

Public Health England 2013/14 Stakeholder Survey

The first survey of key stakeholders: Full quantitative report

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Ipsos MORI
Social Research Institute





Our priorities for 2013/14



Background

Public Health England (PHE) is responsible for providing support and evidence-based, expert advice to national government, local authorities, the NHS and other partners on matters affecting the health and wellbeing of the nation. Establishing open and constructive stakeholder relationships is critical to progressing its mission to protect and improve the nation's health and reduce the inequalities experienced in health and wellbeing outcomes.

Objectives

Ipsos MORI was commissioned to undertake a programme of research to assess how PHE is perceived externally and how well stakeholder relationships are developing at this early stage, and to:

- Understand how PHE is perceived as an organisation and identify early indications of its performance to date
- Explore the extent to which PHE's role, vision, priorities and values are understood by its key stakeholders
- Provide an understanding of how stakeholders find working, and communicating, with PHE
- Learn what stakeholders expect from PHE going forward

QUALITATIVE

Initial qualitative phase, reported in August 2013

- 16 depth interviews with senior PHE staff
- 15 depth interviews with key external partners represented by their Chief Executive or another senior member of staff

QUANTITATIVE

Quantitative research completed 6-31 January 2014

- Online questionnaire emailed to 502 key stakeholders
- Telephone interviews conducted with key non-responders in final two weeks
- High response rate of 60% achieved (299 completes)

THIS REPORT

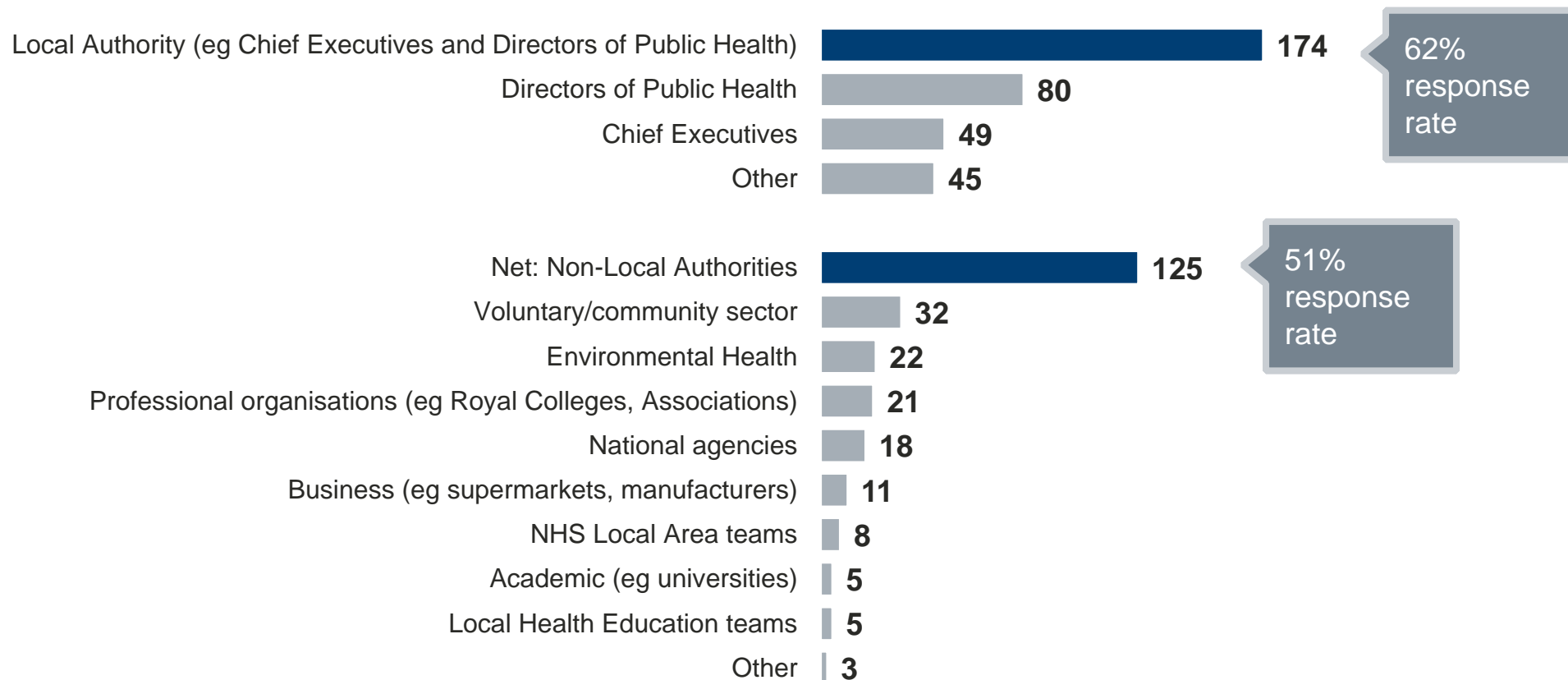
Findings are presented from the quantitative survey with references to, and a brief re-cap of, the qualitative research

