Resolutions of the
Public Health Medicine Conference 2021
14 **MOTION by the Conference Agenda Committee:**
That this conference notes the establishment of the UK Health Security Agency (UKHSA) and the Office for Health promotion (OHP) and calls on the Secretary of State, the Department for Health and Social Care and CMO to ensure the new organisations:

(i) Are set up as part of the NHS and as NHS Special Health Authorities;

(ii) Enable staff to work seamlessly with other public health organisations at local and regional level in England, and with national public health organisations in Wales, Northern Ireland and Scotland;

(iii) Employ public health specialist staff on NHS equivalent consultant contracts;

(iv) Ensure easy movement of staff without detriment to terms and conditions, pay, pensions and continuity of service between the new organisations, local authorities, integrated care systems, the NHS and national public health organisations in the devolved administrations;

(v) Deliver an effective appraisal and revalidation system covering all public health specialists, hosted by UKHSA or OHP;

(vi) Continue to deliver high-quality training placements and education for specialty registrars in public health and associated specialties;

(vii) Uphold the contractual right of consultant staff to advise, speak and publish on matters of public health interest without fear or favour;

(viii) Undertake to adapt and update the PHE code of conduct to reflect the needs of staff working under both GMC code and the civil service code.

(ix) Invest in Healthcare Public Health expertise and training for those from Public Health and other medical specialties.

15 **MOTION by PHMC Executive:**
That this conference calls upon UKHSA, OHP and NHSE/I to recognise BMA for the purposes of collective negotiation and to set up regular formal consultative meetings between the organisations, trade unions and professional associations including BMA and other public health representative and professional bodies.
18 **MOTION by the Conference Agenda Committee:**
That this conference calls for a public enquiry into the COVID pandemic:

(i) to be initiated as soon as possible

(ii) To include a full evaluation of the strengths and weaknesses of the public health system in England, the fitness of purpose of its health protection systems, and the impact of the progressive loss of medical expertise;

(iii) With the widest possible remit, including Government decision making and advisory structures, procurement, vaccine development, vaccine delivery, lockdown measures and timing, PPE, public health delivery structures, investment in track and trace, protective measures for vulnerable people and communities, management of outgoing and incoming travellers

(iv) With the ability to make recommendations for the planning, preparation and investment towards managing the next pandemic and so that lessons can be learned and rectified under UKHSA and OHP.

19 **MOTION by Welsh Public Health Medicine Committee:**
That this Conference notes that the coronavirus pandemic has demonstrated the essential role of care home workers and how existing poor pay and working conditions of these carers can contribute to mortality and morbidity among some of the most vulnerable in our society. Conference, therefore, calls on the governments of the four UK nations to urgently review and improve pay and conditions for care home workers to reflect their essential role.
21  **MOTION by the Conference Agenda Committee:**
That this Conference notes that the 2012 BMA publication Healthy transport = healthy lives contained clear information about the impact of transport on physical activity, pollution, deprivation, health inequalities and climate change. Conference further notes that the pandemic era worsens many aspects of health (such as deconditioning, isolation and exacerbating health inequalities) and believes that regular exercise, especially outdoors, can improve many of these issues. Conference, therefore, calls for:

(i) increased promotion of active travel to support social distancing, reducing deconditioning and improving mental and physical health, which means promoting cycle lanes and environments for walking;

(ii) increased access to open spaces for people to exercise;

(iii) support for car-free areas around schools and safe active travel for children to get to school;

(iv) all NHS estates to have good cycle storage facilities and promote active travel for staff, patients and visitors;

(v) government subsidy for electric-cars to be applied to electric-cycles.

(vi) the BMA to update and re-release the report on the health impact of transport.

22  **MOTION by Northern Ireland Public Health:**
That this conference notes that public transport costs continue to rise each year, this is a disincentive to greater public transport use and calls on the Northern Ireland Assembly to ensure that annual public transport fare increases are not above the level of inflation and do not result in fares that are more expensive than the cost of driving the route.
MOTION by Conference Agenda Committee:
That this Conference demands that:

(i) The UK Government support and fund a process to refer those who committed genocide and crimes against humanity to the ICC Chief Prosecutor so that they do not enjoy impunity if they managed to command armed organisations or control state apparatus.

(ii) The UK Government refers General Min Aung Hlaing and the members of the State Administrative Council (SAC) of Burma to the Chief Prosecutor of the International Criminal Court (ICC) for the genocide of the Rohingya, crimes against humanity on the civilians and war crimes.

(iii) When the ICC issues an arrest warrant or indicts them, the UK government, working with its allies, provides effective means to arrest them and brought them before the ICC.

[PASSED AS REFERENCE]

MOTION by North East England Public Health:
That this meeting recognises the impact of plastic waste on the health and wellbeing of the population, and that:

(i) NHS organisations should be encouraged to reduce consumption of single-use items and increase recycling;

(ii) washing machine manufactures should be encouraged to incorporate filters in their products to reduce microplastic pollution.

(iii) the hospitality sector should be encouraged to reduce use of single-use items including small bath and shower gel bottles.

(iv) the BMJ should examine the practicalities of switching plastic covers to a compostable starch-based alternative.
28 **MOTION by Scottish Public Health:**
That this conference believes that:

– Income security is important for health; and

– A universal basic income for each individual in the UK could provide that security. Indeed, a trial of basic income in Finland showed those in the basic income group experienced significantly fewer problems related to health than those in the control group.

Conference, therefore, calls on the Governments of the UK to establish a pilot, with evaluation, of universal basic income in the UK.

29 **MOTION by the Conference Agenda Committee:**
That this conference believes that:

(i) All public policies should be designed to impact positively on population health and to address health inequalities;

(ii) Welfare reforms introduced since 2010 by the UK Government are damaging the health of the public. Conference, therefore, calls on the BMA:

(iii) To lobby the UK Government to undo welfare policies causing harm and develop welfare policies that protect and promote health;

(iv) To lobby all governments in the UK to implement a Health in All Policies approach to policy making

30 **MOTION by the Conference Agenda Committee:**
That this conference notes that an individual’s ongoing health is programmed in their early years with good health in childhood and the avoidance of adverse childhood experiences reducing ill health – both physical and mental – for the rest of life.

(i) Conference further notes that childhood poverty is closely associated with poorer health, adverse experiences and with being less able to contribute towards society.

(ii) Conference, therefore, believes that reducing childhood poverty is a wonderful investment both in future health, and future productivity and welcomes the commitment of the Scottish Government to reduce child poverty.

Conference therefore calls upon the UK government to prioritise tackling childhood poverty, and improving services for children and young people; the BMA to lobby the UK Government to use policy levers to reduce child poverty in the UK.
Motion by London Public Health:
That this Conference notes that gambling

is a major cause of psychological distress and that there are an estimated 2.5 million
problem and at-risk gamblers in the UK.

This Conference calls for:
(i) Better regulation of the gambling industry is needed especially in on-line
advertising

(ii) The Gambling Commission to work with the BMA to produce a recommended set
of evidence-based regulations to reduce the health problems related to gambling.