

Quality in Public Health: *A Shared Responsibility*

Produced by the Public Health System Group for England

March 2019



The Quality Framework for the public health system has been developed by the Public Health System Group in association with:



With thanks to Public Health England for coordinating the development of the Framework on behalf of the Public Health System Group.

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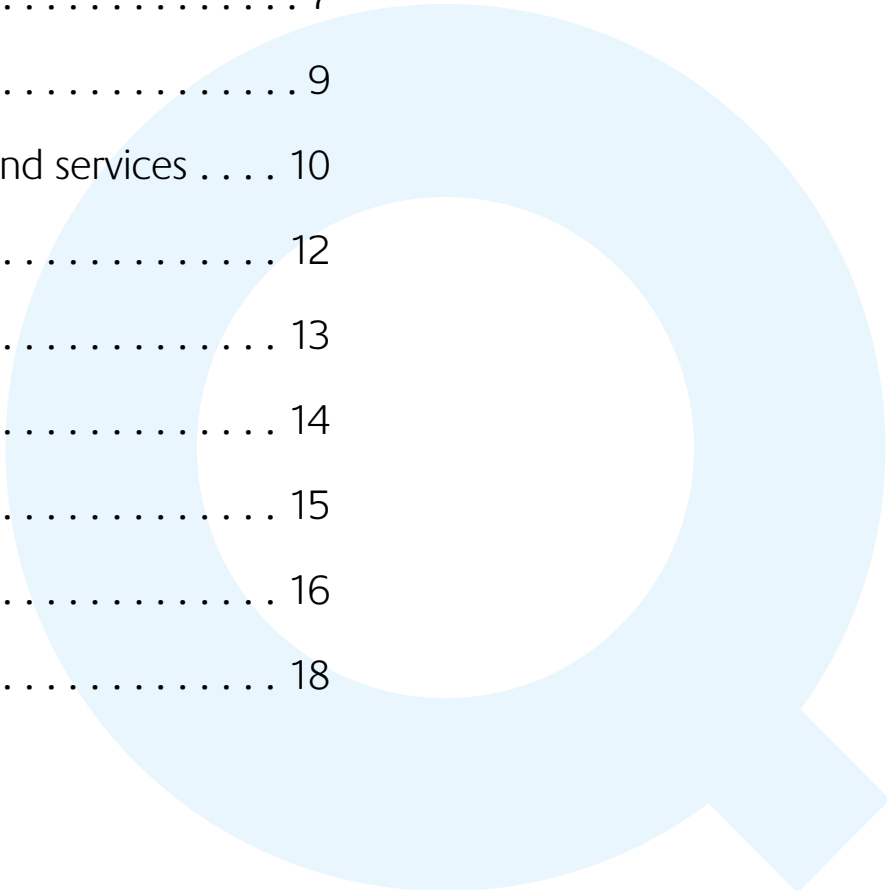
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Ministerial foreword



Steve Brine MP

Parliamentary Under
Secretary of State
for Public Health and
Primary Care

I am delighted to endorse ‘Quality in Public Health: A Shared Responsibility’, a system-wide commitment to improve quality in all areas of public health. As the title of this document suggests, the health and care system cannot deliver an improvement in health outcomes on its own, it must be done in partnership with others, whilst also recognising the role of individuals and families in keeping themselves well. This framework is aimed at everyone who has a role to play in shaping and delivering policies and interventions that protect and improve health outcomes and reduce health inequalities, from national and local government, the NHS, the voluntary and community sector, industry and the wider public sector. This framework makes clear our expectation of high quality public health services and functions and the steps we can all take to maximise the impact of what we do.

It is clear that quality improvement initiatives can lead to significant benefits for the population while also delivering better value. As the Rt Hon Matt Hancock MP, Secretary of State for Health and Social Care set out in ‘Prevention is Better than Cure’, we need to re-balance our efforts towards a greater focus on prevention and keeping people healthier for longer. This means working across the health and care system and beyond, bringing our collective efforts to bear and continually reviewing and improving what we do to ensure it is having the greatest impact. I see a common objective between the NHS long term plan and this framework with both focussing on an integrated, place based model of prevention.