This report is designed as a standalone document to be read, not presented

A separate condensed slide-deck is available, designed specifically for presentations

Over half of survey responses come from Local Authority stakeholders (58%)

Number of survey completes



Response rates calculated as percentage of organisations – not necessarily individuals – to respond to survey invite

Source: Ipsos MORI

Responses received from stakeholders based in every PHE region and centre

North of England

- North East
- Cumbria
- Yorkshire and the Humber
- Greater Manchester
- Cheshire and Merseyside

• 72 respondents

Midlands and East of England

- East Midlands
- West Midlands
- Anglia and Essex
- South Midlands and Hertfordshire

• 50 respondents

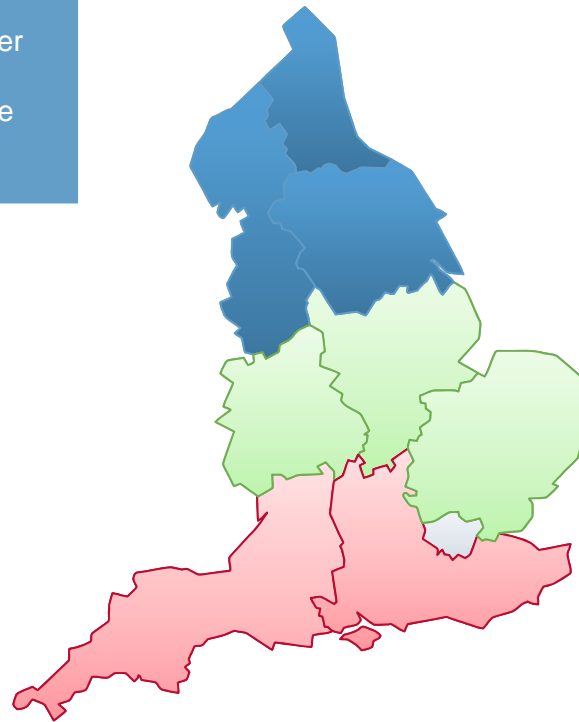
South of England

- Kent, Surrey and Sussex
- Thames Valley
- Wessex
- Devon, Cornwall and Somerset
- Avon, Gloucestershire and Wiltshire

• 54 respondents

London integrated region/centre

• 35 respondents



Three key implications for PHE emerged from the qualitative stage relating to independence, local relationships and internal processes

How to demonstrate the advice and guidance PHE provides is independent and credible

- Likely to come through handling of further contentious issues eg. MUP
- PHE's stance is expected to remain rooted in the evidence-base and expertise it has access to

How to build relationships at the local level that are sensitive, open and constructive with clearly defined roles – emulating the success seen at the national executive level

- Some fragility of relationships with local government indicated
- The timeframe to develop these relationships is limited
- More (and more timely and inclusive) engagement is being called for by stakeholders within local government

How to streamline internal processes to better support staff in their successful development of working relationships

- PHE's ability to progress and continue developing constructive relationships locally is dependent on enabling staff with the personnel and tools they require
- Some improvements have been made internally but there are demands for further advances

Though stakeholders and PHE staff will expect progress to be made on the areas mentioned, the vast majority of stakeholders interviewed were positive about PHE, recognising it is well positioned, and has the right leadership, to progress against its aims

