The NHS Confederation represents over 500 organisations and 85 per cent of NHS providers and commissioners. We are the only membership body to bring together and speak on behalf of the whole NHS. We welcome the Committee's focus on public health during a vital period for health and care in this country. We would very much like to submit evidence to the inquiry. This letter focuses particularly on the impact of recent changes in public health to the NHS and an offer to present oral evidence.

The NHS Five Year Forward View (5YFV) was definitive on the need for a “radical upgrade in prevention and public health”\(^1\). It was accompanied by a set of Public Health Priorities published on the same day – which are not as widely known or referenced but are equally important.

The importance of the public's health in social and economic policy is well known – as are the wider determinants of health on population health and subsequent NHS care\(^2\). We welcome the 5YFV and public health priorities and a focus on the public’s health. Alongside the value of this approach to people, the approach will play a vital role in managing the rapidly rising demand for NHS services. In the lead up to the Spending Review, we called for assurances on public health spending in this Parliament through our formal representation to HM Treasury\(^3\), and a subsequent joint letter with the Academy of Medical Royal Colleges to the Chancellor of the Exchequer on 22\(^{nd}\) October 2015\(^4\).

However, HM Treasury took the decision earlier this year to cut the grant in-year by around £200 million, representing a cut of 6.2 per cent. A further 3.9 per cent real terms cut over the next five years was announced in the Spending Review on 25\(^{th}\) November 2015. It is counter-intuitive to reduce public health funding in this parliament and our members are seriously concerned about the impact this will have on the NHS and its ability to deliver the 5YFV. The Government must recognise the NHS’ own argument for investing in public health now to transform the nature of demand in the NHS later by reversing these planned cuts.

Our members have told us about the direct impact that this year's cuts to the ring-fenced public health budget will have on front-line services. The grant covers not only public health campaigns, but also health care interventions from substance misuse and child health, to smoking cessation and sexual health. We are already aware of instances of local cuts to health visiting and school nursing services, which could potentially have significant impacts on child health. Budget constraints are also leaving vital sexual health services vulnerable to cuts.

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\(^1\) **Five Year Forward View**, Chapter 2, p.9, Oct 2014
\(^2\) **Fair Society, Healthy Lives: The Marmot Review**, Feb 2010
\(^3\) **NHS Confederation representation to HM Treasury**, Sep 2015
\(^4\) In October, we helped form a coalition of health, care and public service organisations, including the Academy of Medical Royal Colleges, Local Government Association and the Association of Directors of Public Health. This group sent a joint letter to the Chancellor urging him to reverse the proposed cuts to the public health grant, warning that it will have a direct impact on those who rely on the funding, and on the NHS which will have to pick up the pieces. The letter is available [here](#).
At a local level, the full potential impact of proposed cuts to Local Government on the health of local populations is not yet clear. We believe an argument that suggests the reductions in budgets can be managed by local councils through work on wider determinants is questionable, when Local Government Budgets are reducing significantly. We hope this inquiry can shed some light on this, given the multiple ways that the wider determinants of health are likely to be impacted.

Action on prevention and reducing health inequalities needs to be a cross-government priority, given that so many of the wider determinants of health are not within the NHS’ control, as we emphasised in our recent response to the Government’s Mandate to NHS England to 2020. Health and Wellbeing Boards have a crucial role to play in ensuring all relevant local services play their role in preventing ill health and reducing health inequalities, in ways which reflect the needs and capabilities of their local populations. Some assessment of their progress in improving the health of their local populations may need to be considered as part of the overall accountability arrangements for the whole, wider health and care system.

At the national level, we also need the Department of Health to move beyond its incremental approach to aligning the outcomes frameworks, and develop a single outcomes framework covering the NHS, public health and social care as soon as possible. This is something we and leading health and care organisations advocated in the 2015 Challenge Manifesto and is an important enabler for local leaders to take a place-based approach to health and wellbeing.

14 December 2015

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5 [NHS Confederation response to the consultation on the Government’s mandate to NHS England to 2020](https://www.confederation.org.uk), Nov 2015
6 [The 2015 Challenge Manifesto: a time for action](https://www.confederation.org.uk), Sept 2014