It is my hope that by acting on this shared system-wide commitment to quality and adopting the steps set out in this framework, we can all take another step towards achieving our goal of increasing healthy life expectancy by at least five extra years, by 2035, and closing the gap between richest and poorest.

Support from Key System Leaders

Duncan Selbie, Chief Executive, Public Health England:

“The new Quality Framework for Public Health signals a shared commitment from everyone across the public health family that we will place a high premium on continuous learning, and improvement at the heart of what we do.”

Councillor Ian Hudspeth, Chair of the LGA Community Wellbeing Board:

“Learning and improvement in public health is a priority for local government, and the new Quality Framework will enable local places to embed this approach as an integral part of Sector Led Improvement, ensuring services are continually improving and respond to the needs of local people.”

Professor Gillian Leng, Deputy Chief Executive, NICE:

“Using NICE guidance and standards as part of this new system-wide approach to quality improvement in public health will help drive evidence-based improvements in population health and well-being.”

Professor Stephen Powis, National Medical Director for NHS England and NHS Improvement

“The NHS Long Term Plan focuses on delivering more joined-up care with an increased emphasis on prevention to help people stay healthy and reduce the demand on the NHS. This new quality framework for the public health system complements existing frameworks for the NHS and adult social care. It will help the NHS, local authorities and other partners to work together in an integrated way to improve the health and wellbeing of their local populations.”

Chief Medical Officer, Professor Dame Sally Davies:

“We must be united in our approach and keep up our efforts to prevent ill health, reduce inequalities and maintain good health outcomes. The new Quality Framework for public health can play an important part in supporting the delivering of this, by ensuring evidence, learning and quality improvement underpin this work.”

Dr Jeanelle de Gruchy, President, Association of Directors of Public Health:

“We welcome the Quality Framework, an important addition to enabling our sector to improve practice. The Framework provides Directors of Public Health DsPH with a means of working with partners to assess their local systems and increase their collaborative efforts to improve the public’s health.”

Preface

Improving quality across the public health system is **a shared responsibility**. It requires the collective efforts of everyone who delivers the range of functions and services that **protect, promote** and **improve** the public's health. With a growing number of challenges facing the health and care system, maintaining a focus on high quality in public health is more important than ever in order to improve health outcomes and reduce health inequalities.

This document sets out a high-level, shared, system-wide commitment to high-quality public health functions and services. It:

- Provides a framework for improving quality in the delivery of public health functions and services that can support sector led improvement
- Describes what we mean by quality in public health systems, functions and services
- Sets out the roles and responsibilities of key players in the public health system to deliver high-quality functions and services
- Describes the process for improving quality
- Identifies areas for priority focus and action.

This framework is designed to align with the existing quality frameworks for adult social care (*Quality Matters*) and the NHS (*Shared commitment to quality*). It does not change the statutory responsibilities of individual organisations nor does it undermine their independence but highlights the strategic importance and impact of quality in a public health system.

The framework has been developed so that:

- People working in public health and related areas
- Providers of public health functions and services
- Commissioners and funders of public health functions and services
- Local authority councillors and directly elected Mayors
- National government, organisations and policy makers

are clear about what quality in public health means; the roles and responsibilities of key players in a public health system; and what steps can be taken to improve quality.

It is intended that this framework will be used by local public health systems to assess the quality of their own services and functions and to take steps to improve quality, where necessary as part of their commitment to sector led improvement and local governance and assurance processes.

The Public Health System Group:

The Public Health System Group has produced this framework in conjunction with other key national partners. The Public Health System Group provides a single national forum for public health system leaders and partners to discuss and act on priority strategic questions and issues in protecting and improving the public's health. For more information about the Public Health System Group, please see page 16.

Introduction

High-quality public health functions and services play an integral role in helping people live healthier for longer, prevent the spread of disease, and reduce health inequalities.

Background

Public health is about creating the conditions in which people can live healthy lives for as long as possible. Good health and well-being are about more than just health and care services. Economic prosperity, a good start in life, education, good work, housing and strong, supportive relationships all play their part.

