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Response from the Royal Pharmaceutical Society to: A consultation to collect views about whether a Public Health Bill is need in Wales

The Welsh Pharmacy Board of The Royal Pharmaceutical Society would like to take this opportunity to submit general comments to the above named consultation by Welsh Government.

The Royal Pharmaceutical Society (RPS) is the professional body for every pharmacist in Great Britain. We are the only body that represents all sectors of pharmacy in Great Britain.

The RPS leads and supports the development of the pharmacy profession within the context of the public benefit. This includes the advancement of science, practice, education and knowledge in pharmacy. In addition, it promotes the profession's policies and views to a range of external stakeholders in a number of different forums.

Its functions and services include:

Leadership, representation and advocacy: promoting the status of the pharmacy profession and ensuring that pharmacy's voice is heard by governments, the media and the public.

Professional development, education and support: helping pharmacists to advance their careers through professional advancement, career advice and guidance on good practice.

Professional networking and publications: creating a series of communication channels to enable pharmacists to discuss areas of common interest.

General comments

Public health improvements, prevention of ill health, maintenance of best health and delivery of pharmaceutical public health measures are all themes and initiatives the Royal Pharmaceutical Society champion. In principle therefore we actively support the Welsh Government's agenda of improving health outcomes by placing a significant emphasis on illness prevention. However at this stage, without more detailed outcomes and aims of the Public Health Bill, we are not in a position to judge if legislation is fundamentally needed to achieve these objectives.

We believe that legislation can be a very powerful option for Government to change behaviour in society but it must be used in balance with the enforcement requirements to achieve those outcomes.

Improving Public Health outcomes requires a cultural change in attitude and thinking by the population of Wales and service providers. This is a massive and long term task requiring negotiation and persuasion. We therefore have doubts if legislation will create the conditions and environment to achieve the cultural shift needed and may even damage progress by imposing and enforcing values and behaviours that are not embedded within the lifestyle choices of Civic Society.

The aim of placing statutory duties on bodies to consider public health issues is laudable, but on balance we believe it will be difficult to enforce.

CQ1: If the Welsh Government were to introduce a health of the people Bill, what do you consider the most important and appropriate areas for further consideration to be?

The successful implementation of a public Health Bill will require a new approach to partnership working. It will require the instillation of an ethos of co operation across organisations, departments, geographical boundaries and all levels of social, health and public services. Priority must be given to how this Bill would be adopted and a feasibility assessment undertaken to ensure this legislation can achieve its ends of reducing health inequalities without causing unnecessary bureaucratic burdens for organisations.

CQ 2: In what ways do you think that making consideration of the impact of policies on health a mandatory legal requirement would be an effective way of meeting our main health challenges?

It is uncertain whether it is a legislative matter to require organisations to "consider" the impact of health when making policy decisions. While this would demonstrate government intent it is unclear how this would be achieved and monitored in practice. We believe that cultural change will be needed among organisations if they are to consider health impacts in all policies they develop. This may be more realistically achieved through central guidance as opposed to national legislation.

CQ 3: If we were to explore placing a statutory duty on bodies to consider health when developing new policies, which bodies should such a duty apply to?

We believe that a Public Health Bill will only be effective if undertaken and coordinated across micro (local), meso (structural), and macro (national) levels. This would be very difficult to achieve under the current proposals for the Public Health Bill as contained in the Green Paper as the proposals are high level and ambiguous. Achieving specific public health outcomes could only be achieved through legislation if it was focused, bespoke to a particular public health concern and outlined which organisations would be responsible for adhering to and enforcing the legislation. The 2007 regulations to ban smoking in public places is a good example of this.

CQ 4: Do you think it would be reasonable to limit any legislative requirements to 'major' policies, which would need to be defined by a new Bill?

This would seem reasonable and less ambiguous for the reasons made in response to Q3.