Perceptions of PHE and working relationships

- The survey results are **broadly positive**, with stakeholders, in the main, commenting favourably or neutrally about PHE
- For a new organisation, with a diverse set of stakeholders, **levels of advocacy of PHE are high**
- Though 'independent' is not a top-of-mind association with PHE, only a handful of stakeholders disagree that the advice provided by PHE is independent
- Stakeholders in **more regular contact with PHE** are more positive towards it, emphasising the importance of regular contact and engagement
- Stakeholders are broadly positive about the communications they receive from PHE, though communications could be more **concise and timely**
- Suggested improvements to PHE's working relationships tend to focus around better **communication and engagement**



PHE's roles, priorities and focus

- PHE's inherited role in **health protection** appears to be resonating more strongly with stakeholders than its responsibilities in relation to health and wellbeing
- Similarly, PHE's focus on 'giving children the best start in life' and 'improving health in the workplace' is not resonating with its stakeholders as much its focus on other **key 2013/14 priorities**
- Stakeholders are calling for a more even balance in PHE's focus between **national and local priorities**; at present believing PHE to be too nationally focused

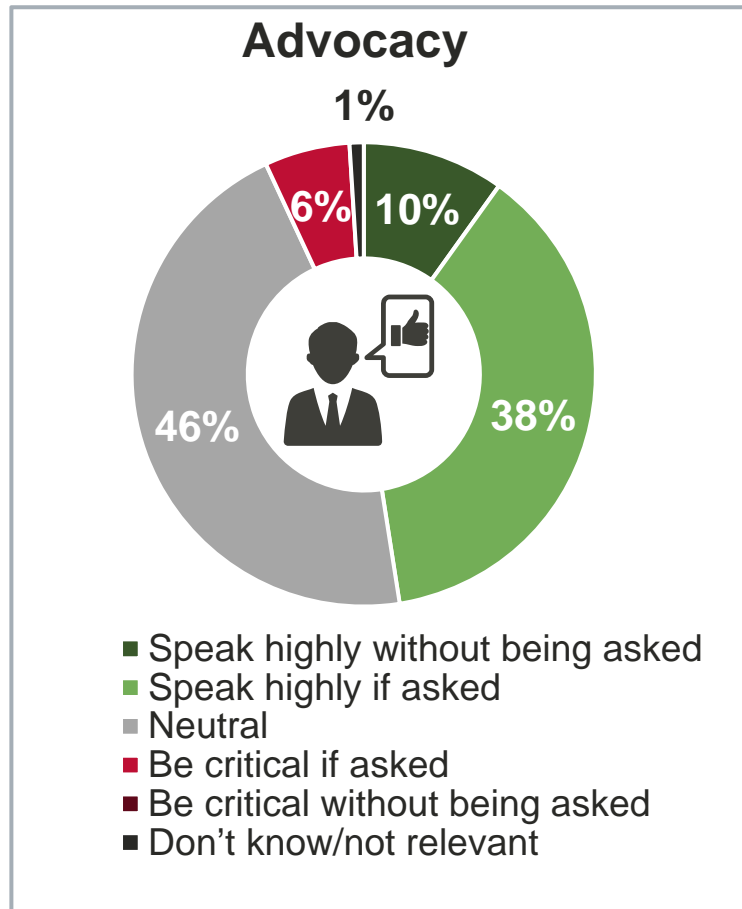


- Local Authority stakeholders are in touch with PHE more frequently than other stakeholder groups. This frequent contact positively boosts their perceptions of PHE such that they are as likely as other stakeholder groups to say they would advocate PHE to others and that they have a good working relationship with PHE
- Due to their higher levels of contact with PHE, Local Authority stakeholders are better able to pass judgement on PHE; be this positive or negative
- On balance, a high proportion of Local Authority stakeholders say PHE is supporting them well to protect/improve the public's health
- However, there is demand amongst Local Authority stakeholders for improved communications and engagement from PHE. These improvements do not necessarily concern frequency of contact, but rather *quality* – stakeholder are looking for an improved understanding of the responsibilities of Local Authorities, a greater degree of listening/dialogue, and more timely delivery of information from PHE

Overall perceptions of Public Health England

Overall perceptions of PHE are broadly positive or neutral

Q4 Which of these phrases best describes the way you would speak of Public Health England to other people?



