

Levelling Up White Paper

Purpose of report

For information.

Summary

The report summarises the sections of the Levelling Up White Paper of relevance to the Board and the LGA's response to the White Paper's publication.

Recommendations

Members are asked to:

- (a) Note the publication of the Levelling Up White Paper and the missions in it related to public health.
- (b) Note the LGA's initial response to the White Paper.
- (c) Comment on the policy programmes in the White Paper of relevance to the Board.

Actions

Officers to use members' comments to inform the LGA's work on the White Paper going forward.

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Levelling Up White Paper

Background

1. The Department of Levelling Up, Housing and Communities (DLUHC) published the Levelling Up White Paper on 2 February 2022. It sets out the government's ambition to ensure that all communities share equally in the UK's success, and outlines the 'system change' in government needed to achieve that.
2. At the core of the White Paper are 12 national missions, grouped into four themes, which are to be achieved by 2030. The White Paper acknowledges that government cannot achieve these missions on their own, and that they will have to work with devolved governments to achieve them. In England a devolution revolution is proposed to aid the delivery of the 12 missions.

The 12 missions

3. A number of the 12 missions relate directly to the work of the Board. The most prominent one is Mission 7 which states that the gap in healthy life expectancy (HLE) between the highest and lowest areas will have narrowed by 2030, and by 2035 healthy life expectancy will have risen by 5 years. There are also commitments to improve wellbeing, increasing pay, employment and productivity, reducing the number of non-decent homes by 50 per cent and reducing crime which will also have an impact on the health and wellbeing of communities.

Healthy Life Expectancy

4. HLE is defined as the number of years in self-assessed good health and has become a preferred measure over life expectancy. This reflects a rise in the incidence of chronic conditions, with long periods of moderate and severe ill health often preceding death.
5. As the White Paper points out currently on average people living in the most deprived communities in England have over 18 years less of their lives in general good health than those living in the least deprived areas, driven by a range of factors including smoking and drinking rates, the quality of housing and access to healthier food. The White Paper also acknowledges that the pandemic has made these differences more stark.
6. The 2035 target was first conceived of as part of the Grand Challenge on Healthy Ageing devised by the Theresa May administration in 2018. The goal is an ambitious one in the context of the pandemic and the government is currently off course to deliver it by 2035, in part as a result of the pandemic. The challenge is that the interventions required to extend healthy life by five years exist far beyond the remit of the NHS and public health. Tackling these wider determinants will be critical in determining success or failure.

White Paper Policy Programme

7. The White Paper sets out the policy programme to deliver the target in Mission 7, and it has three strands: improving public health; supporting people to change their food and diet; and tackling diagnostic backlogs.

Improving Public Health

8. In terms of improving public health the White Paper notes the investment in the NHS through the Long Term Plan as well as in social prescribing, increased funding for mental health services, the work of the Office of Health Improvement and Disparities to tackle preventable risk factors like smoking and obesity, and the Core20PLUS5 initiative, which seeks to improve outcomes in cardiovascular disease, cancer, respiratory, maternity, and mental health amongst the poorest 20 per cent of the population, along with ethnic minorities and other underserved groups. Additionally it reiterates the commitments made in the Social Care White Paper.
9. The White Paper also provides a reminder of the commitments made in the 10-year Drugs Strategy published in December 2021, which includes an additional £533m in funding for locally commissioned drug and alcohol treatment services. The intention is to reverse in the increase in the number of drug related deaths in the UK, which are now at their highest level since records began, with 4,561 recorded in England and Wales in 2020 alone.
10. The White Paper goes on to outline future initiatives to address health inequalities including publication of the White Paper on Health Disparities to reduce health inequalities. This White Paper will look in particular at prevention and disparities by ethnicity, socio-economic background and geography. The Department of Health and Social Care will work with other government departments to address health disparities by looking at the wider determinants of health as well as behavioural factors. The Health Disparities White Paper will also look to learn from the response to the pandemic to address health challenges.
11. In terms of preventing ill health the White Paper highlights the forthcoming the new Tobacco Control Plan to reduce smoking rates, and the investment in weight management services this year. There will also be the Better Health: Rewards in Wolverhampton this year, which will incentivise participants for improving their physical activity and diet. Finally the White Paper highlights sets out how the government will improve participation in screening activities through the NHS Health Check Programme.

