

# L'approche britannique pour accroître l'impact de la première ligne sur la santé de la population

## **Sir Liam Donaldson**

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FMedSci, *Chief Medical Officer, The Department of  
Health, Angleterre*

Journées annuelles de santé publique 2002

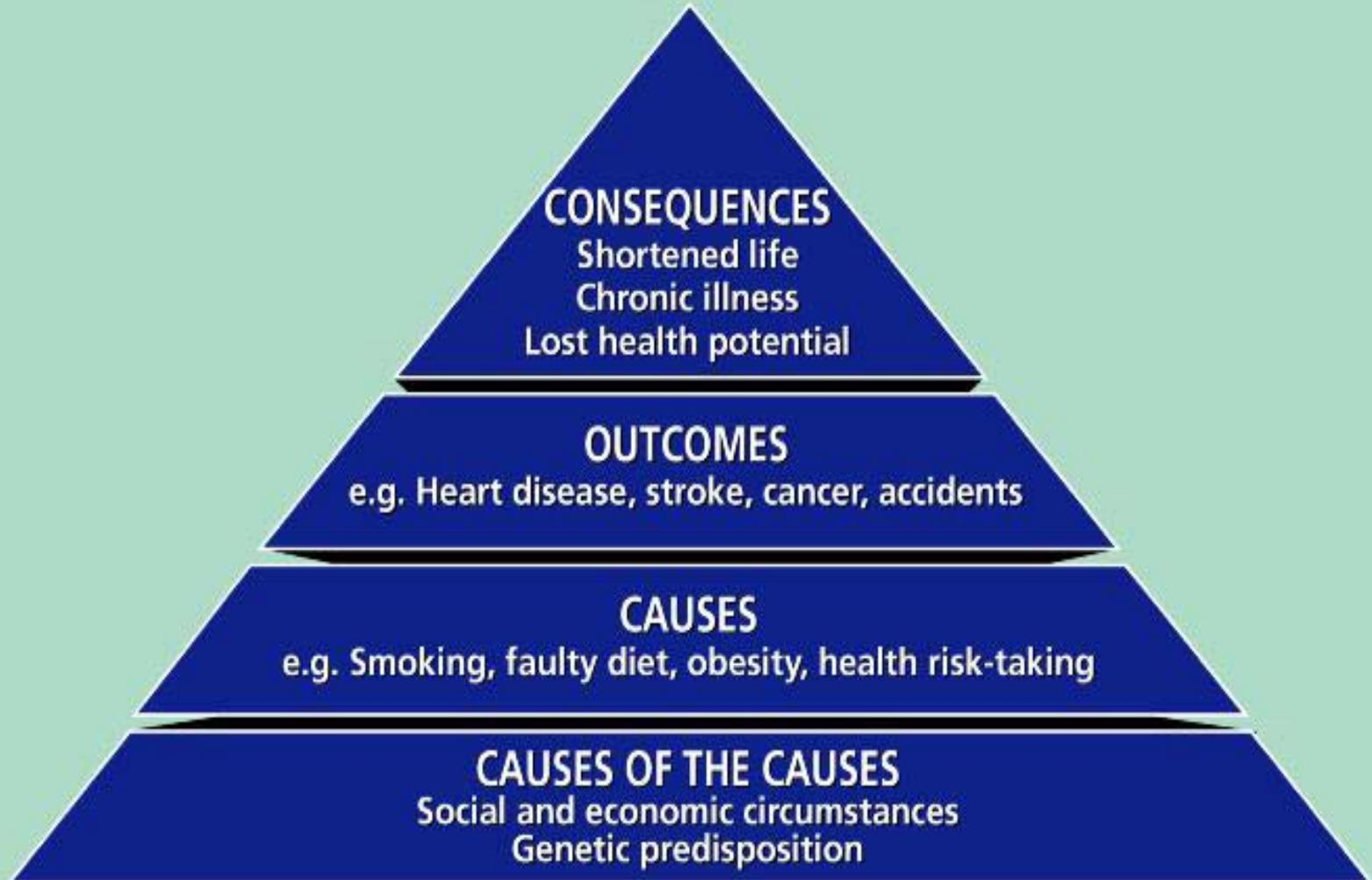
La consolidation des liens entre la santé publique et la première ligne

un agenda à partager  
Québec, 21 novembre 2002  
[www.inspq.qc.ca/jasp](http://www.inspq.qc.ca/jasp)

# PRIMARY CARE IN ENGLAND: KEY FACTS

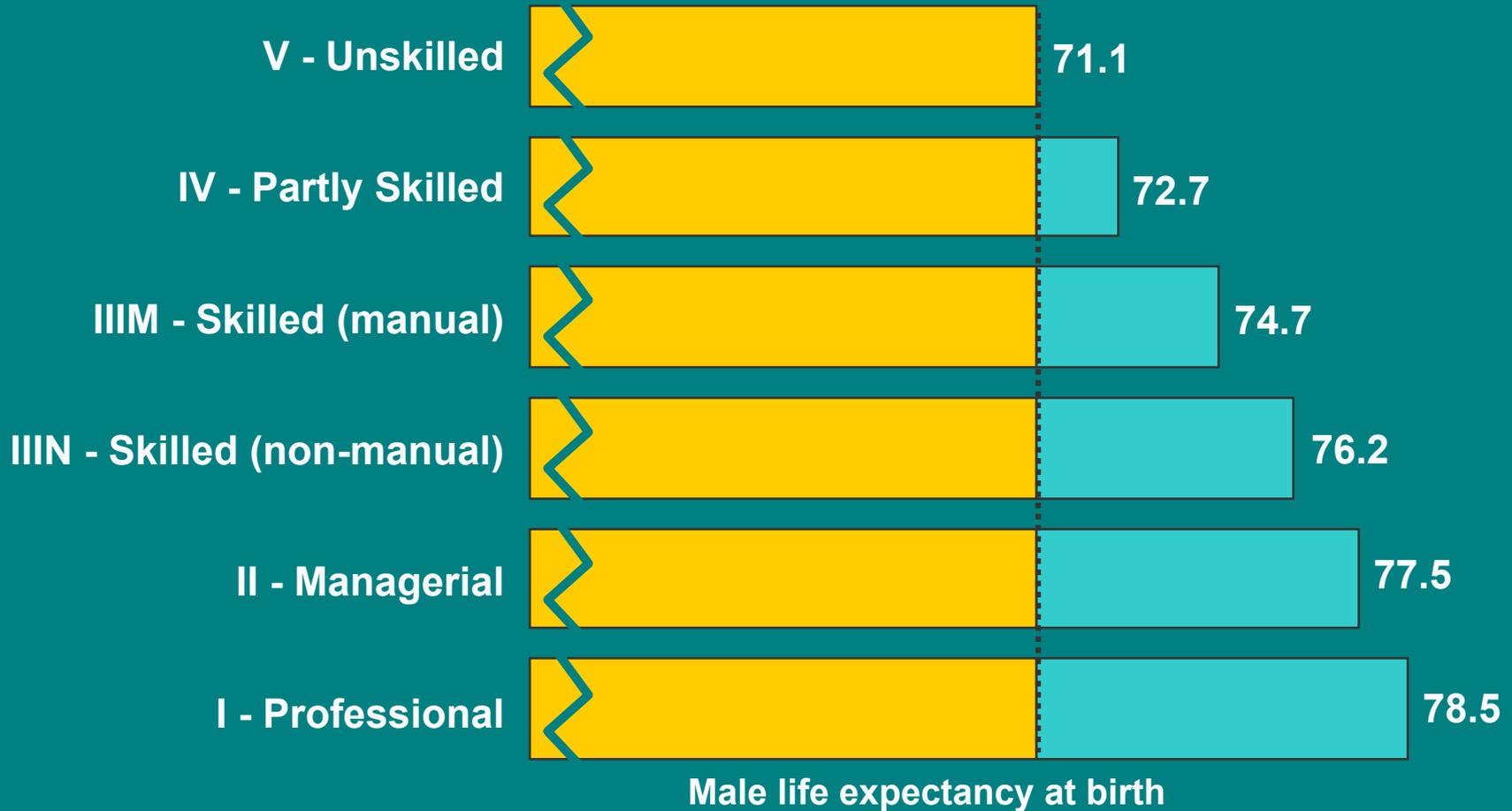
- 99% of population registered with a general practitioner
- 8 out of 10 contacts with the NHS are in primary care
- 75% of NHS spending goes through primary care
- A Director of Public Health in every primary care organisation