- There is good advocacy towards PHE at such an early stage, with half of all stakeholders surveyed saying they would speak highly of PHE (48%) and a further 46% saying they would remain neutral
- For a new organisation with a diverse set of stakeholders, this level of positivity is encouraging
- Those in contact with PHE regularly are more favourable, with 58% of those in touch at least once a week advocating it to others compared with 39% of those in touch less frequently
- The high response rate (60%) also shows a good level of engagement with PHE

Base: All respondents (299), in contact at least once a week (139), in touch less than once a week (160), 6-31 January 2014

Source: Ipsos MORI

High levels of contact with PHE boosts advocacy ratings amongst Local Authority stakeholders

Q4 Which of these phrases best describes the way you would speak of Public Health England to other people?

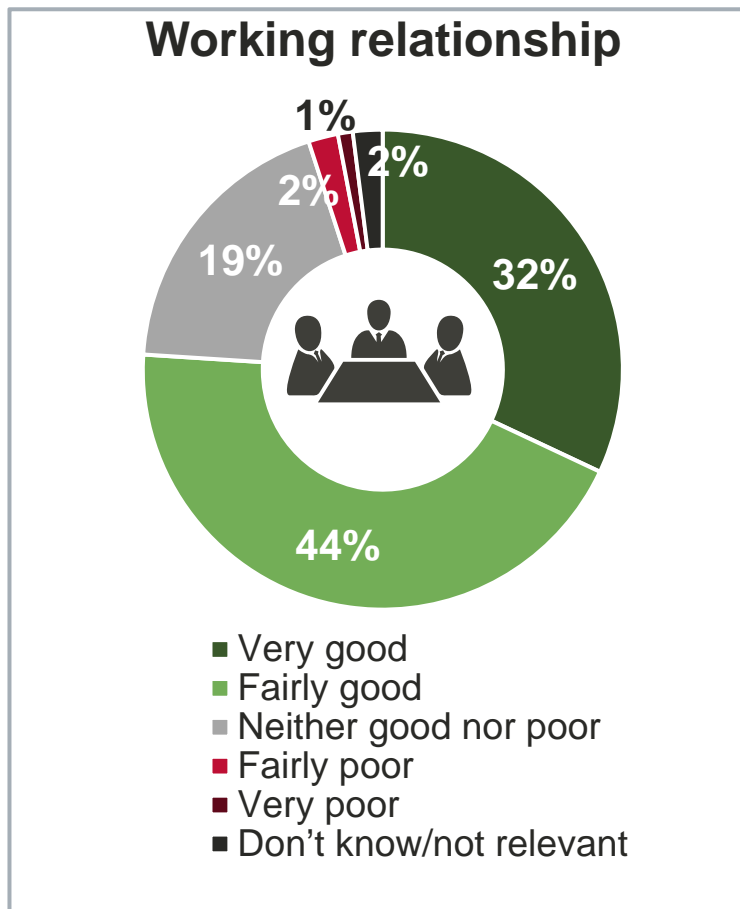


- Local Authority stakeholders give similar advocacy scores to other stakeholder groups
- However, Local Authority stakeholders in touch with PHE less than once a week are less likely to advocate PHE compared to other stakeholder groups (32% vs. 45% of other stakeholders also in touch with PHE less than once a week*)
- This suggests that the regular contact Local Authority stakeholders are having with PHE is boosting their advocacy ratings and demonstrates the importance of regular contact at a local level

* Note this difference is not statistically significant due to relatively small base sizes of 76 and 84 respectively

Working relationships are also thought to be good

Q5 How would you describe your working relationship with Public Health England?



- Three quarters of respondents have a good working relationship with PHE (76%) and only a fraction describe their working relationship as poor (3%)
- Increased frequency of contact positively affects stakeholders views of PHE with 45% of stakeholders who are in contact at least once a week describing relationships as *very good* compared with 22% for those in touch less frequently

"I think that PHE has started well in its overall outlook, particularly in terms of its overt policy to support local government and not to try to dictate from the centre. I would encourage PHE to continue to work towards that goal and to build on the good working relations which it has built up, at least with this Council." (Council Chief Executive)

A similar pattern seen for Local Authority stakeholder views on working relationships

Q5 How would you describe your working relationship with Public Health England?



