



Public Health
England

Protecting and improving the nation's health



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Chief Executive

Friday message

Thursday 26 May 2016

Dear everyone

I am writing on a Thursday because the period of sensitivity ahead of the EU referendum comes into effect tomorrow and all public bodies in receipt of public funds need to take great care during this time. And so the next Friday message will be on 24 June.

Our advice on healthy eating came under media scrutiny this week following the publication of an opinion paper by the National Obesity Forum calling for people to eat more fat, cut carbohydrates and ignore calories. Their message conflicts with the broad evidence base and international guidelines and is irresponsible in its potential to mislead the public. PHE's responsibility is to provide clear and consistent advice after considering the totality of robust and objective evidence. Our healthy eating advice is based on reviews by independent experts who consider all the evidence, and is subject to public consultation and due process to ensure objectivity. When translating dietary science into consumer messaging we engage academia, health charities, public health professionals, representative professional bodies, local government and industry, and in the case of the Eatwell Guide we conducted research with the public to ensure it remained meaningful and understandable. We, of course, monitor changes in the evidence base and the public should be assured that our guidance is evidenced and safe.

All those that work in public health know that great things can be delivered. An example of this is our recent whole systems work on tuberculosis (TB) control, and on Wednesday the PHE Board heard about the progress that has been made since we published our [collaborative TB strategy](#) with NHS England in January 2015. We have set up a National TB Programme and seven TB Control Boards to support local action – and we are already seeing a decrease in TB rates in England. We have also set up programmes to test and treat new people coming to the UK from high risk countries for latent TB infection, using £10m of investment from NHS England, and I am delighted that this funding commitment has been renewed for 2016/17. We are making substantial progress in reducing the unacceptably high levels of TB in England and recognise the work of the NHS and local government in reaching those who are most at risk. You can sign up [here](#) for further updates.

We now have the findings from the largest ever review of the voluntary, community and social enterprise sector's involvement in statutory health and social care. This independent [report](#) urges local hospitals, clinical commissioning groups and councils to do more to involve expert charities in the design and delivery of services of all kinds, and it is timely that we on the statutory side are recognising this. The recommendations set out how we should go about making this more consistent and I would commend the report as well worth a read.

And finally, congratulations to our scientists at the Centre for Radiation, Chemical and Environmental Hazards, which has been recognised as a World Health Organization (WHO) Collaborating Centre for Radiation Protection. WHO collaborating centres include research institutes, universities or public health bodies that carry out work in support of the Organization's programmes. There are WHO collaborating centres in over 80 countries, eight of which are hosted by PHE. This accreditation stands as a useful reminder of the high regard attributed to CRCE's work internationally. CRCE is no stranger to international collaboration, providing numerous scientists to influential committees run by the International Atomic Energy Agency, the United Nations and others for more than 40 years. CRCE scientists in Cardiff already have a WHO collaborating centre on chemical incident management.

With best wishes