



The Role of the NHS in Prevention: A view from 2024

Discussion paper: executive summary

About this paper

This discussion paper builds upon the 2019 Faculty of Public Health (FPH) [discussion paper](#) that explored the role of the NHS in prevention. Themes from 2019 are revisited in today's context. The paper is intended for anyone who works within or in partnership with the NHS.

This discussion paper is based upon three sources of evidence:

- Findings from the 2019 FPH [discussion paper](#) on the role of the NHS in prevention
- Feedback gathered from a consultation with public health professionals in 2024
- A rapid scoping review of literature

Introduction

Within an NHS context, 'prevention' refers to actions taken by NHS organisations that will directly or indirectly contribute to prevention of ill health and/or premature mortality within the population. Prevention actions should occur at all levels within the NHS: from preventing a health problem or condition from developing in the first place, to early detection of disease to facilitate early intervention and treatment, and to actions taken to minimise adverse consequences from an existing health problem. Prevention of ill health benefits individuals of all ages, through improved quality of life and/or increased life expectancy. Prevention of ill health is also crucial to alleviating the long-term economic burden on the NHS associated with treating late-presenting, complicated diseases. The NHS does not work alone to prevent ill health and/or premature mortality: NHS organisations can and should work in partnership with other organisations and other sectors to deliver evidence-based prevention activities. When developing and delivering prevention actions, it is vital that NHS organisations and partners take action to ensure that existing health inequalities are not widened, for example due to poorer uptake amongst groups who are in greatest need.

The 2019 FPH [discussion paper](#) reported that those working within or in partnership with the NHS at the time expressed a desire for the NHS to be more health-promoting and balanced more in favour of prevention than it was. In 2024, it seems timely to revisit the role of the NHS in prevention. Over the past five years, prevention has become more visible in national legislation, strategies and policies that relate to the NHS. In response to challenges

highlighted in the 2024 Independent investigation of the NHS in England, led by Lord Darzi, the UK Government has committed to develop a ten-year plan for the NHS in England, with a shift to prevention as one of its three major themes. For the FPH, given its recently published [vision](#), in which prevention is a central theme, it also feels a timely moment to reflect upon the role that public health professionals can play in embedding prevention within the NHS.

Achievements over the past five years

To facilitate meaningful discussion about the future role of the NHS in prevention, it is helpful to reflect upon progress made since publication of the 2019 discussion paper. The further development of Integrated Care Systems ICSs and Integrated Care Boards (ICBs) during this period has heralded a shift to a whole system approach to health and social care service planning and delivery, with opportunity for a greater focus on population-level prevention. Prevention has become more visible within national strategies and plans relating to the NHS, including within the 2019 NHS Long Term Plan and the 2023 Department for Health and Social Care development work on a Major Conditions Strategy. Work undertaken in [Wales](#) and [Scotland](#) has explored the role of the NHS in prevention. The role of the NHS as an 'anchor institution' has been increasingly recognised, especially in terms of its role in mitigation of the impact of climate change on the health of local populations.

There are many examples of specific initiatives that have been developed to embed prevention within frontline practice, such as the 'Making Every Contact Count' approach, as well as specific prevention programmes that have been launched, such as the 'Stop a Stroke' programme. The NHS screening programme has been expanded to include targeted lung health checks, and the NHS immunisation programme now includes the Covid-19 vaccination, for which rapid rollout was achieved.

There is now a greater awareness of health inequalities, particularly following the spotlight shone by the Covid-19 pandemic upon health inequalities. Although various initiatives have been developed to address health inequalities, the 2020 ['Marmot Review 10 Years On' report](#) shows widening inequalities since 2010 and highlights the scale of work that still needs to be done.

There has been a rapid increase in the availability of digital tools through the NHS to support prevention, for example for weight management and smoking cessation support. However, there remains huge opportunity to further expand use of digital technology and artificial intelligence to support planning and delivery of NHS prevention activities.

Prevention priorities for the NHS

The 2019 FPH [discussion paper](#) identified prevention priorities for the NHS. In 2024, public health professionals were asked for their views on the relevance of these priorities now. Based upon their feedback and the 2019 priorities, Figure 1 below summarises the prevention priorities proposed by the FPH for the NHS in 2025. Across all priorities, it is vital to take action to ensure that delivery of prevention activities does not widen health inequalities.

