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Measuring the Nation's Health

Summary: A new health index proposed by the UK Government may be an effective way of collecting and acting upon abundant health data. It could also facilitate funding allocation to the most efficient initiatives, if devised and applied properly.



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health. This could provide a useful focal point to hold the government and the health and care system to account, and to generate debate about trends, improvements and priorities locally and nationally. However, for this to work the index will need to be designed and used carefully to avoid being another redundant measure that is just implemented, but not well understood or acted upon.

COULD BE A WAY OF CAPTURING A WIDER SET OF MEASURES OF HEALTH INEQUALITIES AND THEN DIRECTING FUNDING MORE PRECISELY 99

s a nation, we do not lack health statistics. We collect hundreds of figures, from simple mortality statistics to complex indices of health deprivation. The problem with having so many measures is that the public does not know where to focus and this undermines accountability.

The UK Government's Prevention Green Paper sets out plans to address this through a new health index, which would operate in the same way as the GDP figures do for the economy, and deliver a single indicator of the nation's The challenge of designing an indicator, which is meaningful and captures the complexity of our lives, should not be underestimated. It would need to reflect the impact of the food we eat, the exercise we take, the air we breathe and the conditions we live in. At the same time, it would need to recognise that health is not just about how long we live, but also how healthy we are during our lives, both physically and mentally. To be a useful driver of debate and policy, the new measure will need to capture all these different dynamics, which will

require sophisticated data collection and analysis.

Another challenge will be getting the timescale right. The aim of creating a health measure that receives the same level of attention as GDP is a worthwhile ambition, but it also needs to reflect that the pace of change in the nation's health is much slower than in economic activity. Quarterly GDP figures receive significant attention; two quarters of negative growth are used as the definition of a recession, but half-a-year's figures in a health index are unlikely to provide reliable indications of developments in the state of our health. Thus, while it will be important that the index picks up on any immediate changes, it needs to be constructed in a way that provides information about longer-term trends. The index will therefore need to develop a way of weighting different measures so that there is an appropriate balance between shorter-term data and indicators of slower-moving developments.

Of course, an index is not an end in itself; it needs to be a driver of policy and of funding. This is particularly important in meeting the aims of the Prevention Green Paper. There will need to be some mechanism to use the data revealed by the index to drive money to initiatives that will really make the difference in tackling health problems.

A significant share of more than £70bln NHS commissioning budget is distributed across the country among clinical commissioning groups based on relative mortality rates. However,

this does not provide a full picture of the health challenges commissioners face in particular areas. The new index could be a way of capturing a wider set of measures of health inequalities and then directing funding more precisely to the areas where it can make the biggest difference. Alternatively, a separate fund could be established specifically for preventative activities, with money allocated on the basis of the index. However, it will be important not to undermine the flexibility of health commissioners to deploy funds in response to local needs.

Measuring the nation's health is the right aspiration, particularly given the indications that the growth in life expectancy is slowing down and the gap between the health of the richest and the poorest is widening. Equally, in a system where money will remain tight it will be ever more important that funding is spent effectively. Good data can make this happen, but getting the right measures

and creating a responsive culture will not be straightforward. \blacksquare

KEY POINTS



- Abundance of health measures creates the lack of focus for the public and undermines accountability.
- The government aims to address this issue through its Prevention Green Paper, suggesting a new health index.
- The index should take into consideration various indicators and properly reflect the pace of change in the nation's health.
- The data revealed by the index should drive money to the most efficient initiatives.
- The flexibility of health commissioners to deploy funds locally should not be compromised.

Advancing Our Health: Prevention in the 2020s

The Cabinet Office and Department of Health and Social Care published their Prevention Green Paper, Advancing our health: prevention in the 2020s, on 22 July 2019 (consultations closed on 14 October 2019). It sets out plans to tackle the causes of preventable ill health in England, by:

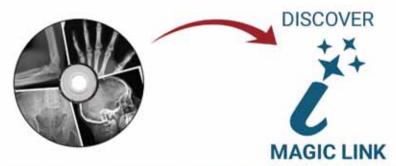
- Embedding genomics in routine healthcare and making the UK the home of the genomic revolution.
- Reviewing the NHS Health Check and setting out a bold future vision for NHS screening; and
- Launching phase 1 of a Predictive Prevention work programme from Public Health England (PHE).

Full text available from gov.uk/government/consultations/advancing-ourhealth-prevention-in-the-2020s.

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