In return, a healthier society is a wealthier society. For example, alcohol misuse costs the English economy £21bn annually, including the resulting NHS costs, the cost of crime and reduced productivity.¹ Additionally, the cost of treating obesity related ill health for the NHS in England is £5.1 billion.² The evidence suggests that every £1 spent on public health delivers a median saving of £14.3.³ This includes both financial savings as well as monetised health gains. While some interventions lead to short-term savings, most analysis into the return on investment of public health looks at overall social costs and benefits.

The reforms to the public health system in 2013 transferred responsibility for public health to local councils who are best placed to address the wider determinants of health. Public Health England was also established to protect and improve the nation's health and wellbeing and reduce health inequalities. Commissioning responsibilities for a number of specific public health services were transferred to NHS England.

The new system continues to evolve with an increasing focus on linking people's health to the place where they live. With a common ambition for an integrated and place based model of prevention articulated in both the NHS Long Term Plan and the Prevention Vision from the Secretary of State for Health and Social Care, there is now greater potential and opportunity for partners to work in an integrated way to maximise efforts to provide high-quality public health functions and services.

Successes & Challenges

Over the past decade there have been numerous success stories in public health, such as:

- Smoking prevalence at an all-time low of 14.9% down from 19.3% over five years⁴
- Reduction of 55% in teenage conception rates since 2007⁴
- 31% reduction in new HIV infections since 2015⁵
- Improvement in health behaviours among younger people.

However, the system continues to face significant long term challenges:

- An ageing population with an increase in complex long term conditions, requiring more interventions from health and care services
- The increase in poor health due to behavioural factors, with two thirds of adults in the UK classified as overweight or obese⁶
- The challenges of increasing health inequalities with people living in poorer areas living up to 19 years longer in ill health and disability and dying up to 9 years earlier than those who live in more affluent areas⁷
- Financial constraint in the health and care system, resulting in difficult decisions about the prioritisation of public health and preventative interventions
- Workforce challenges, faced by the health and care system as a whole impacting on key public health functions.

Building on Strong Foundations

Although there are significant challenges facing public health, there are also significant strengths to build on. This framework builds on existing quality documents, including professional standards and frameworks for public health which are important in supporting quality improvement.

- [ADPH Public Health Sector led Improvement \(SLI\) Framework](#)
- [NICE Quality Standards for public health](#)
- [NHS - Shared Commitment to Quality](#)
- [Adult Social Care - Quality Matters](#)
- [Standards for employers of public health staff](#)
- [Health Education England Quality standards for education and training](#)
- [Public Health Skills & Knowledge Framework](#)
- [UK Public Health Register](#)
- [General Medical Council](#)
- [Nursing & Midwifery Council](#)
- [Public Health outcomes framework](#)
- [NHS outcomes framework](#)

Looking Ahead

Partners across the public health system have come together nationally to develop a shared commitment to quality in the delivery of public health functions and services. This framework establishes a vision of high performing public health systems and the characteristics and enablers of high quality public health functions and services.

This framework recognises the wide ranging scope of public health endeavours and activities with recognition of the wider public health functions, role of place and locally led nature of public health systems.

The framework has been developed by national partners on the Public Health System Group in collaboration with those who use, work in and promote public health. The Group has identified 'key areas for action' and agreed commitments to support the wider system to deliver high quality public health services and functions. Local systems will have their own priorities for improving quality and are encouraged to adopt the principles and commitments in this document, monitor the quality of their public health interventions and take action, where necessary, to improve quality.

By doing this, we, the Public Health System Group, collectively want to achieve:

- **A shared understanding of what high quality in public health means** and how the public health workforce, providers, commissioners, locally elected politicians and national bodies can achieve this
- **More effective and aligned support for quality in public health**, by building stronger partnerships, building on existing relationships and commitments, and taking joined up action to encourage improvement and champion high quality in public health
- **Improved quality in public health**, which we can measure and celebrate to drive improvement in individual and population level health outcomes.