# ***POOR HEALTH AND INEQUALITY: PATHWAYS***



# Inequality: social class

Shortened life for men in non-professional classes

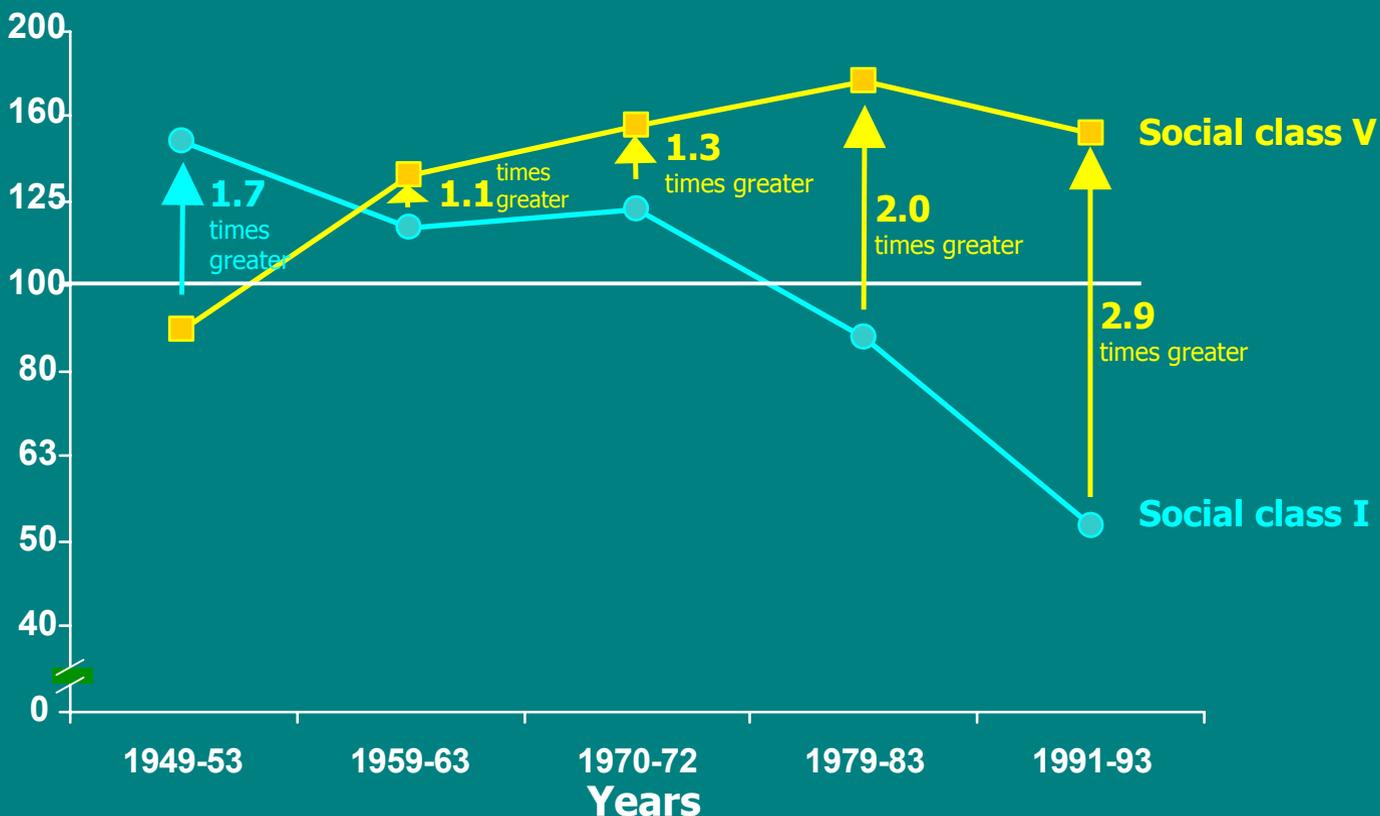


England & Wales 1997-99

Source: ONS, Health Statistics Quarterly No.15

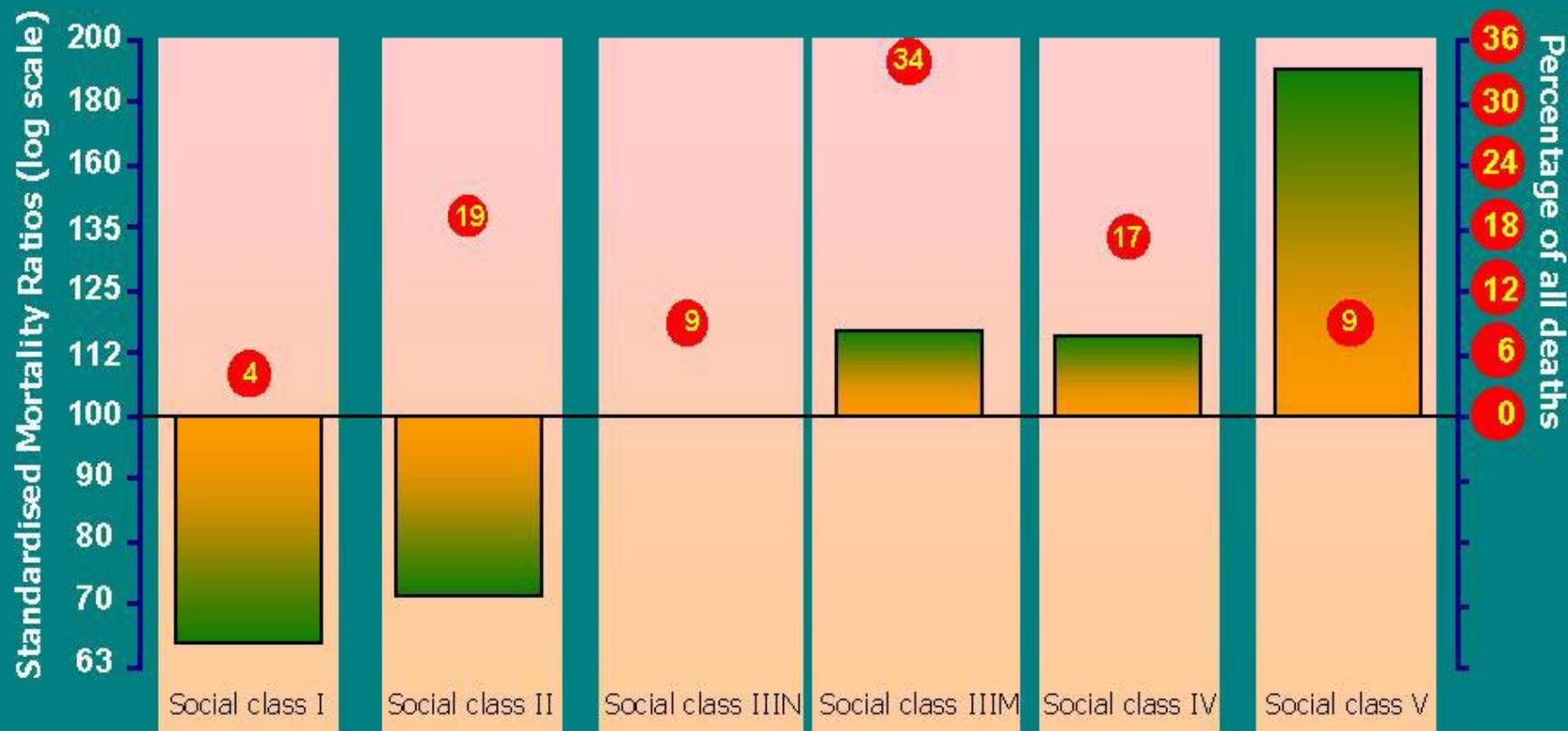
# SOCIAL INEQUALITIES IN THE PATTERN OF DEATH FROM CORONARY HEART DISEASE

Standardised mortality ratios  
(Indexed to 1949-53)  
Log scale



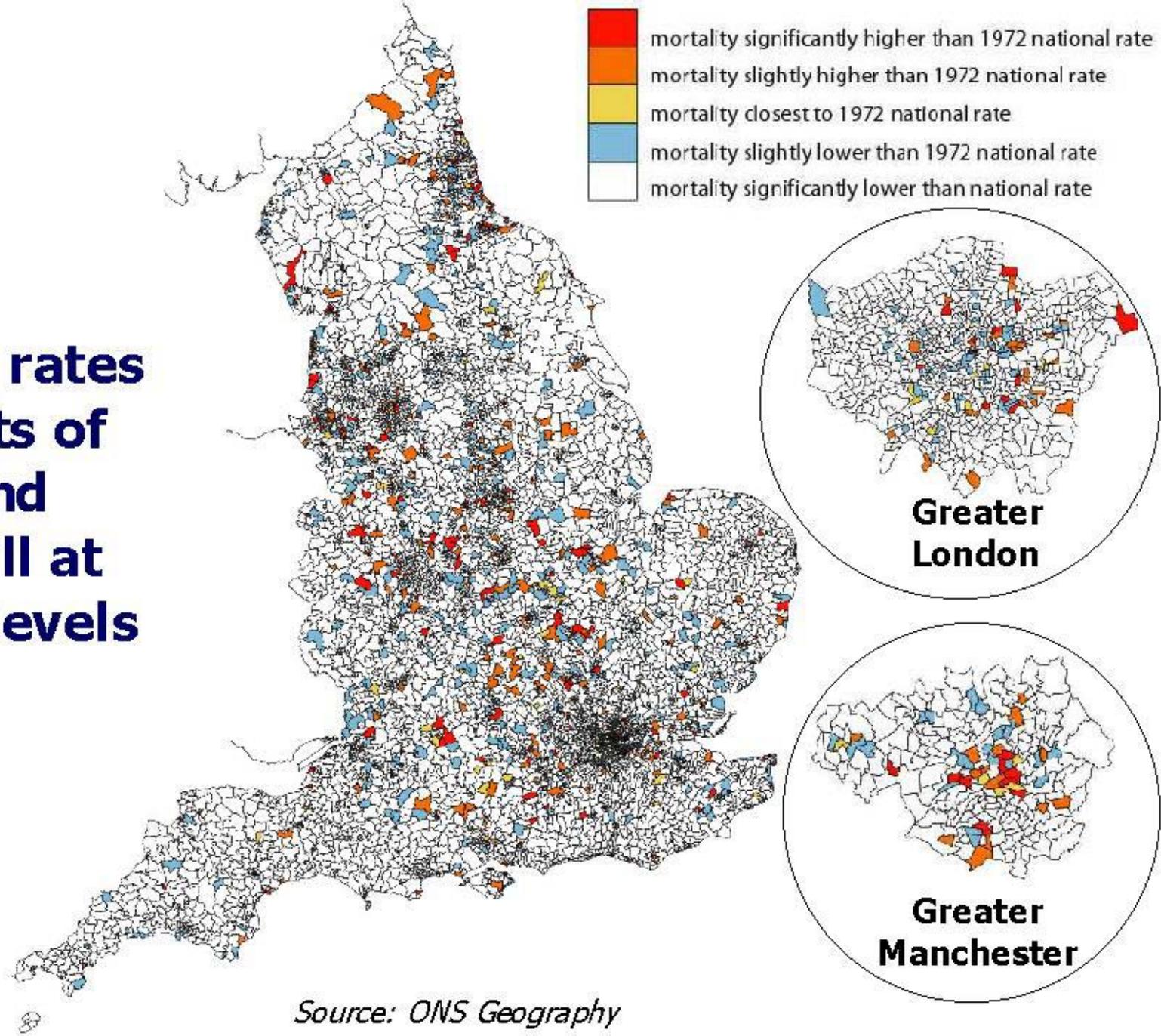
England and Wales average of all social classes in 1949-53 = 100

# Standardised Mortality Ratios and % of all Deaths from All Causes by Social Class in Men aged 20-69 in England & Wales, 1991-93



