



Public Health
England



Duncan Selbie
Chief Executive

Friday message

Friday 4 October 2013

Dear everyone

We recently conducted, through Ipsos MORI, a small [qualitative survey](#) of our stakeholders to help shape our quantitative stakeholder survey, planned for the early New Year, and to give us early insight into any common themes. Three key issues emerged. While everyone thought PHE had made a good start and showed great promise, they wanted us to do more to demonstrate that the advice and guidance we provide is truly independent of Government, to continue to build local relationships that are sensitive, open and constructive, and to streamline our internal processes to eliminate our teething problems around procurement, recruitment and IT. This week our senior leaders came together to consider these findings and what to do about them. On independence, we know we will be judged on how we act and what we say and as an impartial, expert, evidence-based organisation, if the evidence is clear we will, without fear or favour, say so and, if not, we will say this too. On relationships with local partners, critically local government and the NHS, we know the importance of behaving in an engaging and respectful way and the benefits of co-production. Given the stark health inequalities around the nation we all have to be ambitious and work together like never before and we are going to strive to be a 'local first' organisation. Essentially we can only ever be as good as our local partners describe us. This will be our licence to operate and we are crystal clear that this underpins our wider global, scientific, professional and academic aspirations. On streamlining our internal processes we have not made sufficient progress and this is causing understandable frustration to our staff and is also being noticed externally. This is in part a consequence of bringing together well over 100 organisations but more so from experiencing the worst of bureaucracy that each has brought and having to navigate improvements within a new civil service context. We are, though, far from defeated and Michael Brodie our Commercial and Finance Director is going to lead a root and branch review using well established principles of lean thinking to see what can be done quickly and in the longer term. He has been given the widest possible brief and authority to get on and solve these problems, whatever that takes. A big thank you to all those who have taken the trouble to give us this feedback.

Our first cohort of field epidemiology trainees has completed their two-year fellowship and their graduation ceremony at our conference in Warwick was testament to the wide ranging contribution each has made to surveillance, outbreak investigations, applied research and teaching and training. The programme, developed and led by Dr Sam Bracebridge, is highly regarded internationally, and fellows have undertaken field work in Thailand, Taiwan, Qatar, South Africa and Indonesia. We also have strong collaborative links with the European Centre for Disease Control and Prevention, based in Sweden, and are committed to continuing to invest in this.

And finally, you must have seen the campaign launching [Stoptober](#), our annual 28 Day Stop Smoking Challenge. So far there have been nearly a million visits to our website, more than 200,000 people have asked for support packs and 100,000 people have downloaded our App and we have high hopes that this year even more people will succeed than ever before.

With best wishes