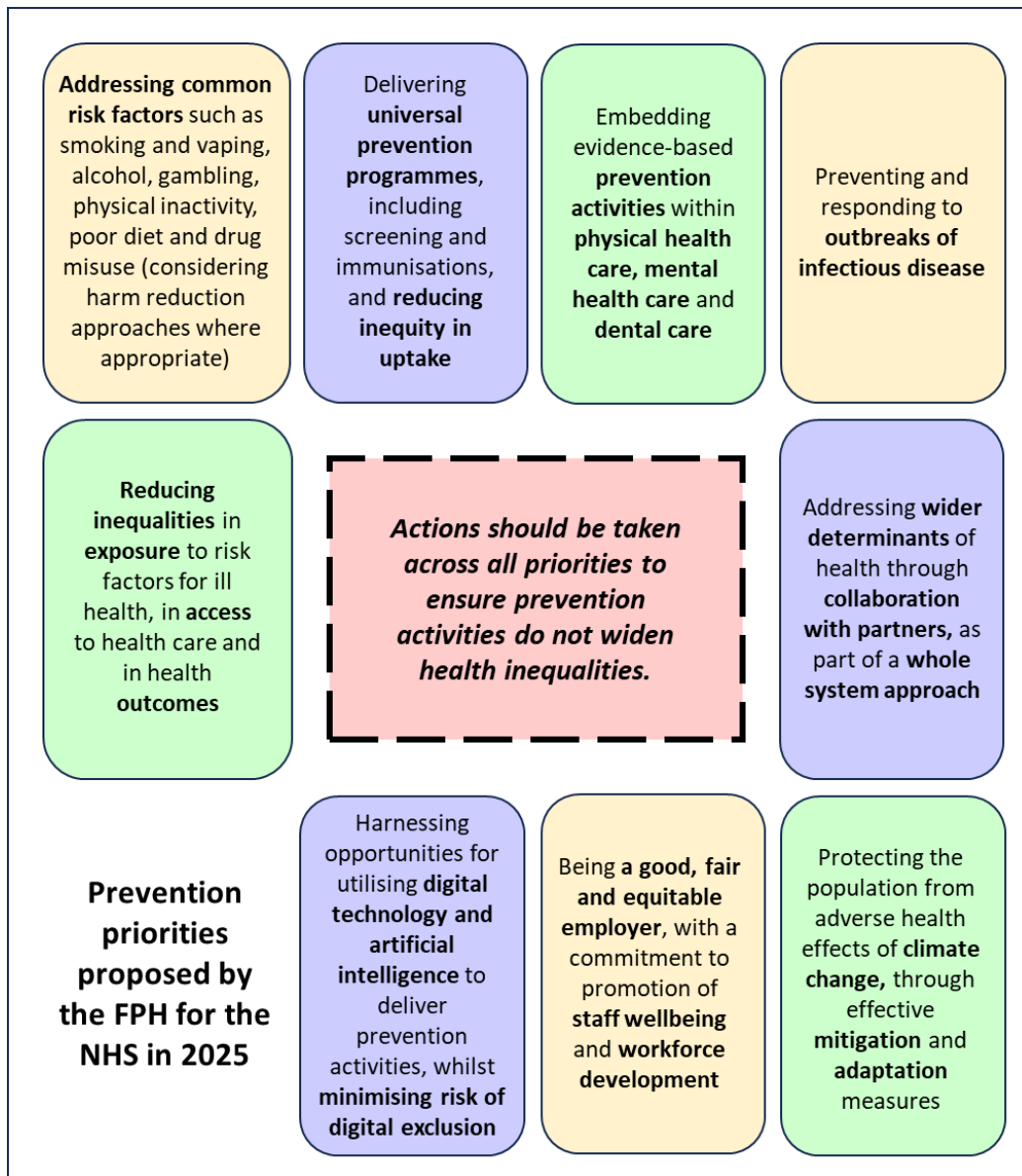


Figure 1. Prevention priorities proposed by the FPH for the NHS in 2025

Facilitating factors for embedding prevention within the NHS

Within the 2024 consultation, public health professionals were asked for their views on key factors that will help embed prevention into the NHS. Five broad themes emerged from this consultation: information, communication and technology; funding; governance and oversight; NHS organisational culture, and a whole system approach. Facilitating factors are shown in Figure 2.

Barriers to embedding prevention within the NHS

Within the 2024 consultation, public health professionals were asked to consider what barriers the NHS faces in addressing prevention priorities. The barriers identified are shown in Figure 3.

The roles of the NHS in prevention

The 2019 discussion paper proposed five roles that the NHS is playing within prevention: leader, partner, employer, advocate and researcher. During the 2024 consultation with public health professionals, there was broad agreement that these roles are still important and relevant today. Additional roles were suggested: implementer/deliverer, educator, reviewer, monitor and purchaser. Some roles will be more relevant to some NHS organisations than others. However, all NHS organisations should consider the range of avenues through which they can shift focus to prevention, and the public health community should support NHS organisations to adopt these different roles.