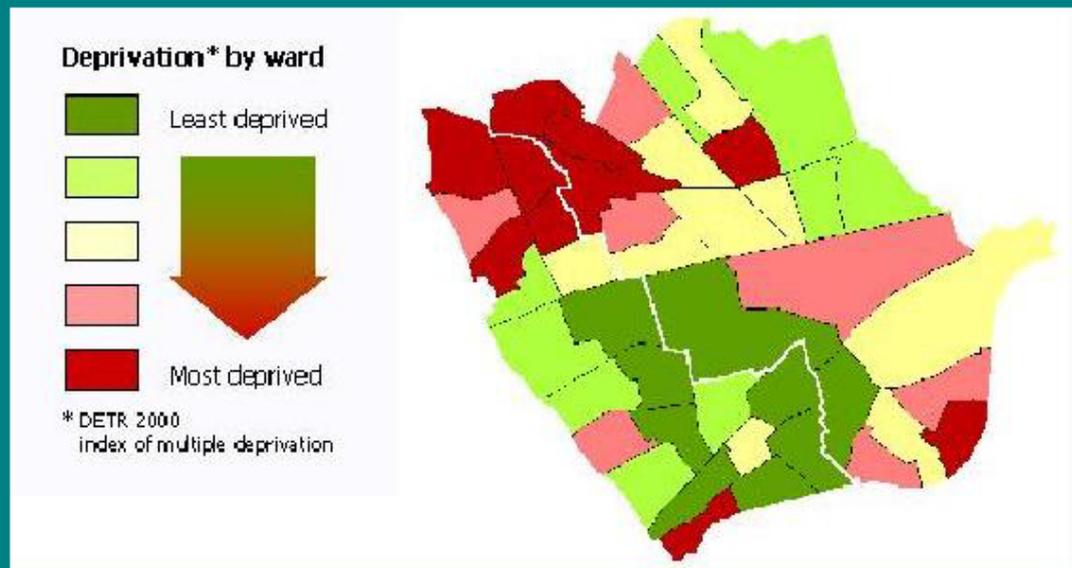
England & Wales average SMR = 100

# Death rates in parts of England are still at 1972 levels



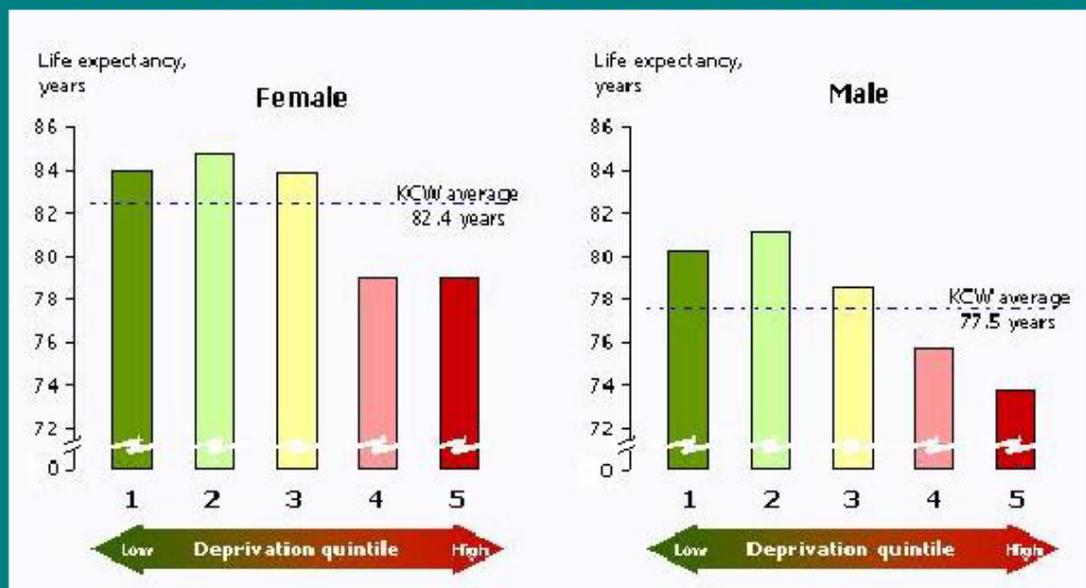
Source: ONS Geography

# INEQUALITIES IN LIFE EXPECTANCY AT BIRTH



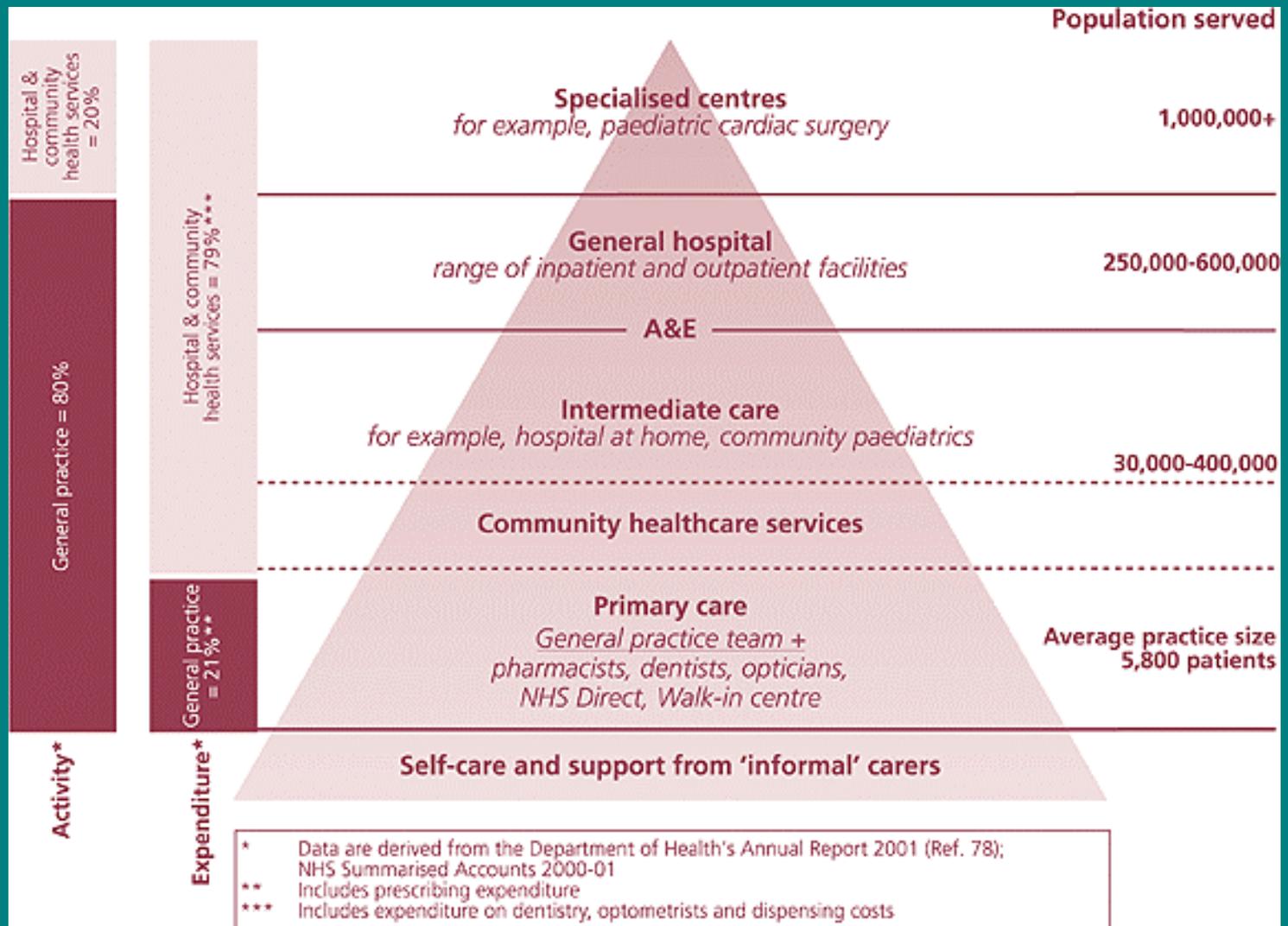
## Deprivation within Kensington, Chelsea and Westminster health authority equates closely to life expectancy

Even within one of the longest lived health authorities there are wards that reflect the whole of the national range of deprivation

