



Public Health
England



Duncan Selbie
Chief Executive

Friday message

Friday 19 April 2013

Dear everyone

One of our core responsibilities will be to ensure that our public health campaigns are aligned with the evidence-base so that the case for changing behaviours, particularly in relation to smoking, exercise, alcohol consumption and healthy eating, is crystal clear. Towards this, we published this week our first [marketing plan](#) which includes commitments to support local government, build on the major lifestyle programmes like Change4Life and make the most of digital technology to support behaviour change. Sheila Mitchell, our Marketing Director, gave [interviews](#) about the plan at the launch.

It surprises many public health experts that outside their own immediate community there is a lack of awareness that smoking is still the number one cause of premature death. Smoking remains a deadly threat. At a recent seminar Deborah Arnott, Chief Executive of ASH, the national charity for action on smoking and health, together with Martin Dockrell, their Director of Policy and Research and Andrea Crossfield, Director of Tobacco Free Futures, provided a briefing for our national team. They explained that because we have some of the most successful tobacco control schemes in the world, many people think the job is done or that the remaining problem is small. But the horrifying truth is that more than 80,000 people die every year from smoking – higher than all the next six greatest causes of premature death put together, including obesity, alcohol and drugs misuse, suicide, HIV and traffic accidents. That is why our focus on smoking, including our national marketing campaigns, together with that of key partners in the field like ASH and the regional offices of tobacco control, is so important in supporting local action across the public health system.

A sector-led improvement framework for local government's new health responsibilities has been agreed with the Local Government Association. It is a broad and properly ambitious approach, pulling together support for Health and Wellbeing Boards, local Healthwatch arrangements, and local public health functions. The emphasis on supporting and developing their local leadership within the system is particularly encouraging as is the progress being made on peer challenge. We have been helping the LGA to develop the headline questions for this, and the first pilots will start in late May, beginning with the East Riding of Yorkshire, and will be rolled out across all the upper tier and unitary councils over the following three years.

I want to warmly thank our IT staff, the unsung heroes of the hour during the switchover from more than 130 different IT systems to the single new PHE system. We knew this would be a major challenge but our IT team has worked tirelessly to iron out the difficulties and keep us functioning in hyperspace and I am profoundly grateful to them and to those affected for their understanding and patience.

And finally, a number of our staff are taking part in the London marathon on Sunday and I wish them all the very best in this magnificent adventure.

With best wishes