Public health systems

The wide-ranging and locally led nature of public health activities means that there is no one public health system. Each local place has its own public health system, with multiple partners, reflecting local needs and priorities. However, all public health systems are responsible for delivering the following key public health functions:

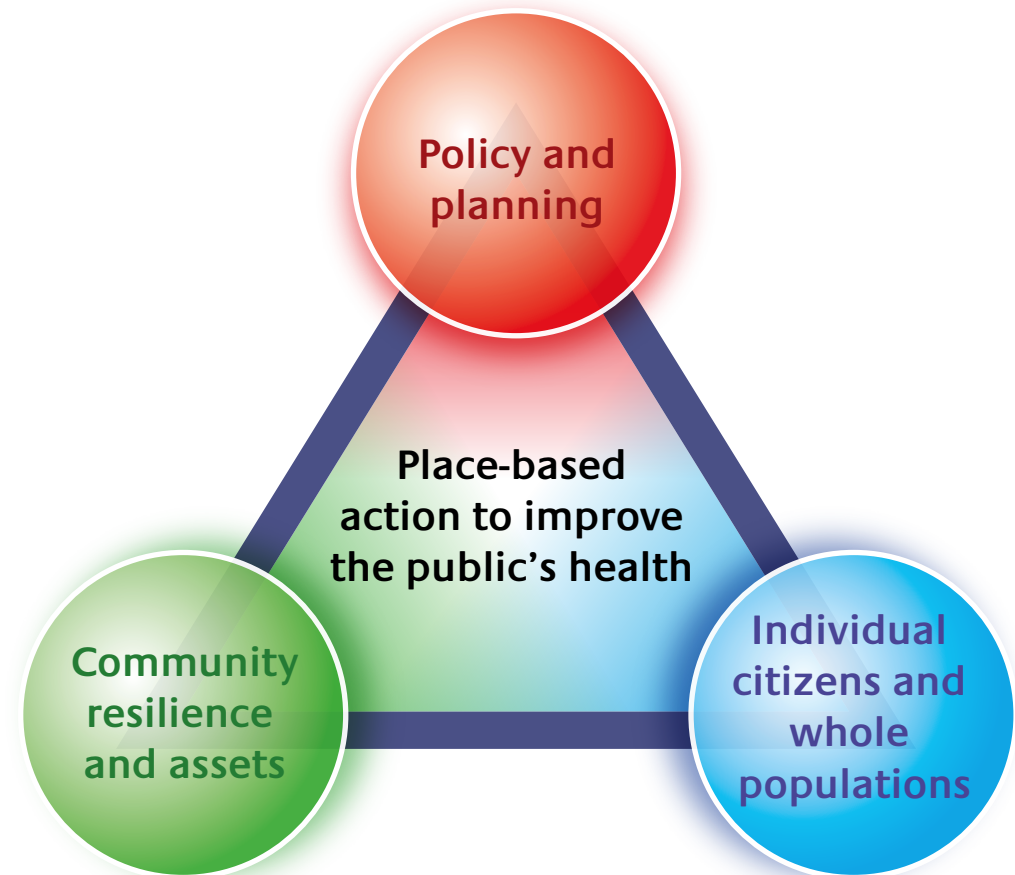
- Protecting and safeguarding health
- Improving health and reducing health inequalities
- Supporting the NHS and care system in their focus on individual and population health.

Public health is defined as

“the art and science of preventing disease, prolonging life and promoting health through the organized efforts of society”

(Acheson, 1988 adapted from Winslow 1920)

National and local public health systems have important roles in improving quality locally. They have key roles in improving outcomes and reducing unwarranted variation in local places where people live, grow and work. This requires consideration of community resilience and assets, along with policies and services as represented in the graphic. Place based public health systems should take these factors into account when designing and delivering population health interventions. Action relating to each component individually can have impact, but is likely to be more effective in combination.