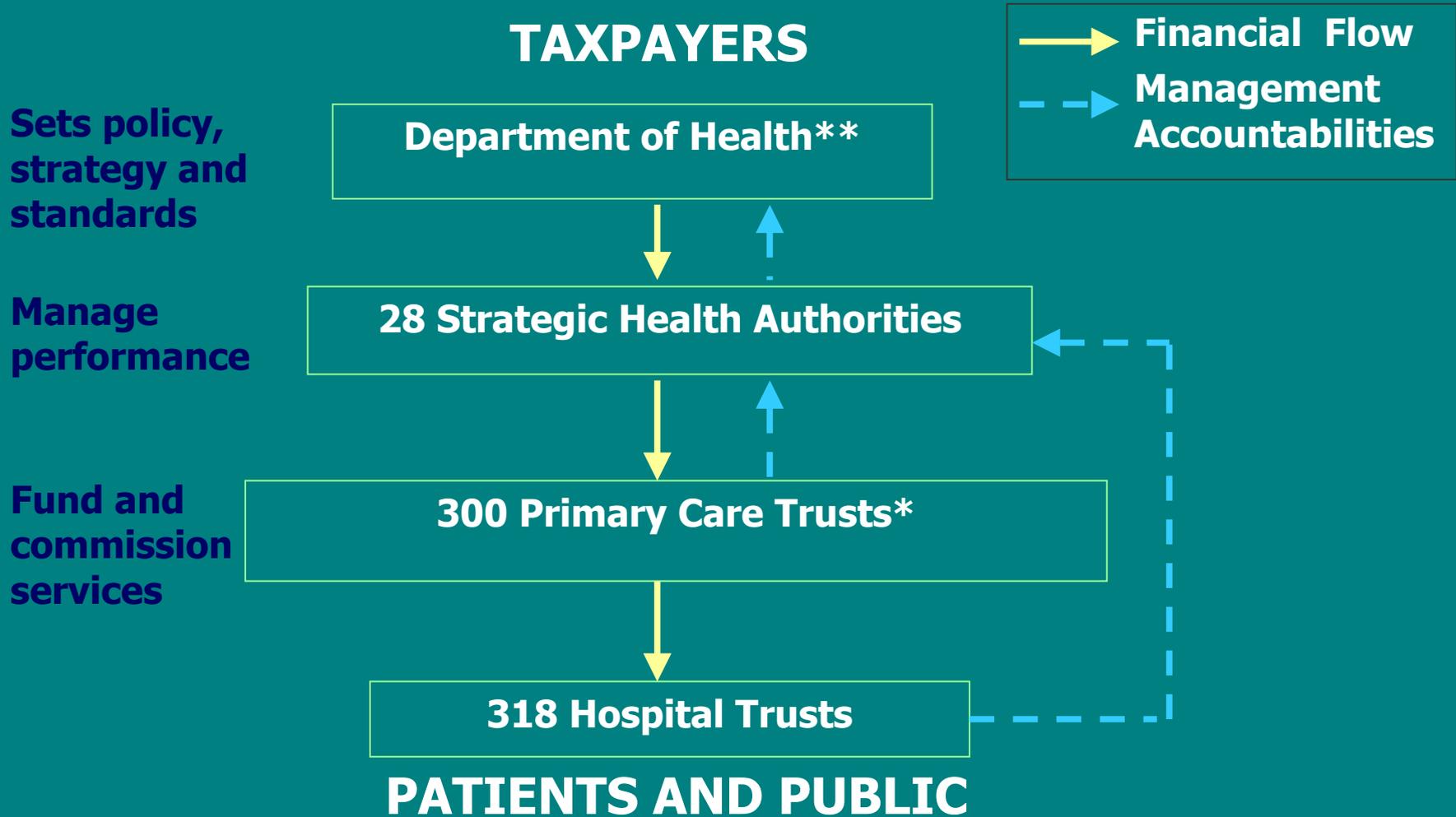


Source: London Health Observatory

# The position of general practice in relation to all health services



# NHS STRUCTURES

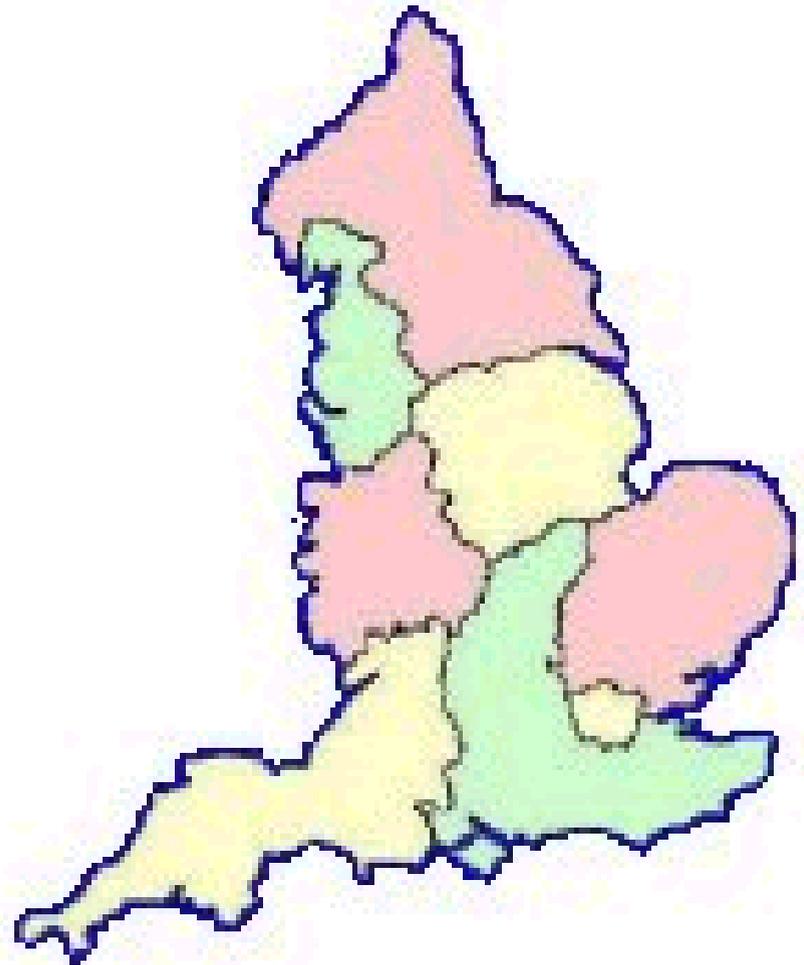


Note: \*\* Public Health Regions and \* Care Trusts not shown

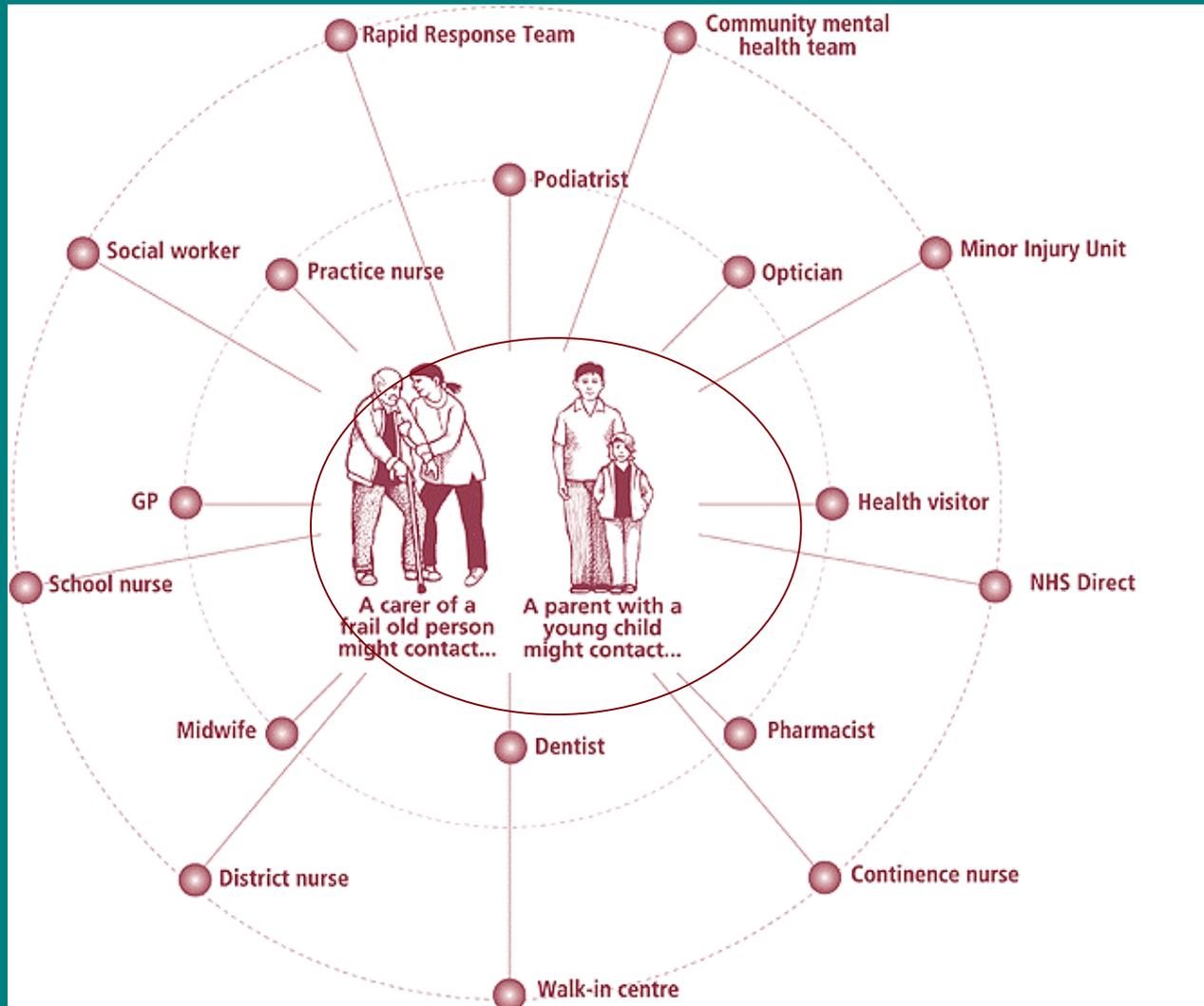
# English regions: regeneration and health

**Government Offices co-ordinate local organizations and national funding streams:**

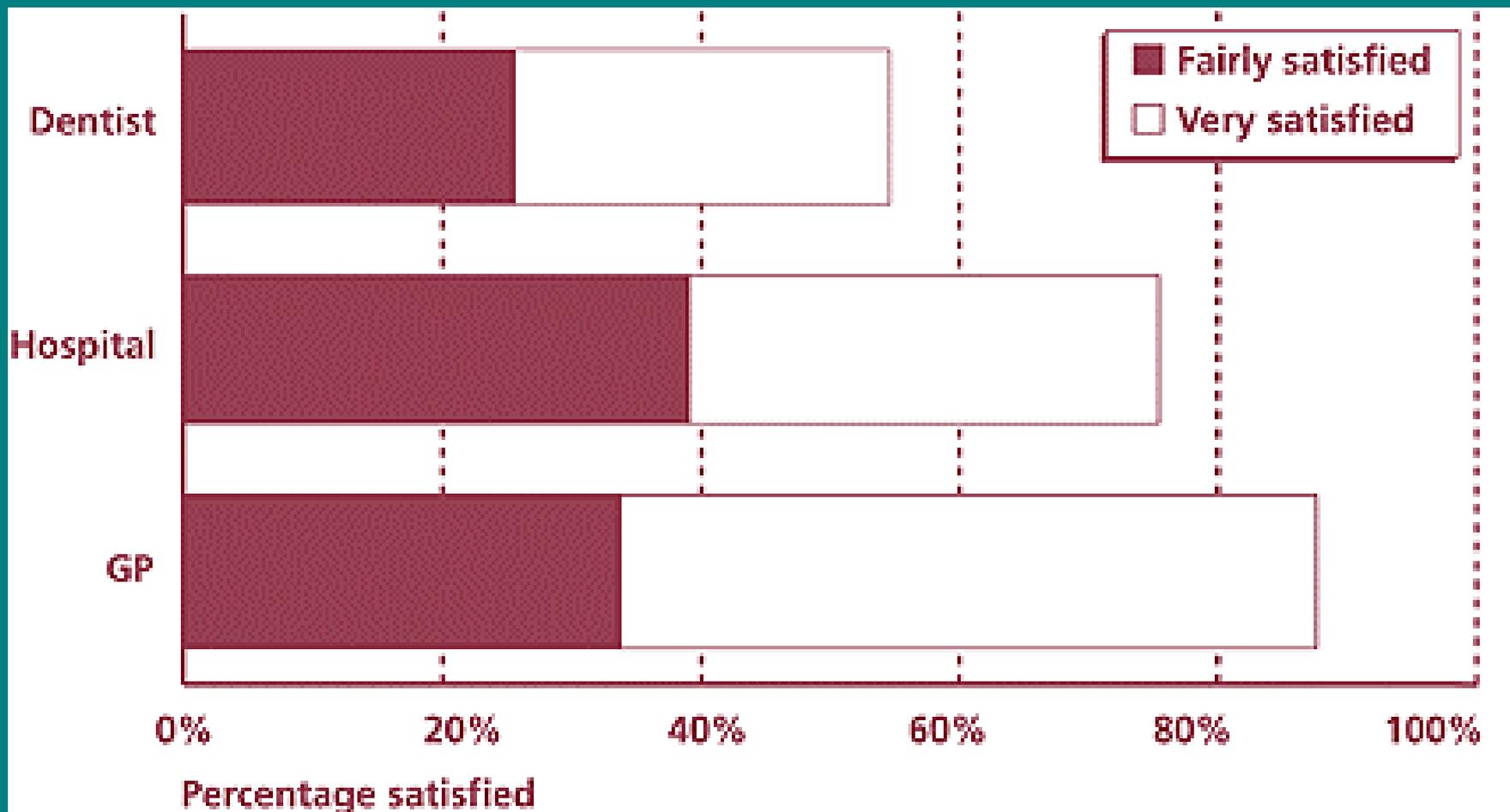
- ❑ **regeneration of neighbourhoods and communities**
- ❑ **sustainable environment**
- ❑ **business and employment**
- ❑ **education and training**
- ❑ **social inclusion**
- ❑ **reduce crime**
- ❑ **promote innovation**
- ❑ **create integrated transport**
- ❑ **public health**



