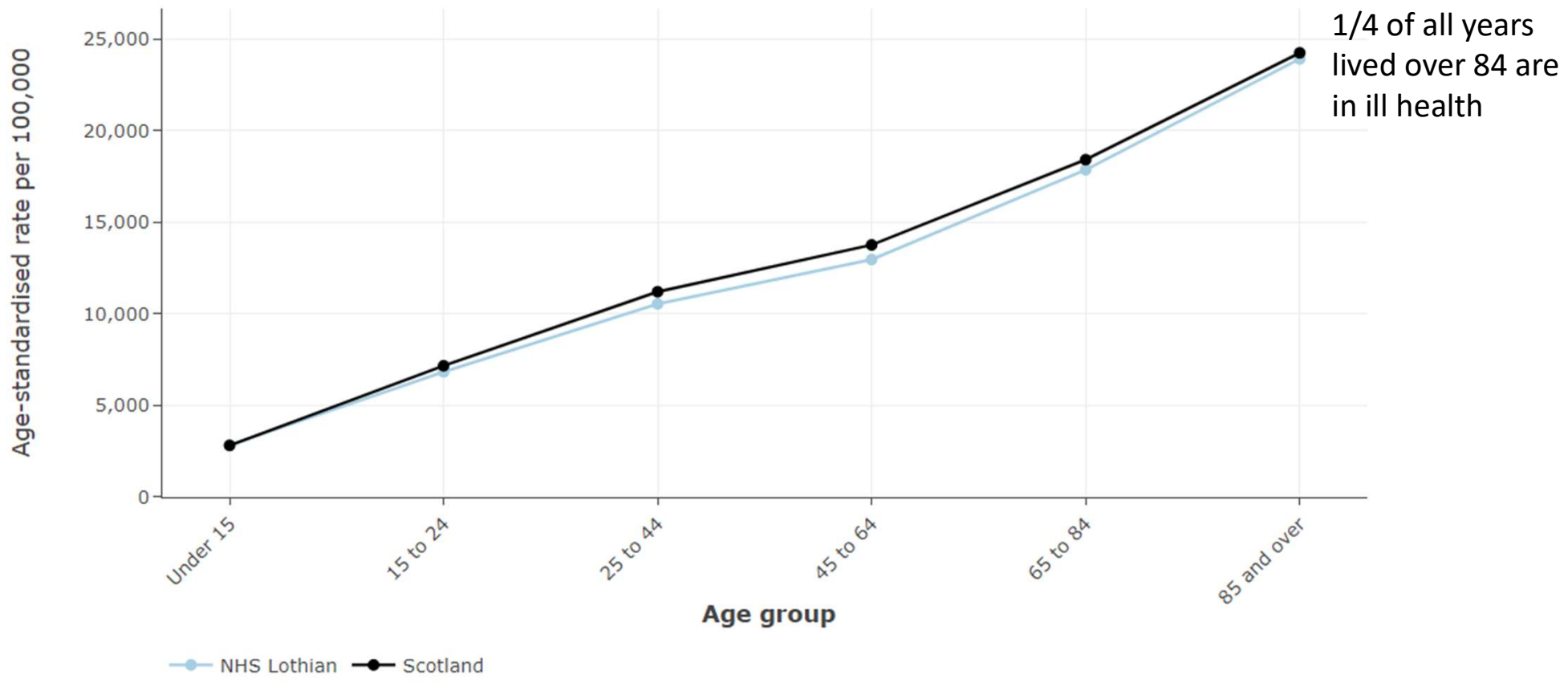
More than a quarter of all deaths in Scotland are avoidable. The [Scottish Burden of Disease study](#) forecast's Scotland's population is expected to fall by 2043 but the level of illness is expected to increase by 21%.

Two thirds of this increase will be due to increases in:



Rank	Absolute change	Percentage change
1	Cardiovascular diseases	Common infectious diseases*
2	Cancers	Cardiovascular diseases
3	Neurological disorders	Neurological disorders
4	Chronic respiratory diseases	Unintentional injuries
5	Diabetes and kidney diseases	Diabetes and kidney diseases
6	Common infectious diseases*	Chronic respiratory diseases

[Scottish Burden of Disease](#) Study 2022: Common infectious diseases are defined as: diarrhoea, upper/lower respiratory, and other common, infectious diseases. As these estimates are based on the pre-pandemic epidemiological situation, COVID-19 is not included in this category



Share of Lothian's total morbidity burden (according to SBoD)



NHS Lothian Service Demand: GP presentations



Top 20 conditions presenting at GP practices	Lothian Incidence Per 100,000 (2022)
Hypertension	714.1
Arthritis/Arthropathy	591.7
Active Cancer	421.2
Diabetes	403.7
Alcohol and substance misuse	348.2
Depression and related disorders	331.5
Asthma	293.0
Ischaemic Heart Disease	283.1
Chronic psychiatric disorders	272.8
Atrial Fibrillation	270.5
Obesity	235.8
Stroke	232.2
Progressive neurological disease	212.5
Chronic Obstructive Pulmonary Disease	211.5
Heart Failure	166.3
Osteoporosis	164.3
Hip fracture	118.5
Peripheral Vascular Disease	73.9
Liver disease	66.6
Bronchiectasis	44.9

Embedding prevention across the Lothian health and care system

- Five-point plan

1. Make prevention a system-wide priority
2. Maximise spending on prevention
3. Embed prevention in performance frameworks
4. Support the local system to embed prevention in strategic plans and service delivery
5. Establish an effective learning and accountability system

Local system priorities

Social
determinants of
health

Maternal, children
and young
people's health

Modifiable risk
factors and the
burden of disease

Social determinants of health

- The health and care system should prioritise work on addressing the social determinants of health
 - Access to money and resources
 - Access to, and maintenance of, good quality employment
 - Affordable, quality and secure housing
 - Affordable and sustainable transport
 - Neighbourhood and surroundings – spatial planning, commercial determinants of health, climate change
 - Family, friends and community – participation and connectedness
- NHS Lothian should continue its commitment to becoming an Anchor Institution
- Public health in Lothian should continue, and increase the pace of, its activity with Community Planning Partnerships

Maternal, children and young people's health

- The Lothian health and care system should prioritise and intensify efforts to:
 - Prevent and mitigate child poverty, particularly in groups at highest risk of poverty
 - Optimise access to long-acting reversible contraception
 - Reduce smoking prevalence among pregnant women
 - Provide preventive and early support for perinatal, infant, children and young people's mental health and wellbeing
 - Continue to support maternal and infant nutrition, including breastfeeding
 - Embed whole-system, anticipatory care approaches to support child development

Modifiable risk factors and burden of disease

- The health and care system should maximise use of existing, evidence based public health programmes
 - E.g. income maximisation, smoking cessation, screening, immunisation
- Explore opportunities to strengthen preventative action across disease pathways
 - Cardiovascular disease and type-2 diabetes
 - Waiting Well
 - Falls prevention
 - Inequalities in access, experience and outcome