Credit: Adapted from PHE Public Health Data Science based on the original concept created by Chris Bentley. Reducing health inequalities: system, scale and sustainability

Characteristics of high quality public health systems, functions and services

High-performing public health systems demonstrate the following characteristics:

Strategic Characteristics

- A shared goal of improving public health outcomes and reducing health inequalities with a strong ethos of accountability and collaboration among partners and communities
- An assets-based approach, co-producing interventions with local communities and citizens.
- An approach that puts health outcomes at the heart of policy decisions to address the wider determinants of health
- A proactive approach to enhancing and safeguarding health, keeping individuals and populations as healthy as possible and reducing threats to health.
- Early intervention, adopting a life course approach across primary, secondary and tertiary care settings and integrated services.
- A strong advocacy and influencing role for public mental health as well as physical health.
- An awareness and responsibility to future generations.

Enabling Characteristics

- Strong leadership (political and professional) which mobilises and leverages action by multiple actors at all levels to achieve a common vision
- Investment in the public health workforce, and their continuous development
- Continuous learning, improvement and evidence generation
- Measurement and evaluation with transparency about quality measures and outcomes
- Decisions informed by evidence, needs, and insight, and translated into deliverable commitments
- Use of innovative technology to stay ahead of the game.

A high performing public health system delivers its functions that are:

Co-produced
with
communities

Focussed
on equity

Evidence
informed and
standards
driven

Delivered by
qualified and well
trained staff

Timely and
responsive to the
needs of the
population

Prioritised in a
planned way
within available
resources

Characteristics of high-quality public health services

Public health services are a coherent set of actions carried out for the direct benefit of members of the public or other stakeholders within the public health system.



Characteristics of high-quality public health services for people who use them would be:

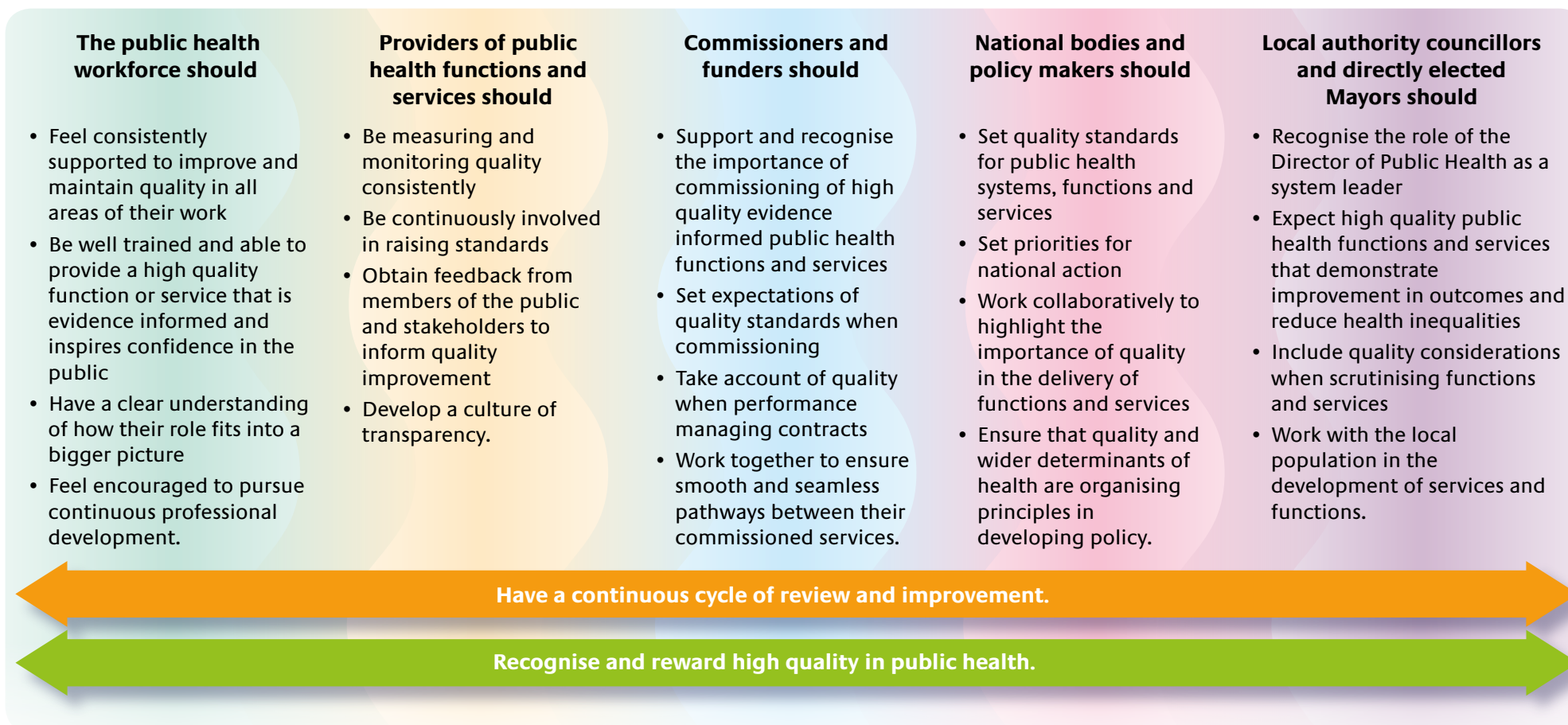
- **Safe:**
People are protected from avoidable harm, neglect and abuse. When mistakes occur lessons are learned.
- **Effective:**
People's care and treatment achieves good outcomes, promotes a good quality of life and is based on best evidence, as part of a seamless service.
- **Positive experience:**
Caring - the public health workforce involves the user and treats them with compassion, dignity and respect.
Responsive Services respond to diverse needs, meeting those needs in ways that people have chosen, with support from professionals.