# General practice as part of wider primary care

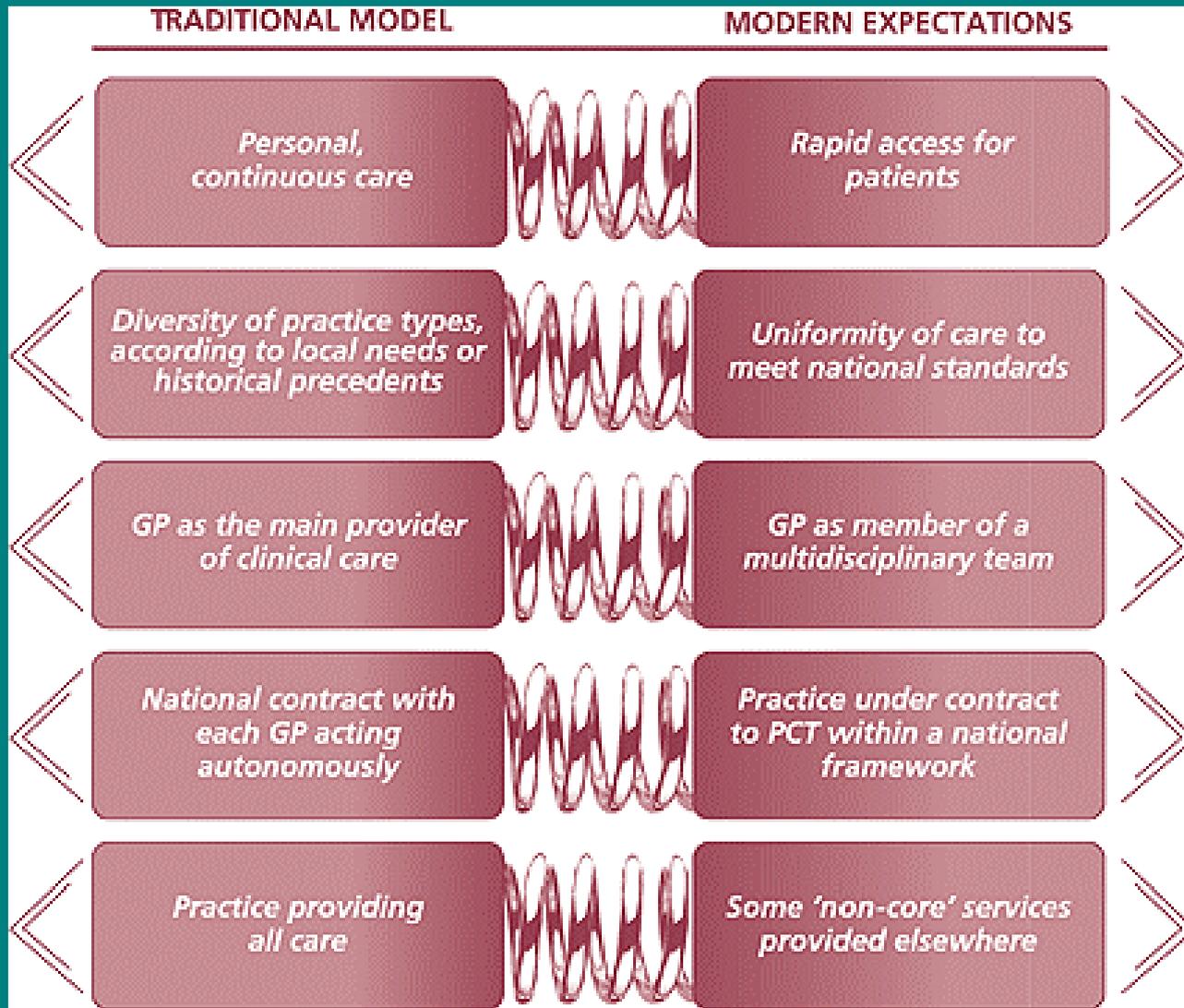


# Satisfaction with GP services



Source: MORI poll commissioned for Audit Commission, 2000

# Tensions in general practice



# **PUBLIC HEALTH IN PRIMARY CARE**

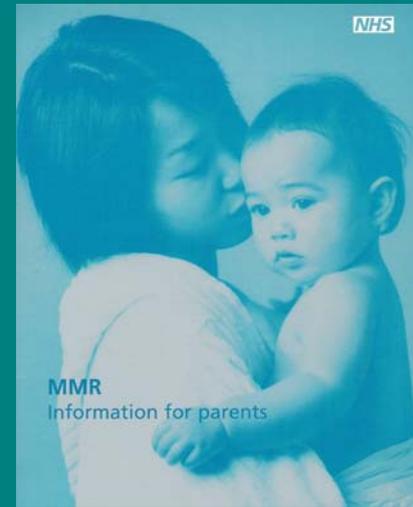
- Preventive programmes**
- Implementing National Service Frameworks**
- Community development and regeneration**

