Dear everyone

Life expectancy has greatly improved over recent years, meaning the populations we serve are older than ever before. After previous annual downturns in life expectancy, for example for older people in 2012, the trend has returned quickly to a positive direction. An ageing population would normally lead to more deaths each year, but reductions in age specific death rates have been so large recently that numbers of deaths have been going down. Last year we saw a big seasonal increase in numbers of deaths at a time of intense flu activity. The predominant flu subtype was known to particularly affect older people. The flu vaccine was less effective than usual but still provided worthwhile protection. Provisional data for 2015 showed the highest number of deaths in a single year for England and Wales since 2003. PHE epidemiologists and Office for National Statistics (ONS) colleagues have analysed the figures further. The spike in 2015 was clearly driven by deaths in the over 75s, with excess deaths mostly due to dementia and respiratory causes. With so many more older people vulnerable to flu we must strive to protect and support them. However, we may still see large variation in numbers of deaths from year to year. We will continue to keep a close eye on the data with our partners in ONS.

In 2013 Coventry was one of seven cities invited to participate in the UK Marmot Network and committed to deliver rapid reductions in health inequalities by 2015. We know that the conditions in which people are born, grow up and live affect their likelihood of enjoying long, healthy lives. In Coventry, life expectancy for those living in the most deprived parts of the city is 9.4 years lower for men and 8.7 years lower for women. Marmot principles have been embedded across a wide range of Coventry’s public services to help reduce this gap, including initiatives to support disadvantaged children and their families and work to empower frontline professionals to recognise vulnerable people and signpost them to relevant support. Since 2013, the city has reported improvements in educational development, health outcomes, life satisfaction, employment and reductions in crime in priority locations. Last month the Council and its partners won the Public Health Local Government Chronicle award for this work, and have now drawn up a memorandum of understanding with PHE West Midlands and the UCL Institute of Health Equity to build on this success with a second phase of the Marmot City programme. PHE will support the evaluation of this work.

On Tuesday five new local AMR indicators were launched on our Public Health Profiles tool Fingertips to support providers to develop local action plans and further raise awareness of antimicrobial resistance. Making transparent data on antibiotic prescribing, healthcare associated infections and resistance available to healthcare professionals and the public is an important step forward in tackling antimicrobial resistance. Following the introduction of financial incentives in the form of Quality Premiums in April 2015 by NHS England working with PHE, there was a significant reduction in antibiotic prescribing in primary care. This is a welcome trend as use of fewer antibiotics should help to reduce the numbers of infections caused by antibiotic resistant bacteria.

I am delighted that our UK Field Epidemiology Training Programme (FETP) was accredited by the global accrediting body last week, with a commendation from the international panel for being an ‘outstanding’ programme. This recognition is a great credit to Dr Samantha Bracebridge, Director of the FETP, and her team, who have developed and run this programme aimed at medical, nursing, scientific and veterinary professionals who want to further enhance their specialist field epidemiology skills.

And finally, as PHE moves into its fourth year we are busy preparing our strategic plan for the next four years. Watch this space.

With best wishes

Duncan Selbie
Chief Executive