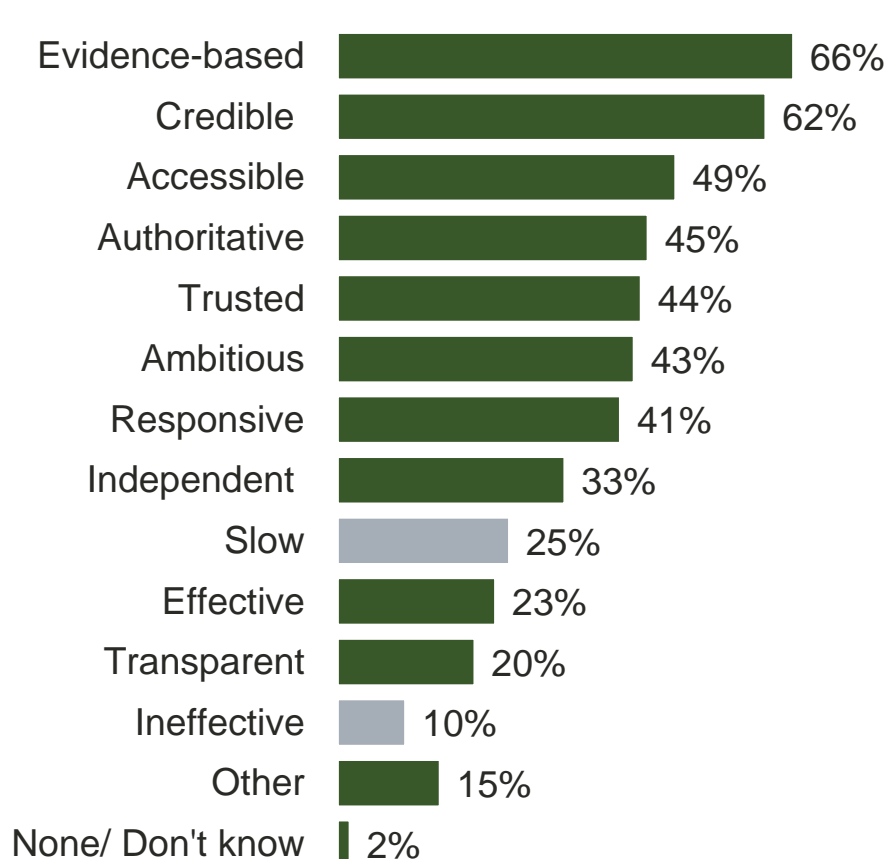
- Local Authority stakeholders are as likely as other stakeholder groups to say their working relationship with PHE is very/fairly good
- Again stakeholders in more regular contact with PHE are more positive regarding their working relationship
- Amongst Local Authority stakeholders in touch with PHE less than once a week, a third say they have a good working relationship with them (62%) – slightly lower than the 71% of non-Local Authority stakeholders who are also in touch with PHE less than once a week (again this difference is not statistically significant)

Base: LA stakeholders (174), non-LA stakeholders (125), 6-31 January 2014

Source: Ipsos MORI

PHE is identified as evidence-based and credible

Q12 From your interactions with Public Health England to date, which of the following words/phrases would you use to describe Public Health England as an organisation? (prompted)



- In general, stakeholders choose positive adjectives to describe PHE
- A third of stakeholders describe PHE as 'independent' (33%)
- Local Authority stakeholders are more likely than other stakeholders to describe PHE as 'accessible' (54% vs. 43% though this difference is not statistically significant) though they are also more likely to describe it as 'slow' (30% vs. 18%)
- No differences are observed in the proportion of Local Authority stakeholders describing PHE as 'independent' compared to other stakeholders (35% vs. 32%)
- As would be expected, stakeholders in contact with PHE at least once a week are more likely to say it is 'accessible' (58%) compared to those in touch less frequently (43%)

Base: All who have contact with PHE (293), in contact at least once a week (139), in touch less than once a week (154), LA stakeholders (171), non-LA stakeholders (1252, 6-31 January 2014)

