



Public Health
England



Duncan Selbie
Chief Executive

Friday message

Friday 6 December 2013

Dear everyone

People often ask me what makes the greatest difference to our individual and collective ability to improve outcomes, reduce inequalities and keep our communities safe. My answer is always people and relationships, and courageous leadership. For me, this means we each take responsibility for making a difference and that our personal behaviour either encourages or undermines those around us. When we get it right we can achieve more together than we ever believed possible and I see great people doing fabulous things all over the NHS, Local Government, within the Civil Service and, very close to hand, within PHE itself. The fundamental changes to the public health system over recent times have offered Local Government and their partner CCGs a defining moment and most are taking full advantage. My time in the last week in Leicester, Gloucestershire and Hertfordshire were all leading examples. As leaders you are engaged with some of the most complex societal and organisational challenges anywhere in the public services. You are leading the creation of new models of public services, which requires working across traditional boundaries and this is exciting and daunting in equal measure. As with all the behaviours that count, if we say something matters then we need to show this by how we spend our time and money. So along with the LGA, ADPH, and NHS Leadership Academy we are creating a number of novel leadership programmes. In the next few weeks you will hear more about the Leadership for Change [programme](#) – open to senior public health leaders, alongside DASS, DCS and CCG leaders; the Leading Communities programme for Directors of Public Health and their teams; and our Whole Systems Leadership programme. I hope as many people as possible take advantage of these opportunities so that together we can create a leadership movement for transformational change.

I want to especially mention this week the exceptional work of our Screening and Immunisation Teams. The Heads of Public Health Commissioning from NHS England's Local Area Teams met recently with our Chief Operating Officer Richard Gleave and colleagues to reflect on our progress so far, nine months in, and to consider the areas we need to focus on in the next twelve months. This session complemented those that Anne Mackie regularly convenes with Screening and Immunisation Leads. In addition to tackling the major measles outbreak in April, and launching four new immunisation programmes on a scale never before undertaken, no one has dropped the ball, notwithstanding the inevitable disruption involved in recreating what is effectively a new service working across two national organisations. I am indebted to all those involved, each is a credit to the NHS and PHE. Going forward, we will work even more closely both on the way we lead the new system together and how we further develop our operational effectiveness.

And finally, I want to pay tribute to the work our health protection, emergency planning and other colleagues are doing in responding to the current flooding. Our staff, locally and nationally, have been working round the clock to support the Gold Commands and others and are preparing to work all weekend. I am immensely proud of them.

With best wishes