FPH and the NHS

As the training and standard setting body for the public health workforce and the voice of the public specialist public health community, the FPH has a distinct role in supporting prevention aspirations within the NHS. We believe that the shift to prevention requires expert public health skills at every level of the NHS and within frontline healthcare practice.

Prevention is a key theme within the new FPH [vision](#), and this includes a focus on investing in the specialist public health workforce. 'Workforce' is also one of the eight priorities of the FPH 2020 – 2025 [strategy](#). With a curriculum review due in 2025, the FPH has an opportunity to strengthen the healthcare public health component of the specialist public health training programme. In partnership with other organisations, the FPH also has an important role to play in helping develop public health skills of clinical staff and in advocating for inclusion of public health specialists as participants and contributors within training programmes for senior clinical leaders.

Finally, it is important that the FPH continues to provide opportunities for public health professionals, including those in specialist training, to develop their skills in advocacy.

Concluding remarks and next steps

This paper presents themes that have emerged from consultations in 2019 and 2024 with the specialist public health and NHS communities about prevention in the NHS. Our hope is that this paper can be used as a tool for change by those working within or in partnership with the NHS. We hope that the paper can stimulate further meaningful discussion between public health professionals, the NHS and the Department for Health and Social Care, to support a much-needed shift to prevention within the NHS.

