

**Daffodil International University**

**Report**: White Paper on Healthy life

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**Introduction:**

Transportation impacts more than just how Americans get from place to place. It influences physical activity, accessibility to goods and services, air pollution, greenhouse gases, stress levels, family budgets, and our amount of leisure time, as well as a host of other lifestyle and health variables ... While transportation may not immediately be thought of as a key determinant of health, transportation policies and accompanying land use patterns have far-reaching implications for our risk of disease and injury"1 - Robert Wood Johnson Foundation's Center to Prevent Childhood Obesity Working Group is the San Diego Association of Governments (SANDAG) develops regional policies and programs to guide transportation infrastructure investments over the next three decades, an understanding of the public health benefits and impacts of those decisions will support the agency's efforts to create a safe, viable, and efficient transportation system for the San Diego region. The investments, in turn, should support improved public health outcomes.

According to the World Health Organization, health is a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity. Emphasizing the health benefits derived by improved mobility and access can better realize this comprehensive notion of health.

**Occupational health:**

The RCN has urged the NHS to go further and faster in the implementation of the Boorman Review.

Reducing working-age ill health has the potential to save the UK up to £100 billion a year, around the size of the entire annual NHS budget15. Occupational health services need to be adequately resourced to ensurethat they are implementing proactive measures and not simply engaged in attendance management and reactive services. There needs to be greater funding and commitment for occupational health nurses to be engaged in research to ensure that interventions are evidence based.

The RCN supports all efforts to promote aging well. The RCN is pleased to read that the Public Health White Paper refers to the crucial role that district nursing teams can play in supporting older people to live well inthe community. District nurses also play a crucial role in the prevention of excess winter deaths amongst the older population.

**Health quality assurance:**

The RCN supports government action aimed at reducing tobacco use. We understand that tobacco companies are currently requesting a judicial review of legislation enacted by the previous government banning tobacco vending machines35. There has also been speculation that the government may be considering reversing earlier legislation to ban tobacco display advertising, as part of the drive to reduce the burden of regulation36. The RCN is concerned about the possibility of any rolling back of these reformsand that the scale of harm caused by smoking justifies regulation by government to reduce the visibility and availability of cigarettes.

Following the government’s recent launch of the Public Health Responsibility Deal, in partnership with business and the voluntary sector, five networks have been established on:

● food

● alcohol

● physical activity

● health at work

● behaviour change.

**Midwifery and maternity care:**

It is well known that the health and wellbeing of women before, during and after pregnancy is a critical factor in giving children a healthy start in life and laying the groundwork for good health and wellbeing in later life. Whilst there has been substantial progress in reducing infant deaths, it is noted that rates are higher than in the UK than comparable European countries. Midwives play a crucial role in improving health and reducing health inequalities as they work with women throughout the pregnancy and after birth. They have the opportunity to raise awareness of lifestyle factors for mothers themselves, their partners and children which can have a lifelong impact on the health and wellbeing of their family. 10

Midwives should have a greater role in public health to help reduce inequalities and improve the health of women and their families. 11 Well coordinated, intelligent commissioning is fundamental to achieving thelaudable aims and ambitions for improving services to improve health and welfare of mothers and their families .

**Mental health:**

The RCN agrees that many premature deaths and illnesses could be avoided by improving lifestyles, particularly stopping smoking, healthier eating, increased physical activity and reduction in alcohol consumption.The RCN agrees that the prevention of mental ill health also represents a huge opportunity for health improvement. People with mental ill health are much more likely to smoke and to die younger, and a large number of people with mental health problems also have alcohol or drug problems. It is difficult to envisage how mental health services can be engaged with this agenda when activity is targeted at the point at which individuals have become ill.

**Access to Healthcare Facilities:**

In a healthy community, residents have adequate transportation access to healthcare facilities. People need to be able to get to many places, including to the doctor, regardless of income or background.

The availability of medical services throughout the community, paired with a variety of transportation options to access those services, helps increase access to healthcare facilities. As the region's population continues to age, 69 the need for adequate transportation access to healthcare facilities will continue to grow. Many Metropolitan Planning Organizations, including SANDAG, work with Consolidated Transportation Service Agencies and other specialized transportation providers to coordinate transportation services for seniors and individuals with disabilities, and provide grants forspecialized transportation programs to expand mobility options for seniors and the disabled. These programs provide critical services that enhance access to healthcare facilities for our most vulnerable populations. 70 As part of its 2018 Coordinated Plan update, SANDAG is in the process of developing a long-term Specialized Transportation Strategic Plan to address the increasing specialized service needs of seniors and persons with disabilities. This plan was identified as a Near-Term Action for implementation in the 2015 Regional Plan.

**Healthy communities:**

The role of general practice nurses in managing long-term conditions, cytology, sexual and travel health, and vaccination and immunisation programmes make them key to meeting the health needs of localpopulations. We can anticipate that nurses working in general practice will, in the future, work closely with public health teams based in local authorities. Nurses working in custodial settings also make a significant contribution to public health. Assessing mental health, learning disabilities, drugs and alcohol abuse and poor physical health which may include smoking and blood borne viruses, using care delivery in collaboration with the police, is very much a public health agenda. This will have a combined health and social care impact as well as ultimately cutting imprisonment rates.

**Joint appointments of Directors of Public Health (DsPH):**

DsPH will be employed by local government in upper tier and unitary authorities and jointly appointed by the relevant local authority and PHE. DsPH will lead local public health efforts: this role can be shared with other councils if agreed locally. They will be professionally accountable to the Chief Medical Officer (CMO) and part of the Public Health England professional network.

DsPH tasks will include;

* promoting health and wellbeing within local government
* providing and using evidence relating to health and wellbeing
* advising and supporting GP consortia on the population aspects of NHS services
* developing an approach to improving health and wellbeing locally, including promoting equality and tackling health inequalities
* collaborating with local partners on improving health and wellbeing, including GP consortia, other local DsPH, local businesses and others.

**The outcomes framework:**

The public health outcomes framework “will sit alongside” the proposed NHS outcomes

framework and social care outcomes framework.

The proposed framework is likely to cover five broad ‘domains’ of public health:

Domain 1 – Health protection and resilience: protecting people from major health emergencies and serious harm to health;

Domain 2 – Tackling the wider determinants of ill health: addressing factors that affect health and wellbeing;

Domain 3 – Health improvement: positively promoting the adoption of ‘healthy’ lifestyles;

Domain 4 – Prevention of ill health: reducing the number of people living with preventable ill health; and

Domain 5 – Healthy life expectancy and preventable mortality: preventing people from dying prematurely.

**Health in All Policies:**

Health in All Policies was established by the Public Health Institute to incorporate health considerations into decision-making across sectors and policy areas. The Public Health Institute works with local governments to support the incorporation of a Health in All Policies approach through one-time consultations, trainings, and in-depth partnerships. In 2010, the California Department of Public Health and the Public Health Institute established the Health in All Policies Task Force, which brings together 22 departments, agencies, and offices from across California State Government to identify priority programs, policies, and strategies to improve the health of Californians.

**Public Health Elements for General Plans:**

A number of jurisdictions in the San Diego region have adopted public health elements as part of their general plan updates. These include the Cities of Chula Vista, Escondido, La Mesa, National City, San Marcos, and Vista. Encinitas and Lemon Grove currently are in the process of developing public health elements for their general plans.