# PREVENTIVE PROGRAMMES

## Smoking cessation



## Immunisation and vaccination



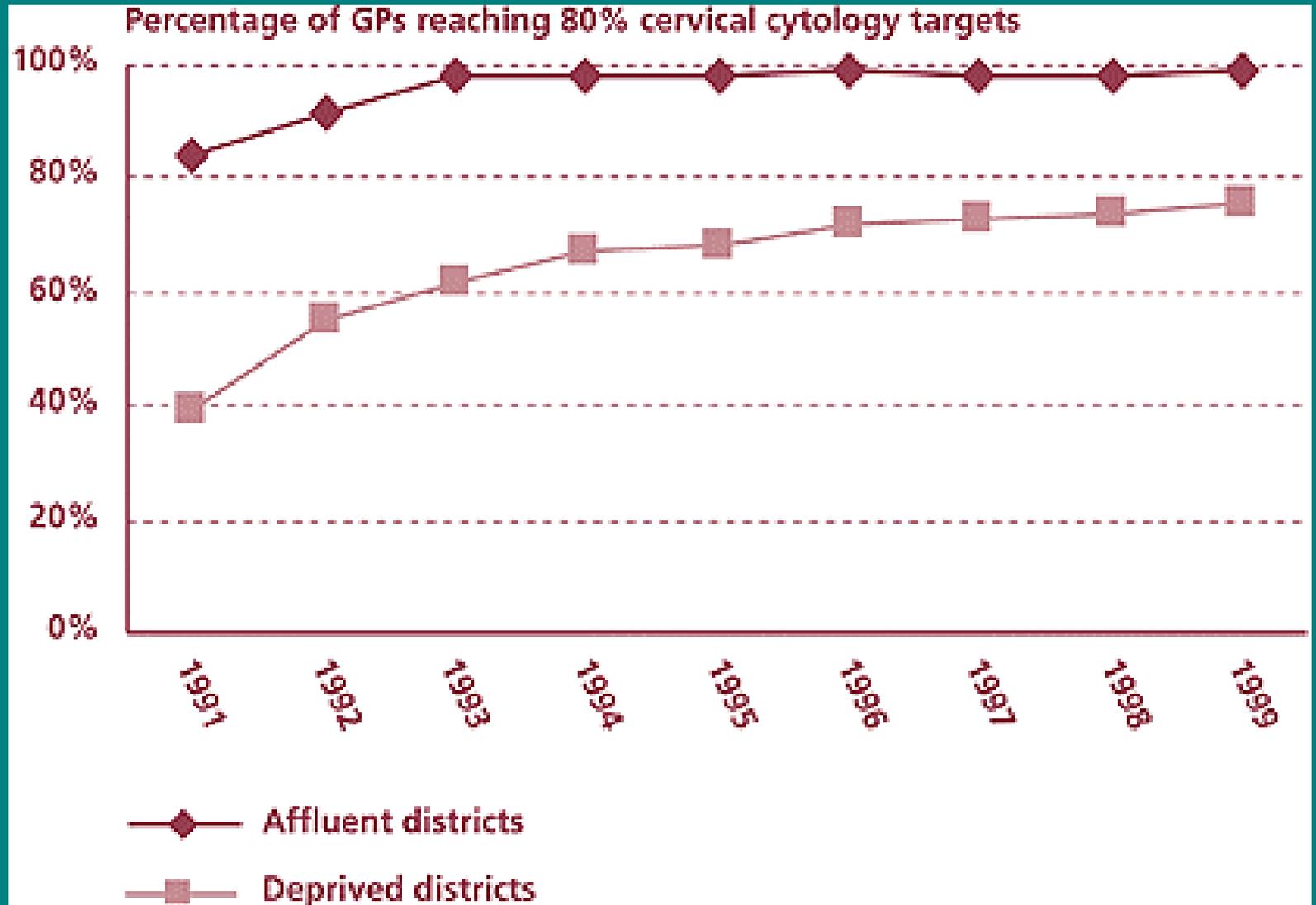
## Risk factor modification



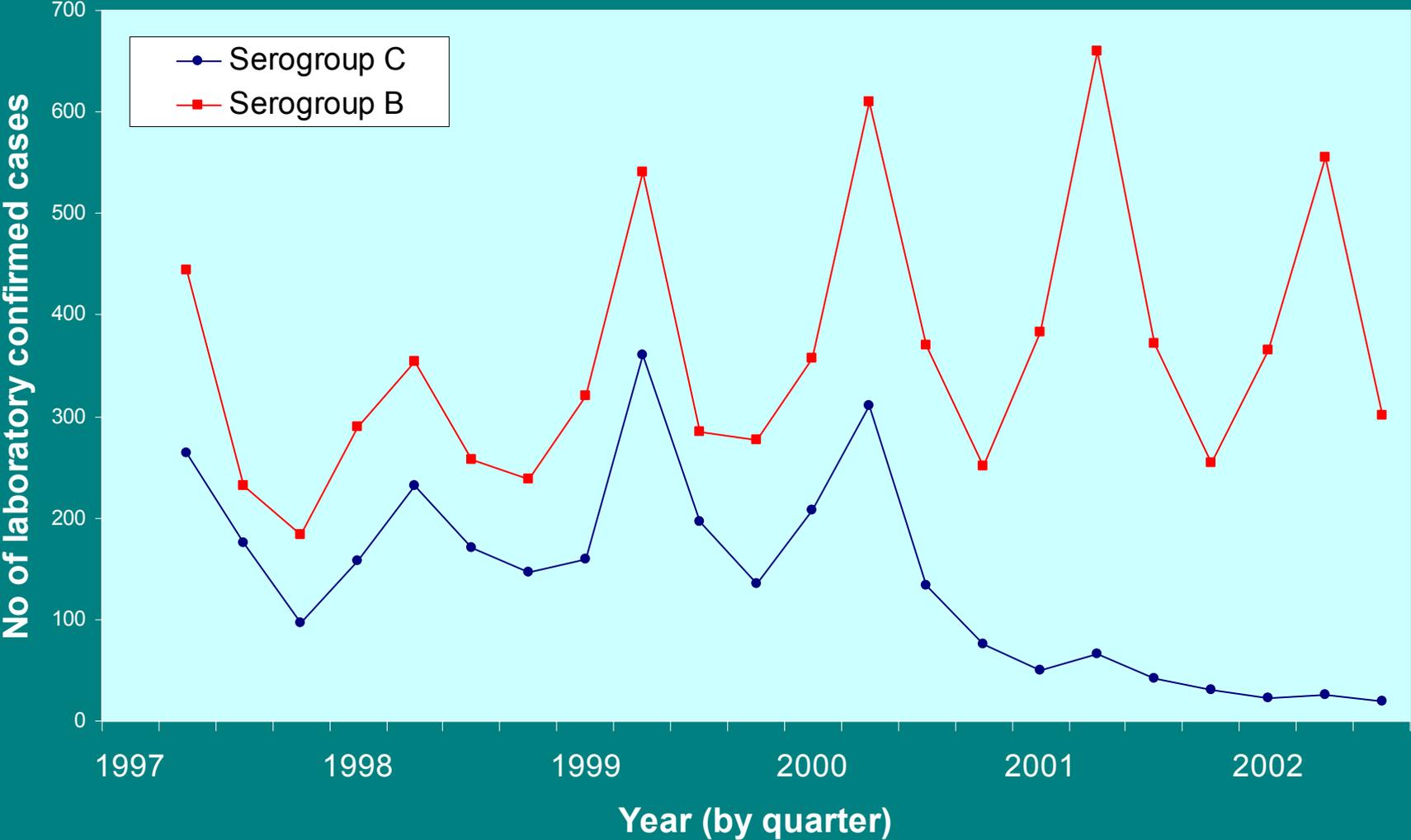
## Cancer screening



# Changes in cervical cytology



# Impact of meningococcal C conjugate vaccine in the under 25 population



The background of the page is a photograph of a woman with dark hair, seen from the side, kissing a baby on the cheek. The baby is looking towards the camera with a neutral expression. The entire image is overlaid with a semi-transparent blue filter. The woman is wearing a light-colored, possibly white, top. The baby is wearing a light-colored diaper.

## MMR

Information for parents



Modern Standards and Service Models

## Coronary Heart Disease

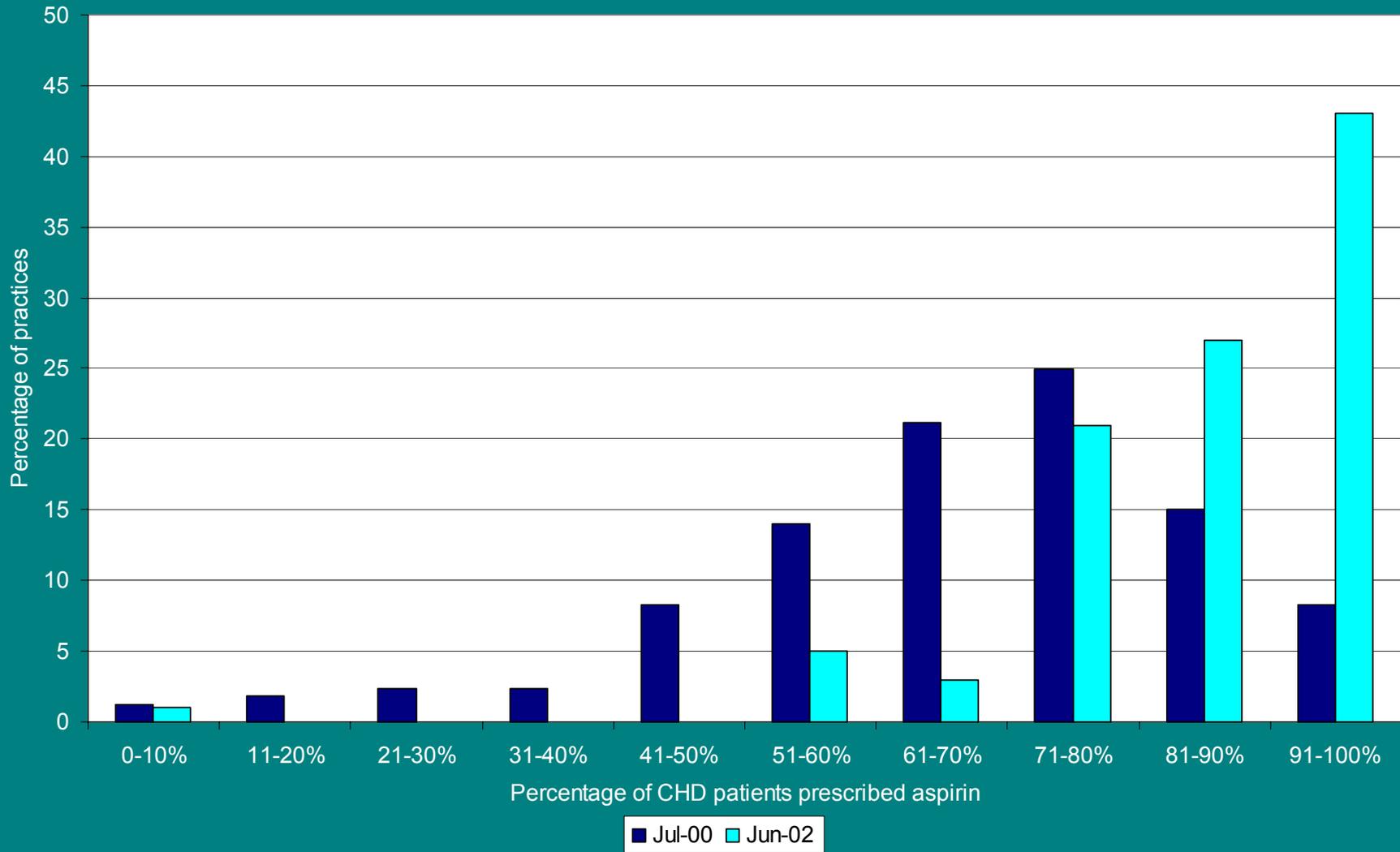
national  
service  
frameworks

Executive Summary

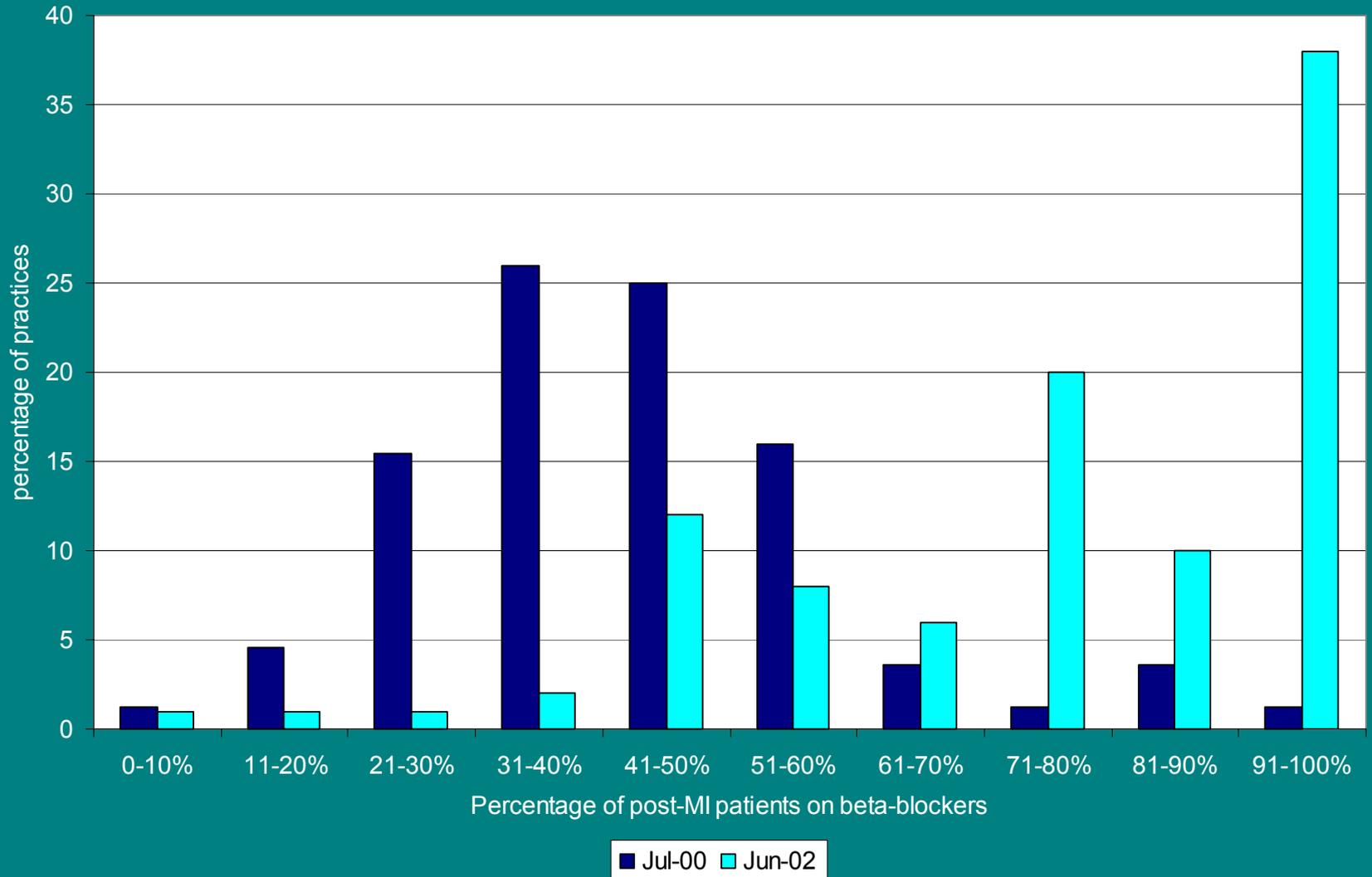
# Percentage of CHD patients prescribed Aspirin