Characteristics of high-quality public health services for those providing and commissioning services:

- **Equity of access and usage:**
Providers and commissioners ensure equity of access and usage regardless of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.
- **Well-led:**
Promoting a culture that is open, transparent and committed to learning and improvement.
- **Resourced sustainably:**
Resources are used responsibly, providing fair access.

Working together

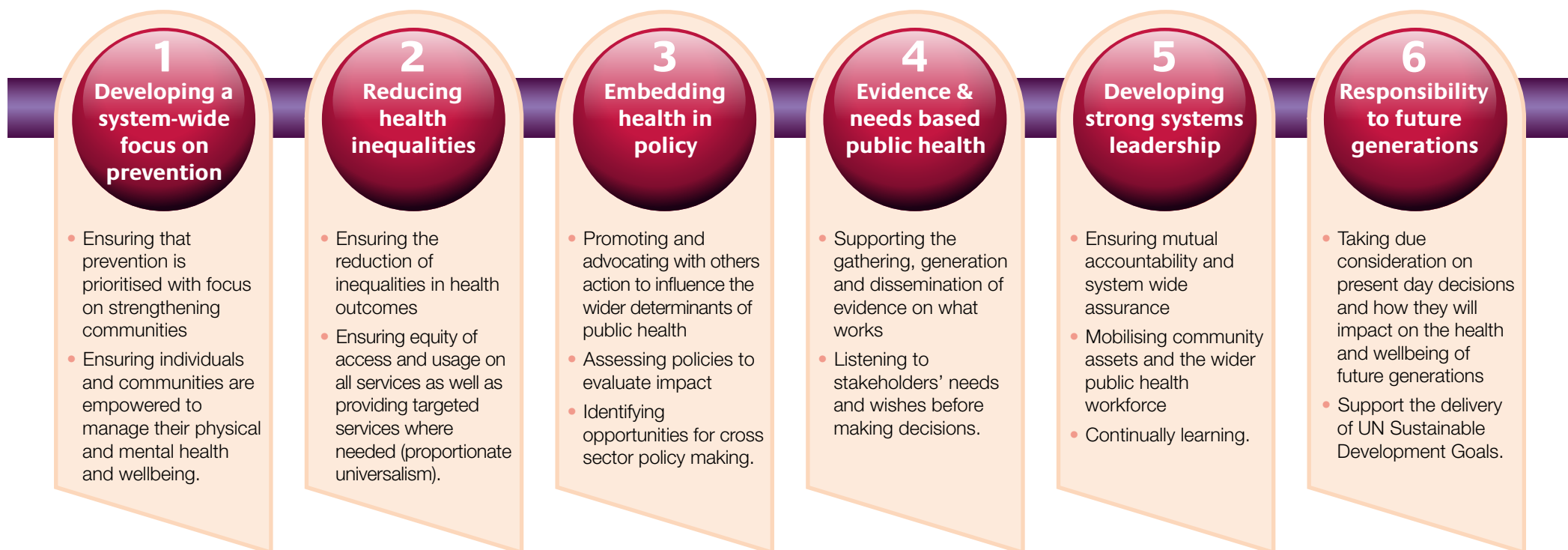
A high-quality public health system is collaborative; maximises investment in the public health system; ensures an assets based approach, co-producing interventions with local communities; and has citizens at the heart of high-quality functions and services. What our shared view of quality means:



