Dear everyone

This coming March David Heymann will be leaving us after eight years as our Chair – first of the Health Protection Agency and then of PHE. David is an international superstar in infectious disease and global health security and will be sorely missed, both at home and internationally, in his stewardship of PHE. There will be many opportunities to say thank you but I wanted you to hear first from me. The search is underway for his successor.

On Monday I was in Cornwall to launch the new Physical Activity Strategy for Cornwall and the Isles of Scilly. Being inactive increases the risks of many long term health conditions including high blood pressure, heart disease and osteoporosis, and costs Cornwall’s NHS an estimated £100m every year. Their ambition is to get 50,000 more people moving by 2020 involving bold action across a wide range of services including the NHS, education, sport and leisure, planning, transport and economic development.

Multidrug-resistant Gram-negative bacteria are at the centre of the fight against rising antimicrobial resistance (AMR). In a recent bibliometric analysis spanning 30 years, PHE’s Antimicrobial Resistance and Healthcare Associated Infections (AMRHAI) Reference Unit has been named one of the most productive centres worldwide for publications relating to carbapenem resistance. The many papers published on this by the AMRHAI team have ensured that the UK ranks top when assessed both on publication quality and the breadth of international collaborations. The team also co-authored the top-ranked paper. This sustained international prominence reflects the team’s world class professional work over many years and is an exemplar of UK science at its best.

On Tuesday the Local Government Association hosted ‘Our Day’ – a chance for local authorities to celebrate what they do in a typical day and for those that work with them to express appreciation for the hard work and dedication of those behind our public services. Since PHE was created I have visited every upper tier local authority in the country and seen first-hand the ways in which local government is improving the public’s health. First through commitment to prosperity: creating jobs that local people can get, boosting educational standards, improving housing and caring for people in their homes and communities. Second, through a renewed focus on the importance of ‘place-based’ services that meet specific local needs. And third, by using local assets to make better use of what they have, creating services that are more effective and more efficient. Nobody is better at doing more with less. As a nation we face big public health challenges and local government is an inseparable part of the solution.

Black African women are nearly twice as likely to be diagnosed with late stage breast cancer as white women in England according to new analysis from PHE’s national cancer registration and analysis service and Cancer Research UK. Published during the BBC’s cancer week, the data showed that 25% of black African women and 22% of black Caribbean women diagnosed with breast cancer are picked up at stage three and four, compared with 13% of white British women. This is the first time that data of this kind has been published in England, which helps build a clearer picture of who is diagnosed at an early or late stage as we work with partners to deliver the NHS cancer strategy.

And finally, we hosted young people from the Association for Young People’s Health at our London HQ on Wednesday, as part of the Children and Young People’s Takeover Day. This was an important opportunity to share information about what PHE does with the next generation and to hear their views.

With best wishes