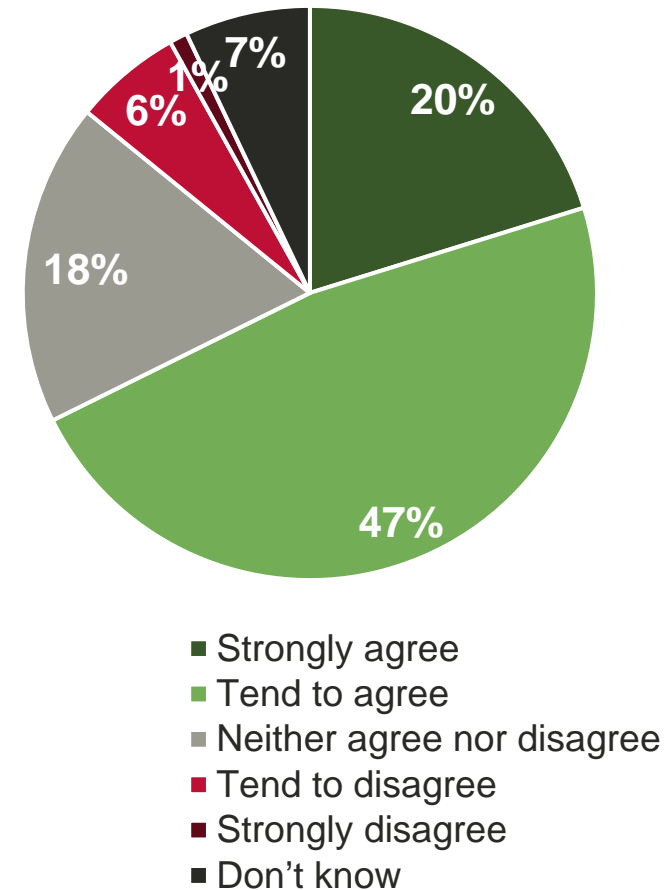
Source: Ipsos MORI

...and is thought to offer independent advice

Q13 To what extent do you agree or disagree that the advice provided by Public Health England is independent?

