



Public Health
England



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Chief Executive

Friday message

Friday 31 January 2014

Dear everyone

Together with Sir David Nicholson, and Michael Coughlin from the LGA, we [launched](#) our joint *Sustainable Development [Strategy](#) for the NHS, Public Health and Social Care System 2014-2020*. This strategy is, I believe, unique in the world in that it is the first time that not just a single organisation, or even a single level of government, but an entire sector has made a commitment to working collaboratively on a sustainable future. We know about what kills us early and what ails us when alive – the *raison d'être* for improving the public's health is to address the causes before they turn into the kind of illness and long-term conditions that we see overwhelming our hospitals and social services. Simply put, the easiest way to improve the financial and environmental sustainability of the NHS and Local Government is to help people stay well, create the right conditions for health to flourish and to intervene early, wherever possible, before things go wrong. This strategy substitutes a description of the problem for a coherent set of actions, not by any means complete, but in the right direction. There are five risk factors that apply in almost all long-term conditions from diabetes to dementia – smoking, high blood pressure, inactivity, poor diet and alcohol. Good health is, though, about much more than healthcare or even these risk factors. We must get better at addressing the causes of the causes, as set out so eloquently by Sir Michael Marmot, and perhaps summarised as: a good start in life, employment, decent housing and companionship. In this context it isn't so much about treating what has gone wrong but about the choices people have and giving those with the least, more options. This will do more for creating a sustainable health and care system and addressing inequalities than anything else.

Other news this week is the confirmation from Ministers that the funding and commissioning responsibilities for the 0-5 Healthy Child Programme (health visiting services and family nurse partnership) will formally transfer from the NHS to Local Government from 1 October 2015. This is the final milestone in completing the transition to the new public health system and has been widely welcomed by Local Government as it puts them in the driving seat for the entire life course of their populations. Clarity about the start date means that work can now begin across the health and care sectors to commission the best possible services for all families with children under five.

On Tuesday, our national leadership team met our counterparts from the Faculty of Public Health to consider how we can best work together and play to each other's strengths. A number of priorities were identified, from ensuring we provide prompt, useful, evidence-based support to our colleagues in Local Government and the NHS, ensuring they have access to the full range of public health expertise and experience, to aligning our contributions in our respective international work.

And finally, yesterday, national and international experts on dementia met at a conference hosted by PHE and the UK Health Forum which focused on the development of a prevention agenda for dementia and other non-communicable diseases. There is now consensus that there is already sufficient evidence to justify action across the whole lifetime of a person, and agreement that we can indeed influence the onset and progression of dementia. We will be developing this work further in the coming months.

With best wishes