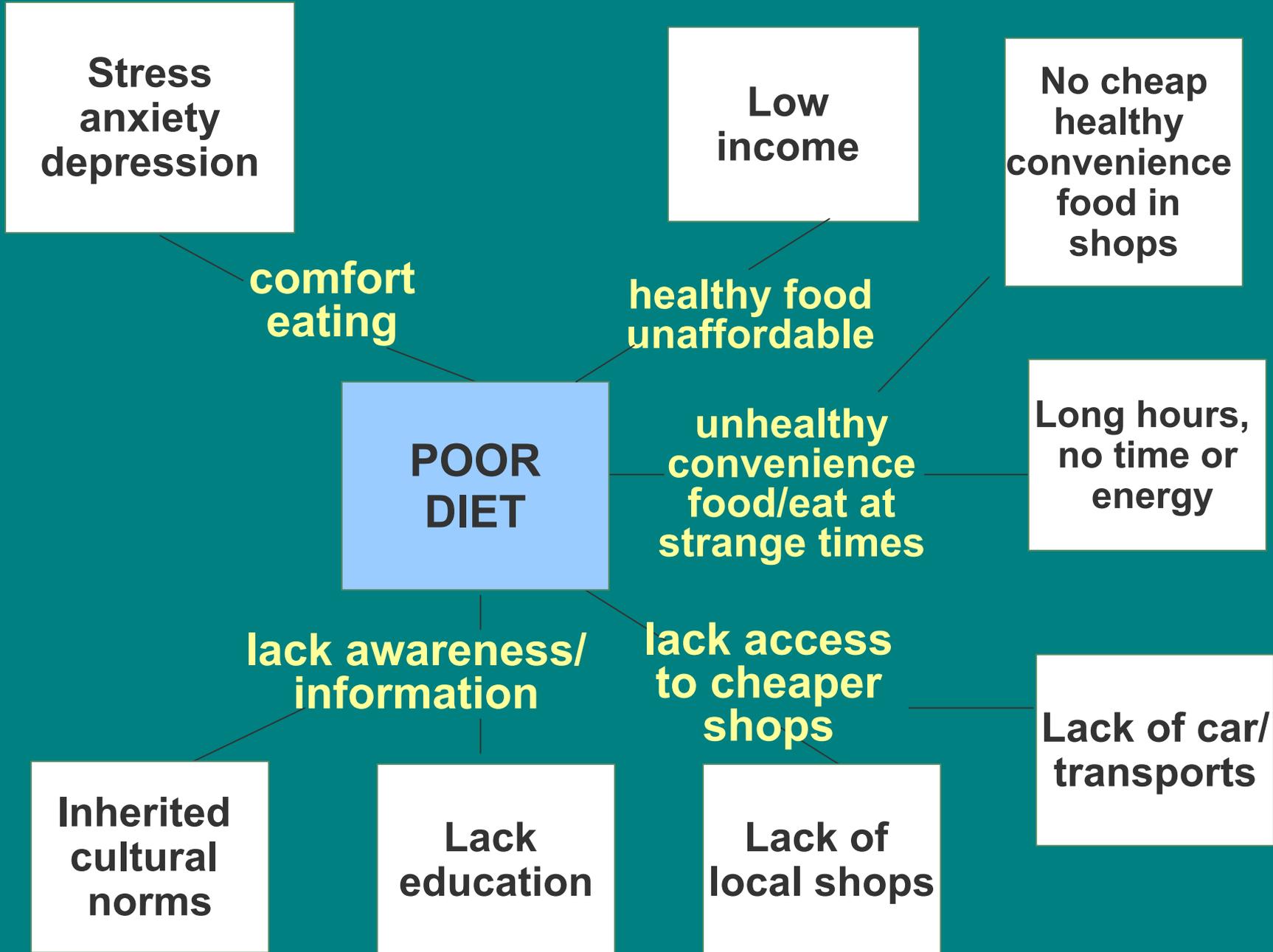
## First Wave Collaborative practices

### July 2000 - June 2002



# Percentage of post-MI patients on Beta-Blockers First Wave Collaborative practices July 2000 - June 2002





## FACTORS THAT CONTRIBUTE TO HEALTH INEQUALITIES

- ❑ Macroeconomic: including poverty and low incomes; worklessness
- ❑ Environmental: poor housing, lack of green space, pollution
- ❑ Poor access to services: healthcare; food shops, local transport
- ❑ Poor quality services: including lack of leisure facilities, limited healthcare
- ❑ Limited early years development
- ❑ Poor educational attainment
- ❑ Damaging lifestyle choices

# TACKLING THE WIDER DETERMINANTS OF HEALTH

- ❑ **Cross-government action on health inequalities**
- ❑ **Regional focus on health and regeneration**
- ❑ **Local multiagency partnerships**
- ❑ **Community development collaborations**



# INFECTIOUS DISEASE ISSUES MAKING THE HEADLINES

**SUNDAY MIRROR**  
21/10/01

## KILLER BUG HITS HOTEL

By FIONA JAMES

A WOMAN is in intensive care after contracting Legionnaires' Disease at a West Country hotel. Nine other guests at the 40-bedroom Roseland Hotel in Torquay have a closely-related, but less serious, flu-like illness called Pontiac Fever. The hotel has been shut down while its water system is checked, and health chiefs are now trying to trace every guest who stayed at the hotel this month. The guests who fell ill were on a coach trip from the West Midlands.

**INDEPENDENT**  
26/01/01

## HIV is rising at an alarming rate. Is it because a new generation is turning its back on safe sex?

BY ANDREW GUMBLE  
in Los Angeles

FOUR YEARS ago the Aids epidemic in North America was declared to be all but over. It was

All this is a far cry from the optimism of the mid-1990s, when falling infection rates and the development of anti-retroviral drugs called premature inhibitors caused health officials

community, there is even a grim fascination with seeking out HIV-positive partners. In recent chat sites feature conversations between "g0-g0v0rns" (infected men seeking un-

**DAILY MAIL**  
29/06/01

## Thousands of foot-and-mouth workers face tests after 'secret' infection

By Sean Poulter  
Consumer Affairs Correspondent

THOUSANDS of workers involved in the foot-and-mouth crisis are to be screened after it emerged that three soldiers were contracted a rare livestock disease. Believed to be emergency responders, they tested positive for the little-known Q fever. Further tests are now being carried out on several other military workers who could just be the tip of the iceberg. Despite the widespread belief that a hepatitis and typhus outbreak - can be mistaken for the

**Factfile**

- STRIP TITERS of Q Fever include a head-to-head comparison of the

**EVENING STANDARD**  
23/11/00

## Hospital infections 'kill 5,000 patients'

by ED HARRIS

INFECTIONS picked up in hospitals are killing up to 5,000 patients in England a year and costing the NHS £1 billion, a report warns today. The scale of the problem

**THE MIRROR**  
27/11/01

## E. COLI: 12 IN HOSPITAL

By STEPHEN WHITE

TWELVE people were in hospital last night after an e.coli outbreak. A supermarket deli counter was shut after some patients reported eating meat from an independent in-store butcher. Six have been confirmed to be suffering from e.coli. The outbreak centres on a Kwik Save in Eccleston, near Chorley, Lancs. A spokesman for the chain said although the link was not confirmed, it looked "very likely".

**OBSERVER**  
03/06/01

## Britain braced for an Aids explosion

The disease is back and infection rates are rising in America as the safe sex message is forgotten. Anthony Browne, Health Editor, reports

IT WAS the news that he had per cent of gay men in their been leading. As Angus twentier are becoming which he had on his own... The real concern will come when the UK follows the US.

**GUARDIAN**  
29/11/00

## Student victim of meningitis

A 19-year-old student at the University of Wales, Swansea, died in hospital yesterday from meningitis. The woman, from Gwent, was among six cases of meningitis to have been reported in south Wales in the past three weeks.

**DAILY TELEGRAPH**  
07/09/01

## CJD death toll rises by one third in a year

By Rocca Nicastro  
Science Editor

THE number of deaths caused by variant CJD, human BSE, has risen by almost a third in the past year. In 2000, the toll stood at 107, compared with 142 in the south. As a result, the number of deaths is about the same as the length of the incubation period of the disease and lower it was affected by genetic variability. All affected persons so far shown had to be answered before such a forecast could be made - the

**SUNDAY TELEGRAPH**  
26/08/01

## World super germ 'born in Guildford'

Scientists trace antibiotic-resistant bug to a Surrey hospital as it gets more deadly

BY JENNY BOOTH AND NICHOLAS RANDALL

Microbiologists at Rockefeller University in New York have traced the family tree of the bug *Staphylococcus aureus* to help find ways to combat it. Their research spread across the world in three successive epidemics, causing deaths among elderly and vulnerable patients, and forcing thousands of hospital wards to close to prevent infections spreading. So far this year, nearly half of all blood samples from British patients with *Staphylococcus aureus* infections have shown they are suffering from antibiotic-resistant MRSA, compared with only 1-7 per cent in 1990. In a recent worrying development, a mutation of MRSA

**EVENING STANDARD**  
25/07/01

## London clubs 'at high risk' from new TB superbug

By Laura Smith

YOUNG clubbers and bar-goers in London are the latest victims of a health experts warn. One person has died from the drug-resistant "clubbers' strain" and hospitals across the capital are on red alert. Clubs remain open weeks after a warning by GPs that the capital faces a dangerous surge in TB cases because of a

**DAILY TELEGRAPH**  
21/04/01

## Seven people killed by meningitis from Mecca pilgrims

BY NICOLA WOOLCOCK

SEVEN people have died from a strain of meningitis new to Britain after the disease was contracted by Muslim pilgrims to

believe the disease could be spread through contact with those who contracted it this year. An electronic warning on the NHS-wide Epinet system was issued last week after the Com-

Haji were advised to be immunised with a vaccine covering this strain." Meningitis is a serious illness in which the membranes lining the brain and spinal cord, the

**SUNDAY TIMES**  
09/09/01

## New health alert as E-coli hits half of cattle herds

The potentially lethal stomach poisoning each year and several

Jonathan Leake Environment Editor





# The public health function: underpinning strategies

Knowledge management:

Public health observatories



High quality workforce:

Education and training programmes



Standards and evidence:

Health Development Agency



Surveillance and surge: capacity

Health Protection Agency



# Public Health Observatories on the Internet

## The Association of Public Health Observatories

- Home
- Background
- The Association
- Progress Report
- Collaborative Work
- Information Sources
- Archive of Work
- Contacts
- Links
- Search
- PHO Login

## The Association of Public Health Observatories

Focusing on The Health of England



Eight regional observatories forming a national association of Public Health intelligence