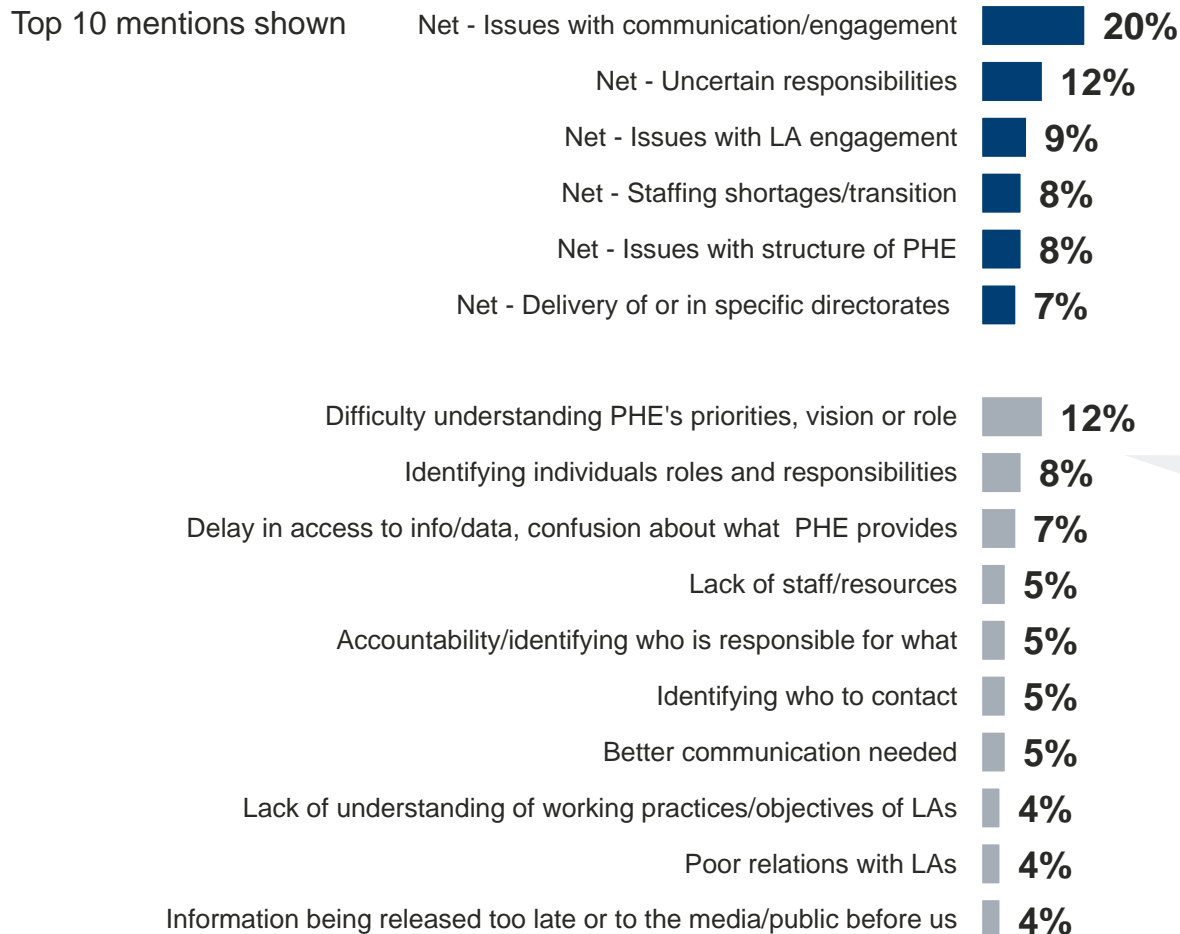
- A key issue identified in the qualitative research was the extent to which PHE could act independently of government
- It is therefore encouraging to see that two-thirds of stakeholders agree the advice provided by PHE is independent (67%) and only 7% disagree
- A similar proportion of Local Authority stakeholders and those not based in Local Authorities agree PHE's advice is independent (68% vs. 66%) but the former are more likely to disagree with this statement (10% vs. 3%) whilst the latter are more likely to claim they 'don't know'
- Verbatim comments show active demonstration of PHE's independence remains important

"There is a perception that it is a quite political organisation in terms of dealing with the government instead of it being an independent authoritative voice." (DPH)



Main challenges faced so far pertain to communication and uncertain responsibilities

Q24 What challenges, if any, have you faced in your work with Public Health England?



"PHE have a habit of releasing news and other announcements which catch local areas on the hop (no advance notice of the drugs capital fund). Proactive communication with enough time for us to do something is vital. A week's notice on a major cancer campaign for the over 70s is really NOT enough. We do want to be able to help. PHE need to get better at working with us." (DPH)

