Dear everyone

Today we published a review of the evidence on alcohol harm and its impact in England, as well as the effectiveness of different actions in alcohol-related harm. The full evidence review is available on gov.uk with an abridged version in The Lancet. As a nation we are drinking more alcohol than we did in the past and there are more than one million hospital admissions relating to alcohol each year, half of which occur among the most deprived groups. Alcohol is also a leading cause of years of working life lost in England, and the cost of alcohol-related harm is estimated at between 1.3% and 2.7% of annual GDP. If applied to the UK this equates to between £25 and £50 billion each year. Our review provides national and local policy makers with the latest evidence to identify policies that will best prevent and reduce alcohol-related harm, including those that impact directly on the price, availability and marketing of alcohol, and those directed at people most at risk.

On Tuesday I wrote to the chief executive of every NHS Trust in England, asking for their help towards a tobacco-free NHS. Despite declines in prevalence over recent decades, more than 7 million adults in England still smoke and tobacco use remains the single largest cause of premature death, accounting for half of the health gap between the poorest and most affluent communities. The NHS brand is one of the most recognised and trusted in the UK and is a powerful symbol of health and wellbeing. However, the NHS is yet to give tobacco control the overt leadership that the scale of the problem warrants. I know that some trusts are already well ahead in this, and by working together, I believe we can make the NHS a place that provides a supportive tobacco-free environment for patients, staff and visitors, and in which the treatment of tobacco dependence is fully integrated into clinical pathways.

On Thursday we published the latest edition of Health Matters on increasing the uptake of HIV testing. The UK is behind on the World Health Organization and UNAIDS target for 90% of people living with HIV to be diagnosed, and new PHE data published on Thursday shows an estimated 13,500 people are living with undiagnosed HIV. HIV is no longer a fatal infection but a chronic, manageable disease, and our ambition now is to make regular HIV testing routine health behaviour. This edition incorporates recommendations from the first-ever co-badged guidance from PHE and NICE to support increased uptake of HIV testing. Please do share the infographics, slide sets, case studies, videos and blogs with colleagues.

This is the third year that we have commissioned Ipsos MORI to carry out a quantitative study into the general public’s awareness and perceptions of PHE and various different health issues. The results show that public recognition of PHE continues to grow, with a 9% increase to 50% compared with 41% in 2015, and public confidence in our advice has also reached its highest level. For those who know about our work, confidence in our advice is now at 92%. This is particularly important as we work to reach more people with our health messages and campaigns.

The latest special edition of the Town and Country Planning Association Journal focuses on the influence of built and natural environments on our health and the role of spatial planning in shaping places that help us to maintain good health. The edition has been guest edited by Carl Petrokofsky and Andre Pinto of our healthy places team, along with Professor Janice Morphet from the UCL Bartlett School of Planning, and is well worth a read.

With best wishes

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