

The Role of GPs in integrating and health and social care systems in London.

Historically health and social care services have been funded and organised as separate public services and seen to be serving different needs. If you are ill you go to the GP or emergency department; if you have problems with housing, unemployment or the environment then you go to the town hall or the job centre.

Michael Marmot's ground-breaking work "Fair Society Healthy Lives" in 2010 outlined six policy objectives that would reduce health inequalities:

1. Give every child the best start in life
2. Enable all children, young people and adults to maximise their capabilities and have control over their lives
3. Create fair employment and good work for all
4. Ensure healthy standard of living for all
5. Create and develop healthy and sustainable places and communities
6. Strengthen the role and impact of ill-health prevention.

Policies 1-5 focus on people's social circumstances, the environment and employment; only policy number 6 focuses directly on health interventions and even then it is a focus on preventative measures.

In 2020 Michael Marmot published Health Equity in England: the Marmot Review 10 years on and noted that since 2010 improvements in life expectancy had stalled or reversed. Marmot concluded that:

"The increase in health inequalities in England points to social and economic conditions, many of which have shown increased inequalities, or deterioration since 2010"

In separating health and social care services we implicitly treat patient's (citizen's...?) as a collection of health and social issues that can be treated in isolation. The GP sees their patient as a diabetic, whilst the job centre sees the same person as needing a job; neither considers the relationship between the person's social circumstances and their health.

The NHS Long Term Plan published in 2019 prioritises re-designing health care services to ensure that patients are treated in the most appropriate setting and a renewed focus on health prevention measures. Further it is expected that the NHS and Local Authorities will work closely together on education, housing and social care priorities through what are called Integrated Care Systems (ICSs).

Integrated care implies putting the patient at the centre of service design and provision and ensuring that care is personalised, preventive and mindful of the social determinants of a patient's health condition.

General Practitioners working in Primary Care Networks will be at the centre of the integrated care system and leading on improving the 'whole person' health of a local population, with a greater understanding of mental health, the benefits of social prescribing, personalised care, medicines management and how to age well than ever before.

<http://www.instituteofhealthequity.org/resources-reports/fair-society-healthy-lives-the-marmot-review>

https://www.health.org.uk/sites/default/files/2020-03/Health%20Equity%20in%20England_The%20Marmot%20Review%2010%20Years%20On_executive%20summary_web.pdf

<https://www.longtermplan.nhs.uk/online-version/>

<https://www.longtermplan.nhs.uk/areas-of-work/primary-care/>