Next day briefing: Levelling Up White Paper

Introduction:

The Department for Levelling Up, Housing and Communities published its White Paper, *Levelling Up the United Kingdom*, setting out how the government intends to spread opportunity more equally across the UK. It provides an economic analysis of the drivers of geographical disparities across the UK and sets out the policy reforms intended to level up ‘left behind’ regions of the UK. It sets out medium-term ‘missions’ to be achieved collaboratively across government and key stakeholders at a national and local level.

This briefing summarises key elements of the white paper relating to health as well as NHS Providers’ initial analysis of the proposals most relevant to trusts and wider health and social care partners.

Key points:

- The paper describes the economic and social geography of the UK, outlines how geographical disparities vary across the country, and explores some of the current and future drivers of these disparities, such as productivity, pay, educational attainment and health. The paper identifies the need for a focused, long-term plan of action and a clear framework to identify and act upon the drivers of disparity.

- To further progress work on health disparities specifically, a health disparities white paper will be published in 2022 by DHSC setting out a strategy to tackle the core drivers of health inequalities with a strong focus on prevention and disparities by ethnicity, socioeconomic background and geography. It will contain proposals for place-based solutions to health inequalities, and DHSC will also work across government to consider health disparities through the lens of the wider determinants of health, behavioural factors and access to health services.

- Existing health initiatives, including the new hospitals programme, social prescribing, and “Core20PLUS5” approach to tackling health inequalities in the NHS, are recontextualised in the paper to demonstrate their role in supporting the levelling up ambitions.

- The paper outlines the need for a new policy regime, based around five “pillars”: 1) the UK government is setting clear medium-term missions to provide clarity and consistency over levelling up policies, 2) central government decision making will be reorientated to align policies with the levelling up agenda, 3) the UK government will empower decision-makers in
local areas, 4) it will also transform its approach to data and evaluation to improve local decision making, 5) and a new council will be created to oversee the missions.

- The paper sets out the UK government’s 12 medium-term levelling up missions, including a mission to narrow the gap in healthy life expectancy by 2030. These cover areas including boosting pay, jobs and living standards, spreading opportunity and improving public services, restoring a sense of community where it is most needed, and empowering local leaders and communities.
- The paper sets out a series of specific interventions designed to deliver the 12 missions. This includes improving the collection of data on how public research and development funding is spent, identifying the need for investment to improve public transport connectivity, acknowledging the link between the transition to net zero and levelling up, enabling local leaders to regenerate communities and local areas such as towns, and empower them to develop local solutions through an expansion of devolution.

Summary of the White Paper:

Chapter 1: The UK’s Geographical Disparities: Drivers and Potential Policy Approaches

The paper describes the economic and social geography of the United Kingdom and outlines how geographical disparities vary across the country through multiple economic measures such as productivity, pay, educational attainment and health.

It highlights research which indicates that the UK is one of the most geographically unequal countries among the OECD. It points to some health-related statistics, such as the gap in healthy life expectancy between local authorities across the UK. It also explores the positive correlation between metrics such as life expectancy, productivity, disposable income, education, broadband access, and employment.

The paper also explores the drivers of these geographical disparities. It acknowledges that while the dynamics of the global economy have benefited the UK overall, such as improving productivity, increasing wealth and driving up living standards over the past century, this has not been universal. For example, while London and much of the south east have benefited economically, former industrial centres and many coastal communities have suffered, including the health and wellbeing of people and communities within these areas.

It identifies six “capitals” for levelling up alongside the need for a focused, long-term plan of action and a clear framework to identify and act upon the drivers of regional disparities. These include:
• Physical capital – infrastructure, machines and housing.
• Human capital – the skills, health and experience of the workforce.
• Intangible capital – innovation, ideas and patents.
• Financial capital – resources supporting the financing of companies.
• Social capital – the strength of communities, relationships and trust.
• Institutional capital – local leadership, capacity and capability.

Drawing from international experience on local growth policies, the paper makes the case for a clear and shared vision among key stakeholders. It sets out the need for policies to be long-term and consistent, and supported by collaboration between governments and other stakeholders, including anchor institutions.

Chapter 2: Systems Reform

The paper proposes a new policy regime to reverse embedded historical trends to tackle geographical disparities, including an intention to put power in local hands through increased devolution. Its new policy regime is based on five pillars which the government intends to be ‘mutually reinforcing’:

1. The UK government is setting medium-term missions with the aim of providing consistency and clarity over levelling up policy objectives. The paper describes these missions as rolling decade-long endeavours that will be reviewed periodically by the UK government.