Investing in the Public health system: An assets based approach, co-producing interventions with local communities and citizens.

Key principles and actions

Quality should permeate everything we do; no single organisation can improve quality on their own. All public health systems are responsible for delivering the key public health functions of protecting and safeguarding health, improving health and reducing health inequalities and supporting the NHS and care system in their focus on individual and population health. The Public Health System Group has accepted a shared responsibility to support local public health systems to take steps to improve quality in the following priority areas.



Implementing Priorities

These priorities will be facilitated by the Public Health System Group and supporting partners through the development of a mutually owned action plan. All partners will hold each other to account and utilise technology to deliver on the key areas for action identified.

Local Implementation

Every local system can take action to improve quality, by identifying the key areas where they would like to prioritise action.

Seven steps to improve quality

The seven step model, common to the NHS and Adult Social Care quality frameworks, is useful in helping to set out how we can improve quality in public health in our key areas and commitments described on page 14.

Local Implementation:

Once local priorities for raising quality are identified, local public health systems can adopt this methodology to raise quality and facilitate the development of their own commitments.



Note: Health Foundation A Clear Road Ahead (2016) developed this modified version of the NHS Quality Framework (Next Stage Review).
NHS - Shared Commitment to Quality & Adult Social Care – Quality Matters

Summary of our commitments

As members of the Public Health System Group and supporting partners we commit to promoting the principles in our work to help improve the quality of functions and services within the public health system. We commit to using the principles stated and applying them to the following priority areas:



1
Developing a
system-wide
focus on
prevention



2
Reducing
health
inequalities



3
Embedding
health in
policy



4
Evidence &
needs based
public health



5
Developing
strong systems
leadership



6
Responsibility
to future
generations

A detailed action plan will be developed with specific actions at the national level.

The principles we commit to:

Set direction and priorities

- Work effectively as a system to establish and communicate clear, collective and consistent priorities for quality
- Identify any quality gap and base future priorities on the evidence.

Bringing clarity to quality

- Provide support to the development of quality standards and align efforts to support their implementation.

Measuring & publishing quality

- Be transparent in driving improvement in quality, including achievement of quality standards
- Identify ways to measure and publish quality, and support continuous learning.

Recognising & Rewarding quality

- Evaluate and encourage sector-led and peer-led improvement
- Publish and disseminate examples of good practice
- Develop reward mechanisms for high quality.

Maintaining and safeguarding quality

- Support community level capacity building
- Continually strive to gain the views of the public, service users and stakeholders as we believe this is essential to safeguard quality
- Use evidence to set aims and measures for quality improvement.

Building Capability

- Advocate the importance of education, training and CPD for the workforce
- Support the leadership development for improving quality in public health
- Create a learning public health system.

Staying Ahead

- Monitor developments in innovation and promote public health technologies
- Build a culture of continuous improvement which can accept change and innovation and shares knowledge of what works.