### Latest News from the APHO:

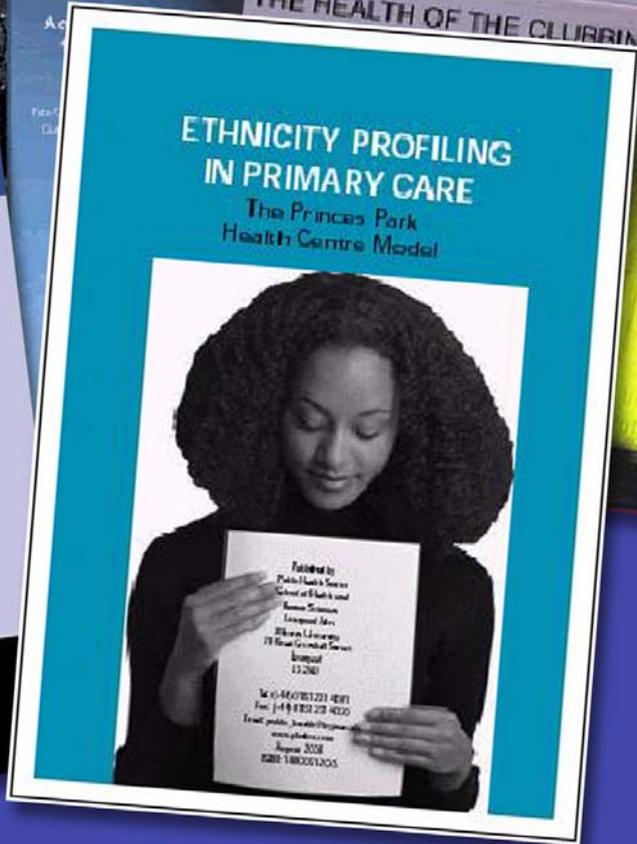
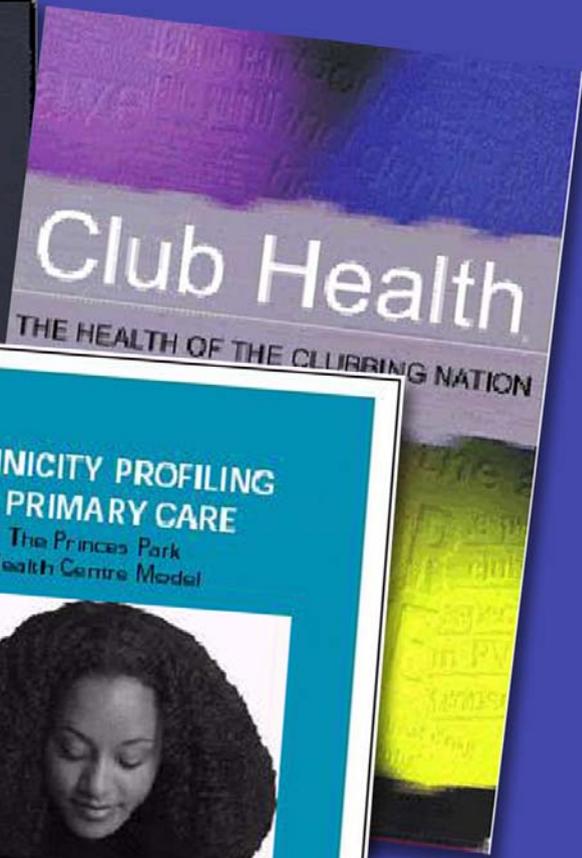
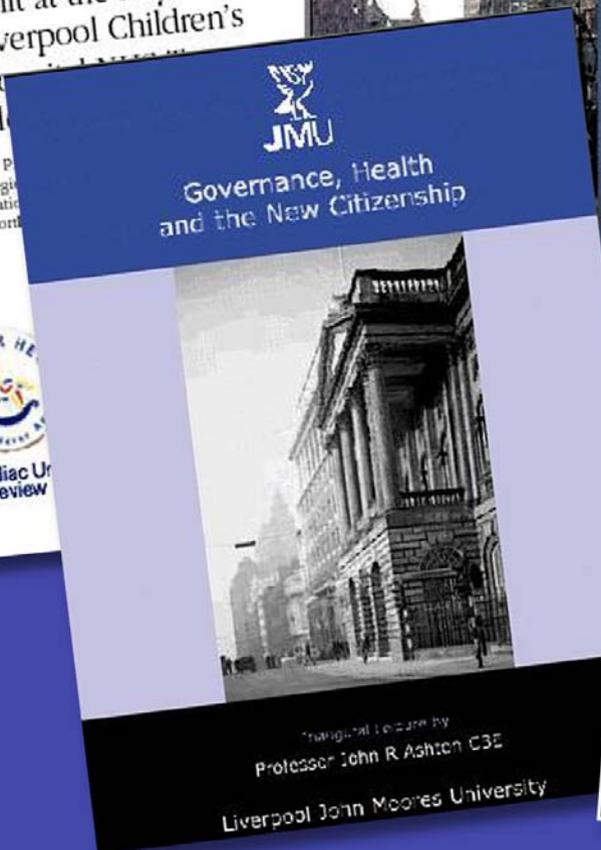
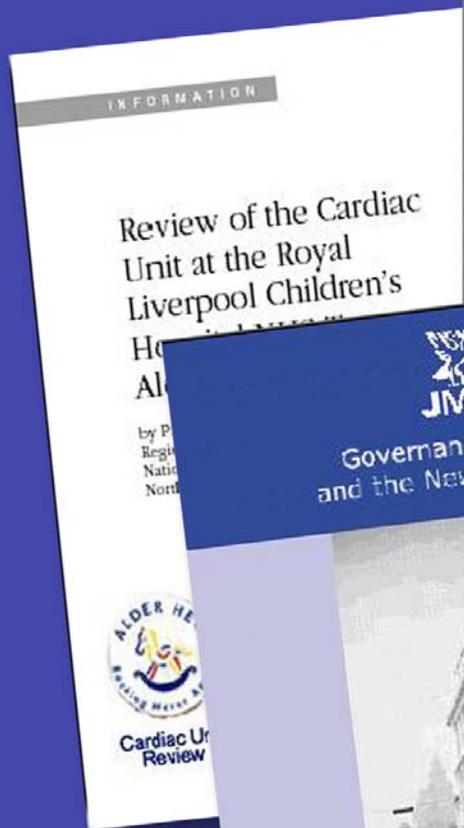
There are no current news articles

APHO	ERPHO	LHO	NWPHO	N&YPHP
SEPHO	SWPHO	TPHO	WMPHO	Partners

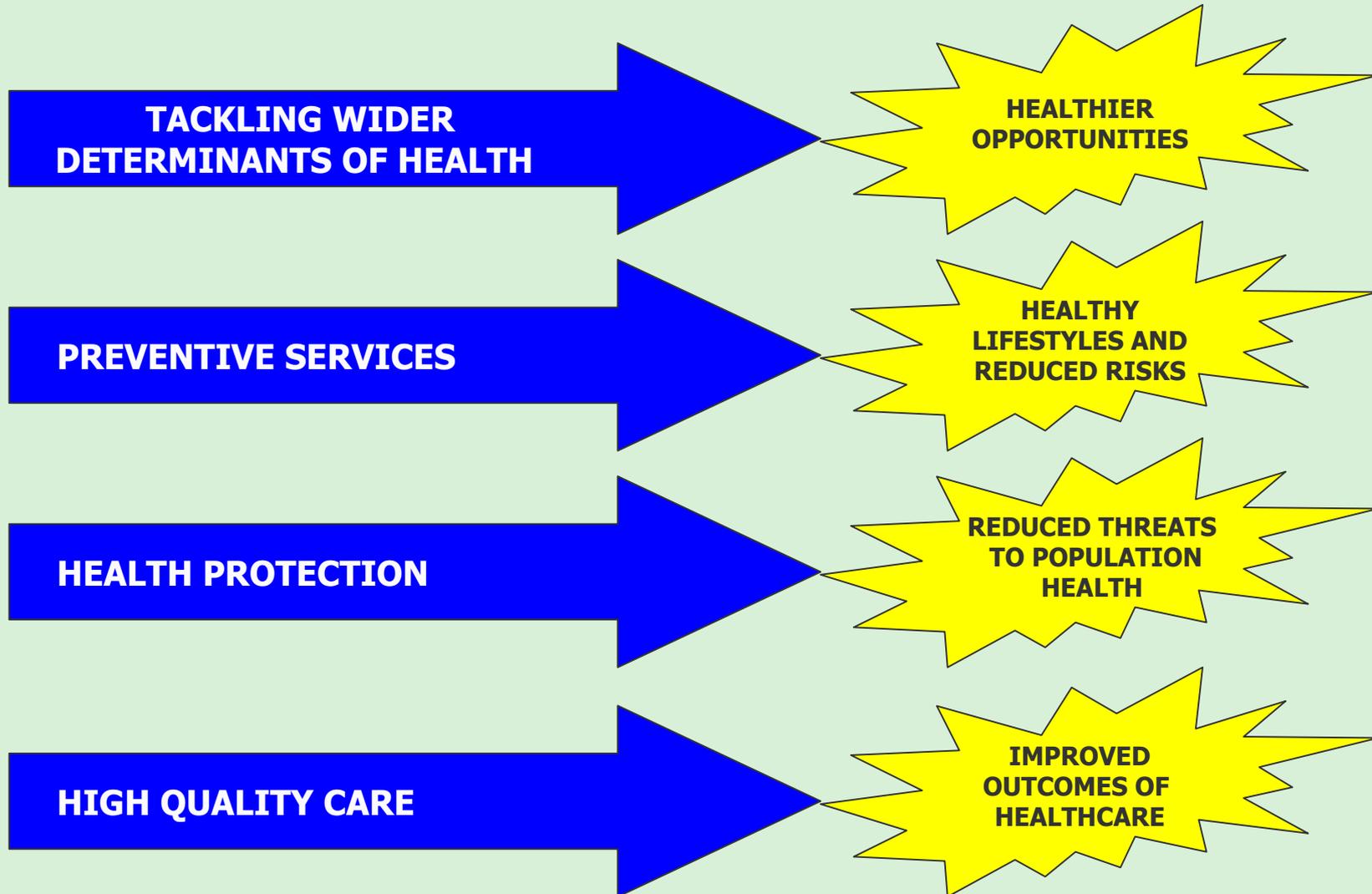
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# Regional Public Health Observatories: focusing on health issues



# **IMPROVING HEALTH AND REDUCING INEQUALITIES: MAIN LEVERS OF CHANGE**



# **PUBLIC HEALTH IN PRIMARY CARE: CULTURE**

- Leadership**
- High quality partnerships**
- Multidisciplinary practice**
- Performance emphasis**
- Public engagement**
- Use of evidence and information**