The government’s 12 levelling up missions, set out within four broader focus areas, are:

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<th>Focus Area</th>
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<td>Boost productivity, pay, jobs and living standards</td>
<td><strong>Living standards:</strong> By 2030, pay, employment and productivity will have risen in every area of the UK, with each containing a globally competitive city, and the gap between the top performing and other areas closing.</td>
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<td>by growing the private sector, especially in places lagging behind.</td>
<td><strong>Research and development:</strong> By 2030, domestic public investment in R&amp;D outside the greater south east will increase by at least 40%, and over the spending review period by at least one third. This additional government funding will seek to leverage at least twice as much private sector investment over the long term to stimulate innovation and productivity growth.</td>
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<td><strong>Transport infrastructure:</strong> By 2030, local public transport connectivity across the country will be significantly closer to the standards of London, with improved services, simpler fares and integrated ticketing.</td>
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<td><strong>Digital connectivity:</strong> By 2030, the UK will have nationwide gigabit-capable broadband and 4G coverage, with 5G coverage for the majority of the population.</td>
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| Spread opportunity and improve public services, especially in places where they are weakest. |
| Education: By 2030, the number of primary school children achieving the expected standard in reading, writing and maths will have significantly increased. In England, this will mean 90% of children will achieve the expected standard, and the percentage of children meeting the expected standard in the worst performing areas will have increased by over a third. |
| Skills: By 2030, the number of people successfully completing high-quality skills training will have significantly increased in every area of the UK. In England, this will lead to 200,000 more people successfully completing high-quality skills training annually, driven by 80,000 more people completing courses in the lowest skilled areas. |

| Health: By 2030, the gap in healthy life expectancy (HLE) between local areas where it is highest and lowest will have narrowed, and by 2035 HLE will rise by five years. |
| Wellbeing: By 2030, wellbeing will have improved in every area of the UK, with the gap between top performing and other areas closing. |

| Restore a sense of community, local pride, belonging, especially in places where they have been lost. |
| Pride in place: By 2030, pride in place, such as people's satisfaction with their town centre and engagement in local culture and community, will have risen in every area of the UK, with the gap between top performing and other areas closing. |
| Housing: By 2030, renters will have a secure path to ownership with the number of first-time buyers increasing in all areas; and the government's ambition is for the number of non-decent rented homes to have fallen by 50%, with the biggest improvements in the lowest performing areas. |

| Crime: By 2030, homicide, serious violence and neighbourhood crime will have fallen, focused on the worst affected areas. |
Empower local leaders and communities, especially in places lacking local agency.  

Local leadership: By 2030, every part of England that wants one will have a devolution deal with powers at or approaching the highest level of devolution and a simplified, long-term funding settlement.

2. Central government decision-making will be “fundamentally reoriented” to align policies with the levelling up agenda and hardwire regional considerations across Whitehall. The paper sets out an intention for greater transparency around the geographic allocation of funding and simplification of local growth funding. This will also mean running levelling up through central government decision-making as a golden thread for which departments are held accountable.

3. UK government will empower decision-makers in local areas. It intends to provide ongoing support to existing pan-regional partnerships like the Northern Powerhouse and Midlands Engine, and local private sector initiatives.

4. The UK government will transform its approach to data and evaluation to improve local decision making. The Office for National Statistics’ subnational data strategy aims to improve the UK’s subnational data, mapping local economic geographies and helping improve transparency and accountability to the public. The UK Government will provide interactive tools and maps, as well as encourage innovative uses of real-time data at the local level.

5. The UK government will create a new regime to oversee its levelling up missions. It will establish a statutory duty to publish an annual report analysing progress and a new external levelling up advisory council. The council will support and advise ministers on the design, delivery and impact of levelling up policy.

Chapter 3: The Policy Programme

The paper sets out a series of specific interventions designed to deliver the 12 missions described in chapter 2, and describes how the government will work with local leaders and the private sector to deliver initiatives to support a high wage, high skill economy. It also sets out ambitions to improve public transport connectivity, acknowledging the link between transport and health outcomes, quality of life, and local pride. The white paper describes additional funding available for transport upgrades with investment in either city regions, supported by increased devolution of responsibility for local transport.
A number of other proposals link to health and health and social care systems more directly, as summarised below.

