Health Profiles Q&A

Q: What is special about the Health Profiles?

A: This is the first time that Health Profiles have been produced for all local authority areas in England. There is a profile for every County Council, District Council, Unitary Authority and London Borough in England – 387 in all.

Q: Why do the profiles have "prototype" written across the bottom of the page? Are they not correct?

A: The final format for the profiles has not yet been decided on with the Department of Health and so we are calling these "prototypes". However, it is important that the information within the profiles can be used as soon as possible so that plans can be made locally to further improve health and reduce health inequalities. We don't expect that the data will change between the prototype and the final version. All the information has been through rigorous checking and we are confident as we can be that the information is accurate.

Q: How do Health Profiles differ from local health reports?

A: Local statutory agencies (councils and primary care trusts) have a duty to produce a number of regular reports, including Director of Public Health annual reports and council community plans. The Health Profiles are designed to help in the production of these reports and not to replace them. In particular, Health Profiles enable direct comparison with other areas. This has not always been easy to do with other reports.

Q: How did you choose the indicators? Why are there gaps?

A: We included an indicator if it met the following criteria:

- It has an important effect on the health of the local population
- It can support local government and NHS management processes
- It is valid. This means that it measures what it tries to measure
- It is primarily based on existing indicators which are consistently available for every council in England
- It is primarily available at Local Authority level. These include County Councils, District Councils, Unitary authorities and London Boroughs
- It is possible to make meaningful comparisons over time and between places or people
- It can be communicated easily to a wide audience.

Q: Why are there gaps?

Where there are gaps, that is because the indicator is important to describing

the health of the population but the data are currently not available for all local authority areas in England.

Q: What is the point of highlighting a local problem? Will this not just create concern among the public locally rather than actually solving it?

A: It is only by identifying areas of concern that action can be taken. Local authorities and primary care trusts have a statutory duty to improve the health and wellbeing of the local population. With information like that in the profiles we can all see where there are areas of concern and then take action to improve the health of local communities.

Q: Will these lead to the publication of league tables showing how each area compares with others and year on year changes?

A: Profiles will be updated every year and will be able to show changes in the local position. They have not been designed to produce league tables.

Q: Are the complete set of Profiles available on a website for comparison purposes?

A: Yes, www.communityhealthprofiles.info

Q: What about the picture nationally?

A: A National Profile of Health and Wellbeing in England will also be available – at www.dh.gov.uk – from late summer 2006.

Q: Will we be able to look at the data behind these indicators and profiles?

A: At present only the completed profiles are available. It is planned that data and further information will be available for local use before the end of 2006.

Q: How do these Profiles compare with similar reports produced by other organisations such as the Audit Commission?

A: The Health Profiles were commissioned by the Department of Health and are a valuable tool for planning action to improve health and reduce health inequalities. They can be used together with local information and other indicator sets and reports to identify where action needs to be taken to improve health and where improvement is already happening.

Q: What action do you expect local authorities to take to deal with any problems highlighted by the profiles?

A: Local authorities have a statutory duty to improve the wellbeing of local people and scrutinise local health services.

All local authorities have a community plan which outlines the action that they

are taking to improve conditions in their local area. Health Profiles will inform local community plans. Local Area Agreements (LAA's) are currently being put in place across local authorities in England and the profiles should help to develop and monitor these agreements. (LAA's are voluntary, three-year agreements between central government, local authorities and their partners. They aim to deliver national outcomes in a way that reflects local priorities.)

Q: What support is available from the Government to help us take action?

A: As part of delivering the Department of Health's White Paper Choosing Health, monies were made available to improve health and reduce health inequalities. The profiles can help prioritise the best use of those resources.

Q: What sort of feedback are you looking for?

A: We would be delighted to get feedback on the content and format of the profiles as well as how they have been used to support local action. Feedback can be submitted via the website www.communityhealthprofiles.info.

Q. What is Small Change Big Difference?

The Small change, big difference initiative encourages people to make small changes in their lifestyles to give them a better chance of living longer, healthier lives.

The objective of the initiative is to encourage people to take a step towards achieving the recommended healthy eating and physical activity targets, by highlighting the fact that a small but sustained change in lifestyle – taking moderate exercise and eating one extra portion of fruit or serving of vegetables every day – can make a significant difference to life expectancy. Lifestyle change does not have to be an all or nothing exercise. Every step towards achieving the recommended targets counts.

The initiaitve was launched on the 25 April 2006 by the Prime Minister Tony Blair with Secretary of State Patricia Hewitt.

For more information visit www.dh.gov.uk/smallchange

Q. How do health profiles link to Small Change Big Difference?

Health profiles will be a way of identifying the priority areas to start the 'Small Change Big Difference' local campaigns, as they will usefully pinpoint what needs to change in different areas to improve local health.

As a key next step in the Small Change Big Difference initiative, we will be producing a series of popular and accessible community health profiles in the Autumn. These will be based on the factual information in the current Health Profiles but will also provide local health knowledge, advice and resources. They will enable local communities to see their own particular health problems

and, with government support, marshal local people, businesses and employers to help them make a difference to people's lifestyles. We will organise local seminars to initiate local action and will seek active cross government involvement and support in suggesting participants and ideas for action.