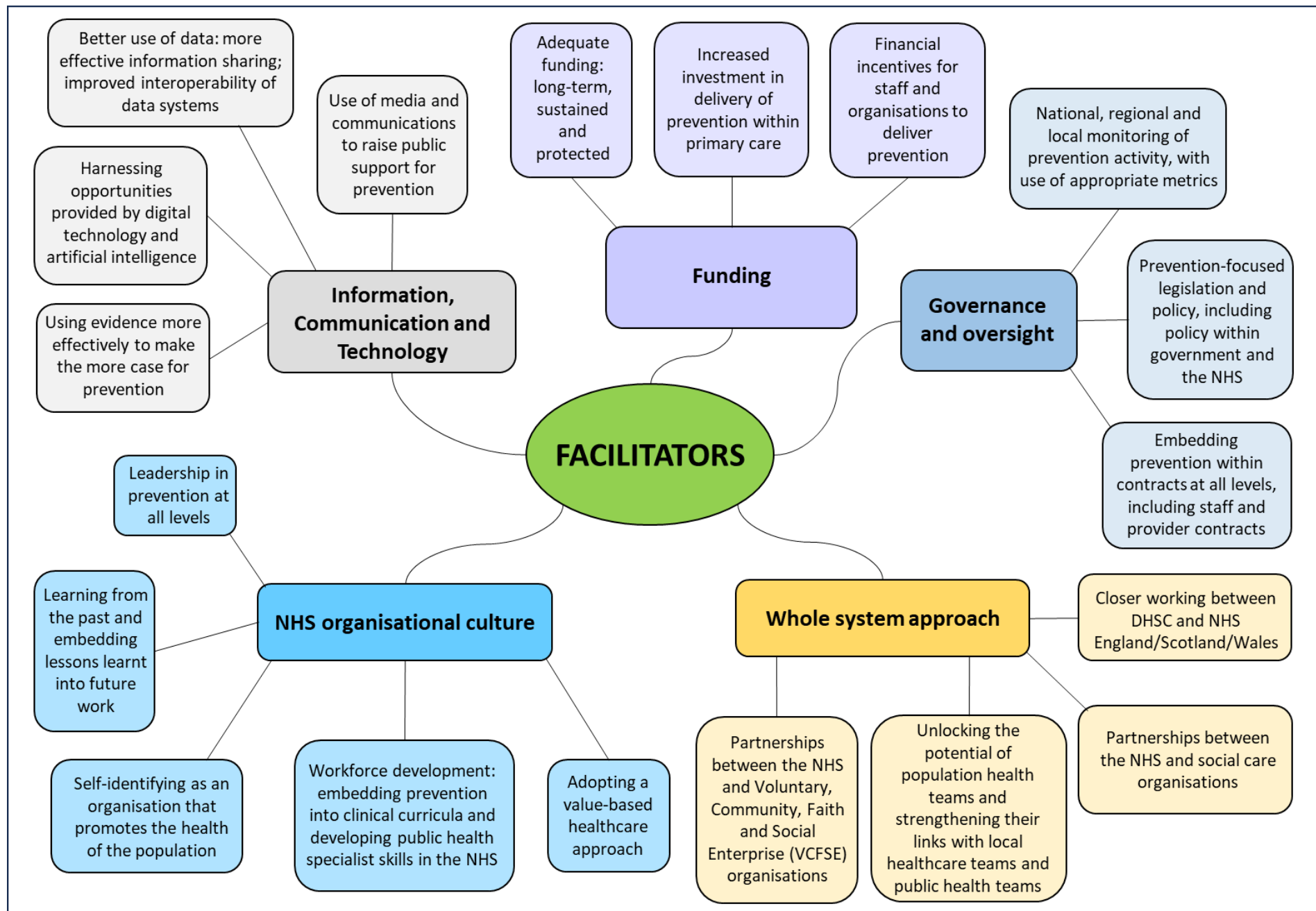


Figure 2. Factors to facilitate embedding prevention within the NHS

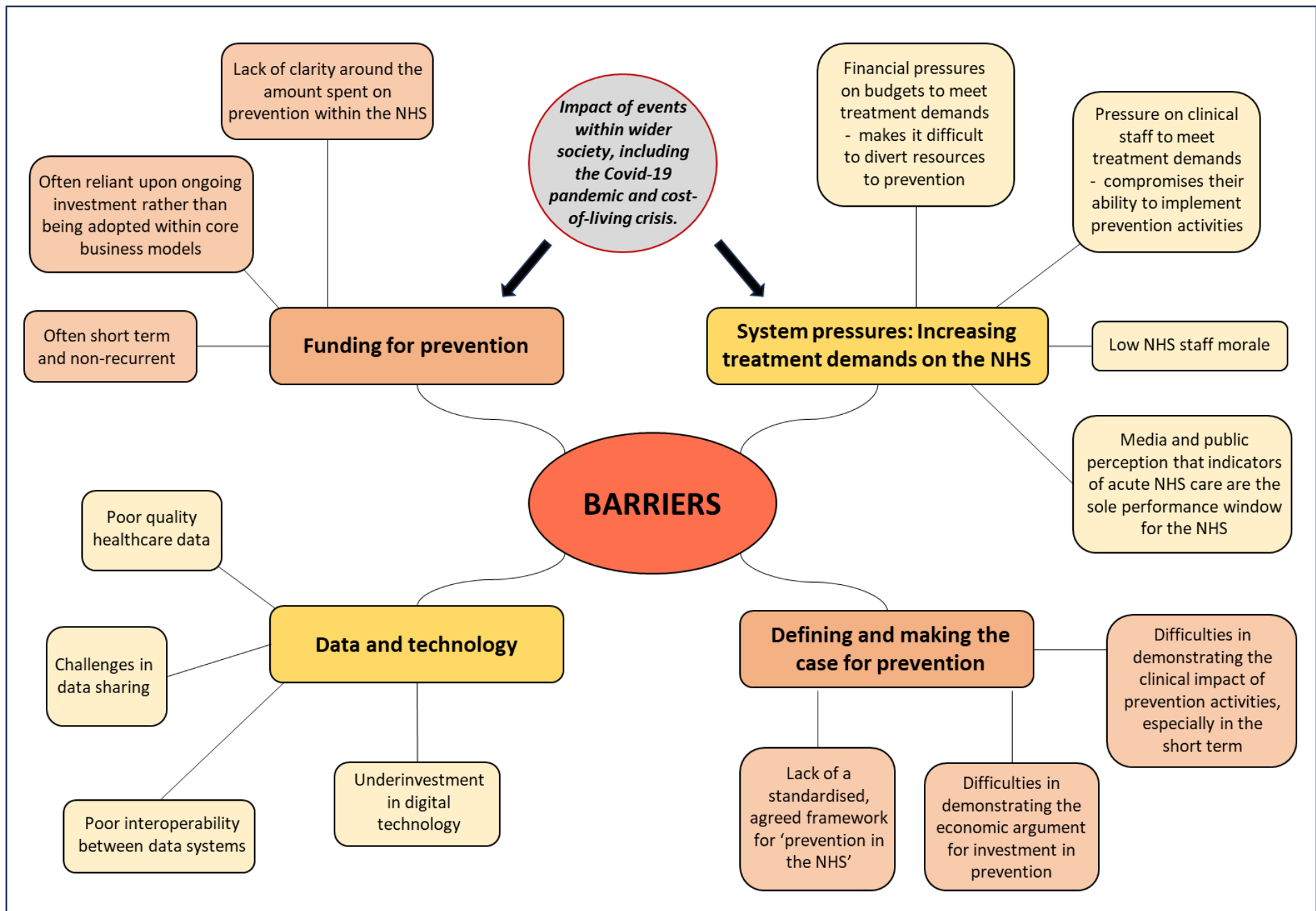


Figure 3. Barriers to embedding prevention within the NHS