**Narrowing the gap in healthy life expectancy**

The white paper sets an ambition to tackle the stark disparities in health outcomes across the UK, with an overarching goal of reducing the gap in healthy life expectancy by 2030, and increasing healthy life expectancy overall by 5 years by 2035. It describes how people living in the most deprived communities in England have up to 18 years less healthy life expectancy than the least deprived stating this is driven by a variety of factors including smoking, alcohol intake and poor diet, quality of housing and access to healthier food, and quality of health services locally.

The white paper describes a number of existing initiatives in health and social care in relation to their contribution to levelling up. However, a health disparities white paper will be published in 2022 by DHSC setting out a strategy to tackle the core drivers of health inequalities with a strong focus on prevention and disparities by ethnicity, socioeconomic background and geography. This white paper will take lessons from the pandemic response about how best to mobilise communities and ensure that business plays a part in improving health, and will contain proposals for place-based solutions to health inequalities. DHSC will also work across government to consider health disparities through the lens of the wider determinants of health, behavioural factors and access to health services.

A range of initiatives are described in the paper across the NHS and public health, the majority of which have been previously announced:

- The New Hospitals Programme is described as ‘an ambitious programme of hospital building upgrades’, supported by investment in the NHS as set out in the 2021 Spending Review.
- NHS England is taking forward the Core20PLUS5 initiative to improve clinical outcomes across 5 key areas (cardiovascular disease, cancer, respiratory, maternity and mental health) in the poorest 20% of the population alongside other inclusion health groups.
- The commitment to rolling out social prescribing as set out in the NHS Long Term Plan is reiterated, with an additional £5.77m cross-government funding to prevent and tackle mental ill-health through green social prescribing.
- The establishment of ‘at least 100’ community diagnostic centres in England, based outside of London and the south east to boost diagnostic capacity including imaging, cardio-respiratory, pathology and endoscopy services to improve early diagnosis and quality of life.
• The white paper also sets out a focus on behavioural factors in health outcomes, reiterating proposals on obesity, smoking and incentivising physical activity, such as launching and testing a new programme rewarding participants for improving physical activity and diet. The government is also considering the future of the NHS health check programme.

Research and development and innovation

The paper describes an ambition to improve the collection of data on how public R&D funding is spent, and the government will use this data to set specific R&D targets for regional spending for the Department of Health and Social Care (DHSC), alongside other departments, to increase spending on health innovation outside of London and the greater south east. To support this, the paper makes several commitments:

• DHSC will commit that the new contractual period for NIHR biomedical research centres see increased levels of investment outside London, Oxford and Cambridge, with £30m of additional funding over five years going to NHS-university partnerships.
• DHSC will review the NIHR clinical research network funding formula to enhance levels of funding outside the greater south east, supporting more studies and patient recruitment in underserved communities; and
• DHSC will commit that the new contractual period for NIHR clinical research facilities will see at least 50% of the funding going to NHS organisations outside London, Oxford and Cambridge (an increase of 5%).

Spreading opportunity and improving public services

The white paper describes a series of interventions to support the achievement of its overarching mission on wellbeing, in recognition of the role quality of life and wellbeing, including physical and mental health, plays in levelling up. These interventions include proposals to expand school academy trusts to eliminate illiteracy and innumeracy among school leavers, locally led employment and training programmes including for disabled people and people with health conditions, which includes expanding employment support in NHS IAPT services.

Net zero

The white paper draws a link between net zero and the levelling up agenda, and describes how the net zero transition will have an impact on the UK’s economic geography, with emissions regionally
concentrated in areas with the lowest productivity. The government reiterates how its ‘ten point plan for a green industrial revolution’ and its net zero strategy will create jobs and stimulate investment, with a particular focus on energy, but also green public transport and decarbonising buildings to deliver greener and healthier homes and workplaces.

**Communities and places**

The white paper contains a raft of proposals which seek to enable local leaders to regenerate town centres, improve conditions for renters and increase home ownership, and expand access to green spaces. This includes a number of pots of money aimed at investment in housing, proposals to work with 20 places in England to invest in town centres and local facilities – including health facilities – and enhance urban green spaces. The white paper also proposes a number of interventions to improve opportunities for young people in the most deprived areas of England, including youth provision and volunteering schemes.

**Devolution**

The white paper sets out an ambition to empower local leaders to develop local solutions to the problems their communities face, through an expansion of devolution and a target of every part of England that wants a devolution deal having one by 2030. The government intends to offer devolution deals to all areas across England, deepen devolution by inviting existing deals to bid for further powers, and create a new devolution framework to simplify the landscape. It will seek to support this with more private-sector partnerships, local growth funds, and reforms to how local government funding is allocated and spent, strengthening local decision making.