CQ5: In what ways do you think that using legislation to make Health Impact Assessment a mandatory requirement would be an effective way of ensuring that the impact of policies on health is assessed in a consistent and effective way in Wales?

We are cautious of introducing a Health Impact Assessment as the singular solution to monitoring the impact of legislation. Specifically we are concerned that historically such assessments have tended to become routine exercises and the true policy intent can be lost in the bureaucracy of form filling.

CQ6: If we were to consider making Health Impact Assessment a mandatory requirement, which bodies do you think should be required to use it and in what circumstances?

As per Q3 response

CQ 7: Do you think a new Bill could provide an effective platform for reducing health inequalities in Wales, and if so how?

It is unclear at this stage whether a Public Health Bill could provide an effective platform for reducing health inequalities. Further detail on how the Bill would aim to change organisational behaviour and

secure effective joint working would be needed before any assessment could be made in this respect. We believe that alternative methods to reducing health inequalities, utilising and building on current organisational structures, statutory instruments and legislation should be explored before embarking on full scale legislative

CQ 8: In what ways do you think a new Bill could be an effective way of promoting the importance of preventative action to overall health and wellbeing in Wales?

We are unsure that legislation is needed to promote the importance of prevention and the impact such legislation would have in this area.

We are supportive of the message of healthy living and health promotion but believe more consideration should be given to incorporating these ideals within existing policies and legislation and not to separate them out into an additional and separate piece of legislation.

CQ 9: How do you think an increased focus on empowering local people to influence their health and wellbeing would best be achieved through legislation?

We are very supportive of the recognition that health improvements are achieved at a local level. However this is usually achieved by enabling local implementation and adaption of national strategies and policies.

The example cited in the consultation of the Bill to “develop good health literacy among the population” is something we would welcome and have actively campaigned for. However it requires resources and support from all levels of policy to be achieved. Additionally it cannot be considered or delivered in isolation but is something that should be built into existing policies and continually developed by all relevant organisations.

Improved health literacy requires a shift in emphasis and culture from a paternal cultural to a culture where individuals can take responsibility for their own health and take autonomous decisions. This does not fit well with the legislative approach suggested by the introduction of a Public Health Bill.

CQ 10: Do you think it is preferable for us to progress our efforts to improve the health of people in Wales in a way other than introducing a new Bill? If so, why?

On balance we do not believe the introduction of a Public Health Bill, with such broad ambitions is the preferred tool to achieve the desired outcomes of improving the health of the people in Wales. There are currently a number of avenues available to Welsh policy makers to set the strategic direction for public health. These can be supported by bespoke pieces of legislation that deliver focused outcomes. In developing more focused legislation such as the *Smoke Free Premises Etc (Wales) Regulations (2007)*, more thought and consideration can be given to the feasibility of the legislation and more engagement can be achieved with the Welsh population in the cultural change needed for local buy-in into the legislative change.

CQ 11: If you think we should do something different to introducing a new Bill, what do you think would be a more effective approach?

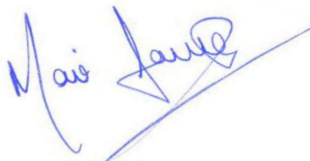
As per Q10

CQ 12: Please let us have any further comments you wish to make about the issues raised in this Green Paper.

As the professional leadership Body for Pharmacy we have considered the need for a Public Health Bill in respect to the patient safety and the delivery of safe effective pharmaceutical care to the Welsh population. We have also considered the role of pharmacy in delivering public health messages, and our role in the prevention of ill health. We are cognate that the Public Health Bill, if enacted, will require a greater partnership approach and some structural changes and would recommend that pharmacy and pharmaceutical care is considered as a key partnership at local level to deliver on this agenda.

The WPB would be happy to elaborate on any comments made in this response

Yours sincerely

A handwritten signature in blue ink that reads "Mair Davies". The signature is written in a cursive style and is positioned above a horizontal line.

Mair Davies, Chair Welsh Pharmacy Board