Making it happen

Our goal

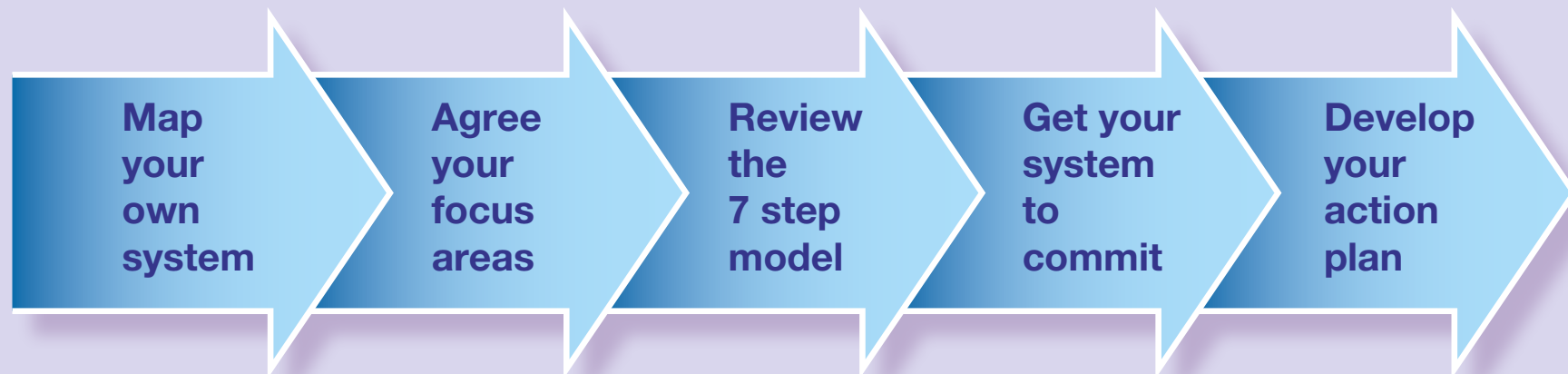
The Public Health System Group sees quality as a shared responsibility. The system has united to address the quality challenges and has looked at how quality can be raised in the delivery of public health services and functions. In order to achieve this, it is imperative to comprehend the notion of quality and for the system to work to an agreed definition. The framework has looked at the key characteristics of quality in relation to the system, functions and services. It has aligned the safe, effective, positive experience model and introduced the notion of equity. The document has set out its expectations from the system.

Our commitment

We have set out our commitment and identified six areas of focus to raise quality on page 12. We will be developing an action plan to ensure tangible deliverables are assigned and owned by the national public health system partners. We will monitor and support improvement activities as a national system.

Local implementation

Having developed your own commitments (or using the principles that the national system has commitment to), local systems can develop a detailed action plan based on the six focus areas and use the seven step methodology to raise quality in your local public health system.



This framework has been developed by the national Public Health System Group partners listed below:

- Association of Directors of Public Health
- Department for Health & Social Care
- Faculty of Public Health
- Local Government Association
- National Pharmacy Association
- NHS Clinical Commissioners
- NHS England
- The National Institute for Health and Care Excellence
- Public Health England
- Royal Society of Public Health
- Solace
- UK Health Forum

In association with:

- Care Quality Commission
- The Health Foundation
- NHS Improvement

References in this Document

- 1 The public health burden of alcohol: evidence review
<https://www.gov.uk/government/publications/the-public-health-burden-of-alcohol-evidence-review>
- 2 Public Health England: Economics of Obesity
https://webarchive.nationalarchives.gov.uk/20170110170220/http://www.noo.org.uk/NOO_about_obesity/economics
- 3 Return on investment of public health interventions: a systematic review
<https://jech.bmj.com/content/71/8/827>
- 4 Public Health Outcomes Framework
<https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/>
- 5 Public Health England, HIV: Annual Data Tables
<https://www.gov.uk/government/statistics/hiv-annual-data-tables>
- 6 Public Health England, Health Matters: Obesity and the food Environment
<https://www.gov.uk/government/publications/health-matters-obesity-and-the-food-environment/health-matters-obesity-and-the-food-environment--2>
- 7 Health Profile For England: 2018
<https://www.gov.uk/government/publications/health-profile-for-england-2018>

Useful resources:

[Prevention is better than cure](#)

[NHS Long Term Plan](#)

[Adult Social Care – Quality Matters](#)

[NHS Shared Commitment to Quality](#)

[NICE Quality Standards for public health](#)

[Public Health Outcomes Framework](#)

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qualityframework@phe.gov.uk

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