**Chapter 4: Next Steps**

This chapter sets out the government’s next steps to implement proposals in the white paper. This will include:

- A process of engagement and informal consultation, including ministerial visits across the UK, local sounding boards on levelling up delivery and implementation, and annual reporting on progress against the twelve levelling up missions.
- Engagement with wider stakeholders on a range of issues including setting and delivering missions and metrics, developing the devolution framework, the setting up of a new body on local government data.
- Future legislation to support the levelling up missions, including an obligation for the government to publish an annual report on delivery against the levelling up missions, and strengthening devolution legislation.

NHS Providers view

This white paper is a welcome first step in recognising the interrelated nature of the socioeconomic and health inequalities people across the UK face. The proposals are underpinned by an analysis of the drivers of regional inequality and make a clear case for change.

Regional inequalities, for example in wealth, education, and housing demonstrate how social and economic inequalities are powerful drivers of people’s health. Health inequalities are a priority focus for trusts, and is helpful that these ‘spatial disparities’ are recognised in the white paper, underpinned by a commitment to improving cross-government measurement and understanding of these disparities.

However, we are disappointed to see that the announcements on health are limited to individual behaviour and healthy lifestyles. This fails to recognise the deeply entrenched and complex factors influencing poor health and obesity. We appreciate that a further white paper on tackling disparities in health is due in coming months, however this is arguably a missed opportunity to set out how the NHS, far from simply being a treatment service, has a key role to play in contributing to better socioeconomic outcomes in all regions of the country.

The COVID-19 pandemic has exacerbated many of the inequalities that underserved and deprived communities were already facing. There is now a clear opportunity to address the link between health and wealth, the impact of housing conditions, local places, employment opportunities and educational outcomes on people’s long-term health outcomes, as well as the impact of people’s health on their life opportunities.

The paper reiterates previously announced schemes, such as the commitment to build 40 new hospitals by 2030. If they are delivered, they will be key anchor institutions for local communities, and the completion of these rebuilds will bring huge benefit to local economies. It is important that trusts are given the opportunity to share their experiences, skills and knowledge to make this programme a success, and that the government does all it can to help trusts progress with their plans as quickly as possible.
However, while investment in healthcare facilities is critical, as one of the largest employers in the country, trusts also have a wider role to play in levelling up, for example in providing opportunities for employment and training, contributing to environmental sustainability, and in how they procure goods and services. As it now consults on this white paper, it will be essential that the government engages closely with trusts and the wider health and social care sector, as they will play a significant role in delivering on the most critical levelling up missions. As the largest employer in the country, the NHS’s role in supporting their communities and creating opportunities for good work, should not be forgotten.

It is surprising, considering the focus on places and communities, that the white paper does not mention integrated care systems (ICSs), which have been developing for several years, and are tasked with improving health outcomes, tackling health inequalities and supporting the broader social and economic development of their local areas. While it is welcome to see the government clearly articulating an aspiration to drive up healthy life expectancy and reduce inequalities, there is a need to align these ambitions further. Further detail in the forthcoming health disparities white paper will be needed to turn the government’s 2030 aspirations into goals which could be realistically delivered, as infrastructure projects, such as investment in transport and high streets, will not tackle health inequalities on their own.

The extension of devolution to local areas fits with the ethos of system working within health and care services. However, this will need to be implemented in a way that allows local flexibility and supports a coherent interface with integrated care systems. In addition, NHS and local authority partners have been designing how they will work together in statutory ICSs, including in some areas building on the work done by health and wellbeing boards (HWBs) and other place-based arrangements to tackle health inequalities and promote wellbeing. Any potential disruption to current ways of working risks slowing rather than accelerating progress, so local flexibility is key.

Public health services (such as health visiting, smoking cessation etc) play a key role in tackling health inequalities, and community providers often lead in providing key public health services through NHS community health service contracts commissioned by local authorities. However, analysis by the Health Foundation (October 2021) suggests that the public health grant has been cut by 24% in real terms per capita since 2015/16, and that the cut falls most heavily in the most deprived areas of England. This means that the document’s commitment to ‘maintaining the public health grant in real terms over the SR21 period’ is insufficient in addressing the scale of the challenge. Without committing any additional funding to support the provision of public health services, the ambitions
outlined in the levelling up white paper around reducing the gap in health life expectancy will be difficult to deliver.