



Public Health  
England



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Chief Executive

## Friday message

Friday 10 January 2014

### Dear everyone

I had a wonderful start to the New Year with a visit to various teams at our Colindale campus last week. It was a timely reminder that as well as the wider health improvement brief PHE has taken on, we are responsible for providing and building on a range of key expert services which tend to go largely unnoticed by the wider world but play a critical role in protecting the nation's health. For example, our specialist microbiology teams provide national reference services, globally recognised typing of new diseases and NHS pathology services, while our health protection staff provide nationwide surveillance and management of outbreaks of infectious disease and of chemical, environmental and radiation hazards. In addition we have national responsibility for disease registration and for field epidemiology for communicable and non-communicable disease, for drug treatment monitoring and for cancer and non-cancer screening programmes. Not least, our staff support NHS England in the commissioning and delivery of gold standard immunisation programmes that prevent illness across the life course and save lives. I only say this lest we forget that, in the cut and thrust of all our work in support of Local Government and the NHS and in making the argument for actions and interventions that will improve length and quality of life, we ourselves provide a range of critical services that are of national importance. Perhaps interestingly too, we generate a commercial income of around £170m, around 40 per cent of our annual budget.

We were yesterday very glad to [announce](#) £10 million new capital funding for drug and alcohol treatment services. This aims to support ambitious recovery-focused initiatives across the country to help people overcome dependency and rebuild their lives. On Tuesday I was privileged to be with the Lancashire Users Forum at their conference in Accrington Town Hall. This is an inclusive forum for people in treatment and their families and friends and for those at every stage of recovery, as well as those who support them professionally. The care and support that they provide for and to each other was palpable and the stories told by those who are recovering their lives were electrifying. This user led commissioning is ahead of its time and is funded by Lancashire County Council through their public health grant along with the police and crime commissioner and Lancashire Probation Trust.

Like so many other organisations, we have staff all over the country who have been personally affected by the floods and high winds yet have been resourceful in finding ways to work round the disruption – teleconferencing instead of travelling, working from home, and planning flexibly. Amongst the grimness of this it does emphasise the importance of sustainability and you may have seen our [review](#) of our work in 2013 to reduce our own carbon footprint.

The BMA has today launched a [survey](#) of all public health consultants and registrars in the UK to establish where they are working within the new public health system and how they are experiencing this as well as their views on the future prospects for the profession. I hope as many as possible will take part.

And finally, I want to congratulate Professor Dilys Morgan, our Head of Gastrointestinal, Emerging and Zoonotic Infections on being awarded an MBE in the New Year's Honours – a very well deserved recognition of her exceptional work at home and abroad.

With best wishes