Food and diet

12. In this strand the government sets out how it will look to implement Henry Dimbleby's review which aimed to move towards a National Food Strategy through the Food

Strategy White Paper, due to be published later this year. This will set out how everyone can access, understand and enjoy a healthy diet. In line with one of the recommendations from Henry Dimbleby's review a joint project will be launched between the Department for Education and the Food Standards Agency to design and test a new approach for councils in assuring the school food standards. This will be piloted in four councils (Blackpool, Lincolnshire, Nottingham and Plymouth) from September, and in the longer term the government is looking for schools to publish statements on their website on their whole school approach to food.

13. There will also be investment in starting a school cooking revolution so young people leave school with the skills to cook and live healthily. The funding will be used to develop new curriculum content and providing bursaries for teacher training and development. The intention is for every child leaving secondary education to have six basic recipes that will support health living into adulthood.
14. In order to prevent obesity the White Paper sets out the government's plans to trial a Community Eatwell programme by running a three year pilot, building on experience from abroad. Under the scheme GPs will be able prescribe fruit and vegetables, as well as food-related education and social support to those at risk, or suffering from, diet related illness or food insecurity.

Health devolution

15. The focus within the improving public health and food and diet strands is very much on levelling up outcomes, with no references to greater devolution of public health responsibilities or funding. The new devolution framework within the White Paper makes only one reference related to public health related powers in a devolved context and that is setting out the ability of mayoral combined authorities to share the duty to improve public health with councils. However the White Paper makes it clear that the devolution framework is a starting point and that there is scope to argue for the devolution of further powers. Members may wish to consider whether they would wish to see the ability for areas to take on further public health related functions.
16. The White Paper is also silent on wider health devolution of NHS functions and resources as exemplified by the 2016 Greater Manchester health devolution deal. It does however state that the forthcoming Integration White Paper will set out plans for health and social care integration in early 2022, ensuring responsibility for this is devolved to the right level.

LGA response

17. The LGA has produced a [briefing](#) on the White Paper. In this we welcomed the extension of devolution in England.

18. In relation to mission 7 the LGA highlighted that if we are to truly level up, the government must focus on reducing poor mental and physical health outcomes as well as economic imbalances between regions. Health inequalities exist both between and within local authority areas, with almost 20 extra years of healthy life enjoyed by those in the most affluent areas compared with those in the most deprived areas.
19. We also noted that the important interconnected determinants of mental and physical health that could affect the change necessary for a substantial improvement in healthy life expectancy all lie outside the health sector. Improvements in housing, education and employment as well as ensuring a health promoting environment give an overall improvement in the health and wellbeing of communities.
20. The LGA stated councils are encouraged by the mission to address narrowing the gap in healthy life expectancy and reducing obesity. However, the failure to increase public health funding threatens to undermine the levelling up agenda and runs contrary to addressing the stark health inequalities exposed by the pandemic. We went on to note that we awaited the government's strategy to tackle the core drivers of health inequalities through a new White Paper on Health Disparities.
21. In relation to the wider health devolution agenda we noted that whatever the proposals in the Integration White Paper, it will be important for all levels of local government and the NHS to work together to ensure that strategies for joining up health, care and public health are aligned to the wider objectives of improving health and wellbeing outcomes and addressing health inequalities.

Implications for Wales

22. Although the White Paper sets out the government's intentions for delivering the levelling up programme across the UK it acknowledges in many areas the objectives set out in the missions are devolved matters. The areas within the White Paper specifically in the Board's remit are devolved matters, and any implementation in Wales will be a matter for the Welsh government.

Financial Implications

23. There are no direct financial implications for the Board's work arising from the White Paper.

Next steps

24. The LGA will be developing its response to the White Paper over the coming months, and as it seeks more detail and answers from the government on how the proposals will work.
25. The Board itself has well established lines on health devolution, and will look to review these once the Health Integration White Paper is published.