Seven priorities to improve public health

To help meet the nation’s future health challenges, Public Health England has drawn up a set of areas health professionals can focus on to positively impact on public health.

**In this article...**
- Areas that must be tackled to improve public health
- Ways nurses can help deliver the priorities at all levels
- Example of how nurses are crucial to the initiative’s success

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An ageing population and technological advancements are key factors threatening the sustainability of the NHS. To combat these challenges Public Health England has drawn up a list of seven priorities that, if tackled, can significantly improve the population’s physical and mental health over the next decade, thereby reducing the pressure on the health service. This article outlines those seven priorities and what nurses can do to help deliver them on an individual, community and national level.

Prevention is high on the national agenda, and protecting and promoting health is vital to dealing with the health challenges we face. The Five Year Forward View (NHS England, 2014) and From Evidence into Action: Opportunities to Protect and Improve the Nation’s Health (Public Health England, 2014a) provide the strategic framework for action. As Simon Stevens, chief executive of NHS England, has said: “It is time we got serious about prevention; Public Health England’s strategy and the NHS Five-Year Forward View are an important next step in setting the health priorities for the country” (PHE, 2014b).

From Evidence into Action (PHE, 2014a) sets out PHE’s ambitions to tackle major health challenges and outlines the seven key priorities where PHE, working with partners, can make a significant difference over the coming five to 10 years. Duncan Selbie and David Heymann, chief executive and chair of PHE, state: “What we need is a fundamental new approach to creating and sustaining health, mental and physical, at every stage and across all our communities” (PHE, 2014b).

Although nurses and midwives are described in World Health Organization Europe’s Strategic Directions as a “vital resource for health (WHO, 2014), international, national and local leadership is needed to maximise their contribution and to ensure it is both visible and valued. PHE is leading work for the UK and Republic of Ireland, and working with WHO Europe to make sure this happens, through the Personalised Care and Population Health programme (PHE, 2014c).

**Priorities for improving the public’s health**

The seven priorities set out by PHE (2014b) are based on evidence and the assessment of those areas in greatest need of improvement over the next five to 10 years. They aim to:

- Tackle obesity, particularly for children
- Reduce smoking;
- Reduce harm from alcohol;
- Secure the best start in life for children to tackle the wider determinants of good health (UCL Institute of Health Equity, 2010);
- Transform a generation’s risk of dementia;
- Tackle antimicrobial resistance (AMR).
- Achieve decline in tuberculosis incidence

As well as the seven priorities, there needs to be a focus on inequalities – what drives them and how we can narrow them. For example, problems related to tobacco, alcohol, obesity and children’s health fall heaviest on those communities that have greater levels of deprivation.

Reducing smoking is one of the seven priorities for improving the public’s health.
community and public health nurses working in local communities understand local need and they are skilled at providing accessible appropriate services; in some places they are the sole provider for groups that are excluded. Health visitors and school nurses lead the Healthy Child Programme, the national public health programme for children and young people, and are key professionals in giving all our children the best possible start.

Another significant factor is mental health. It is well known that positive mental health and wellbeing are associated with a range of better outcomes for people of all ages and backgrounds; conversely, people with serious mental health problems have worse health and a lower life expectancy.

There are many things nurses can do, at individual and community levels, to support individuals’ mental health. They can:
- Help build patients’ emotional resilience by promoting their self-esteem and coping skills;
- Reduce social isolation among older people by encouraging inclusion and participation in local groups and activities;
- Increase mental health awareness by promoting anti-bullying strategies and helping to develop individuals’ protective factors.

Delivering the priorities
To meet the challenges that drive inequality, action will be required on many levels, from the wider determinants of health (for example, tobacco legislation and education), to individual care and support. Health professionals make a real difference at all these levels. All nurses have relationships with patients and their families; primary and community nurses have extensive local knowledge and public health nurses are skilled in taking population approaches to protecting and improving health.

The six domains where nursing practice can be applied to improve population health are:
- Improving wider determinants of health;
- Health improvement – making every contact count;
- Health protection;
- Public health;
- Supporting health, wellbeing and independence;
- Lifecourse.

These form the foundation of health-promoting practice, providing the underpinning evidence base and the metrics and outcomes that can be used to demonstrate impact. The Personalised Care and Population Health programme was developed with input from a range of health professionals (PHE, 2014c).

Nurses asked for more information, easier access to evidence, models for best practice and ways to demonstrate impact. In response, we have produced the framework, Caring for Populations through the Life-course (PHE, 2014c), which sets out:
- Facts about population health;
- Actions;
- Evidence for practice, metrics and outcomes.

The framework gives nurses access to the information they need to not only protect and promote health, but also to make the impact of this contribution visible. It also serves as guidance for leaders, managers, commissioners and educators to develop, support and provide services and care that are personalised to individuals, while improving outcomes for communities and, ultimately, contributing to reducing the inequalities in our society.

The framework already includes models of population health practice for five of the seven priorities – alcohol, antimicrobial resistance, TB, dementia and giving the best start to life – while models for tobacco and obesity are in development. Box 1 demonstrates that the engagement of nurses will be critical to the success of the initiative to tackle AMR, and shows how the framework can support that engagement.

The game changers?
From Evidence into Action (PHE, 2014) describes how to make change happen by harnessing opportunities to do things differently, by implementing things such as behavioural science in the digital age, place-based approaches, information and data transparency, the contribution of employers and the application of wellness and – crucially – an NHS that prioritises prevention and early intervention.

Nurses and other health professionals make a huge contribution to the public’s health by embracing the concept of wellness. This is achieved through health-promoting practice at individual, community and population levels, thereby preventing illness and complications, protecting health, and promoting wellbeing and resilience. Nurses can provide a strong voice in the social movement for a culture of health in our society.

BOX 1. Tackling Antimicrobial Resistance

Aim: Reduce the number of serious infections that are resistant to treatment.

Infections caused by resistant organisms are more difficult and more expensive to treat, and often fail to respond to standard treatment, resulting in prolonged illness and greater risk of death. Many of the medical advances in recent years, such as organ transplantation and cancer chemotherapy, depend on the availability of antibiotics to prevent and treat associated bacterial infections. Inappropriate use and overuse of antimicrobials such as antibiotics is a major driver of antimicrobial resistance. Public Health England’s actions include:

- Developing a new national strategy for infection prevention and control across the health and care system;
- Improving surveillance and feedback systems for antibiotic prescribing and resistance to drive down inappropriate prescribing in primary and secondary care;
- Developing a data capture system for reporting healthcare-associated infections.

Nurses have roles at all levels, including:
- Improving patient/public education; infection prevention and control;
- Prescribing effectively;
- Advising and, where necessary, supporting and supervising patient adherence to antimicrobial treatment.

References

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