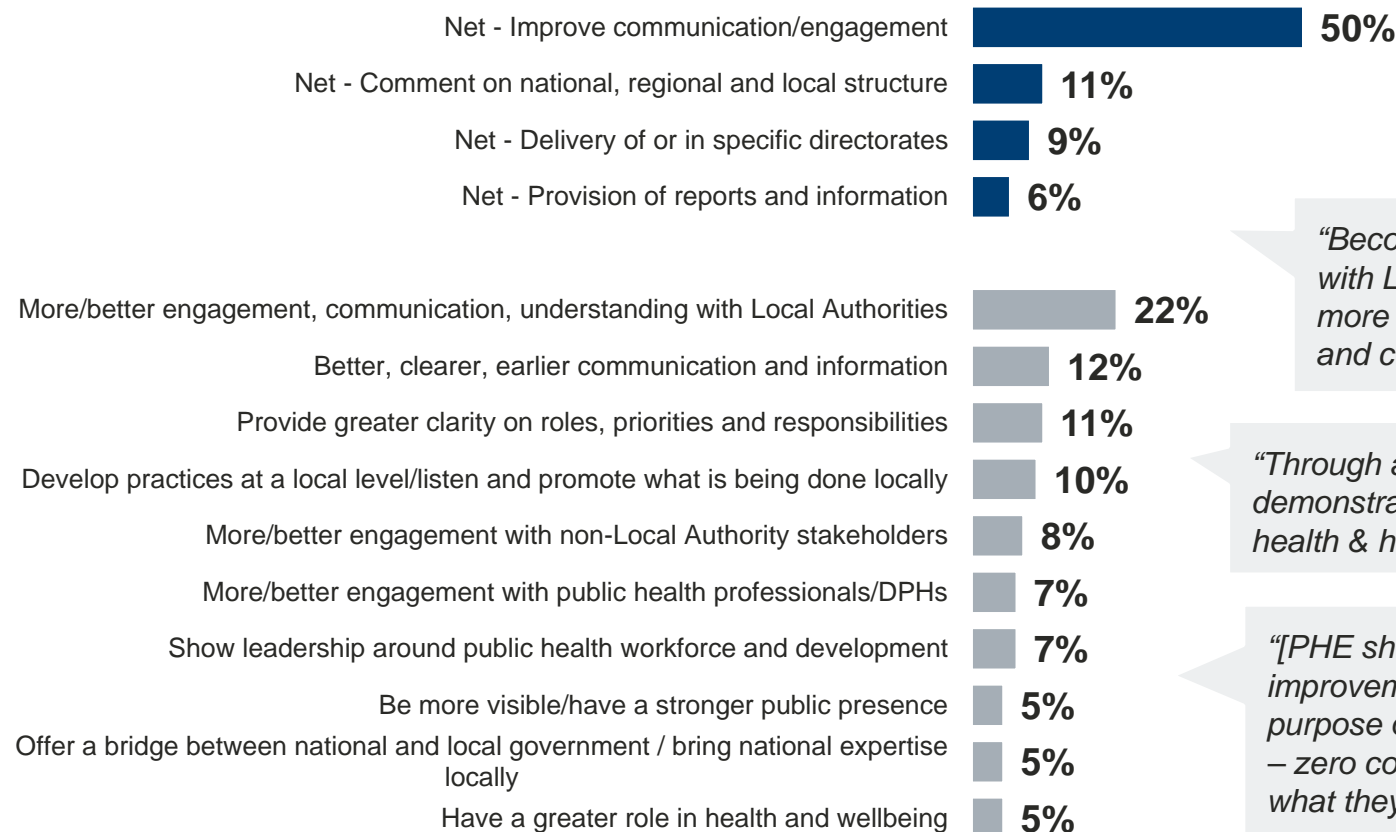
"Fragmentation of the system has made communication difficult, eg links with health protection are excellent but links with other parts of PHE are not so clear, as in what their role is or position or stance." (DPH)

"The challenges we face reflect those faced by PHE itself - the lack of cohesion between public health, NHS structures and DH, resulting in challenges to tackle issues in an integrated way across the patient and system pathway." (National agency)

Stakeholders most commonly ask you to improve your communication and engagement

Q25 What advice would you give Public Health England to help it improve over the coming year?(unprompted)

Top 10 mentions shown



59% amongst LA stakeholders vs. 38% Non-LA stakeholders

“Become more locally focused. Work more with LAs on communication issues. Work more closely with existing PH networks and collaborative services.” (DPH)

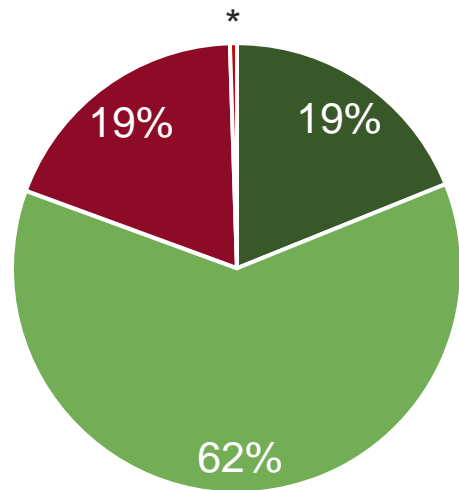
“Through all communications they need to demonstrate they’re supporting local public health & have localism on their agenda.” (DPH)

“[PHE should] sort out what the health improvement offer is at local level. Explain the purpose of the extra tier of the regional teams – zero contact with them and have no idea what they do or why they exist.” (DPH)

Familiarity and contact with Public Health England

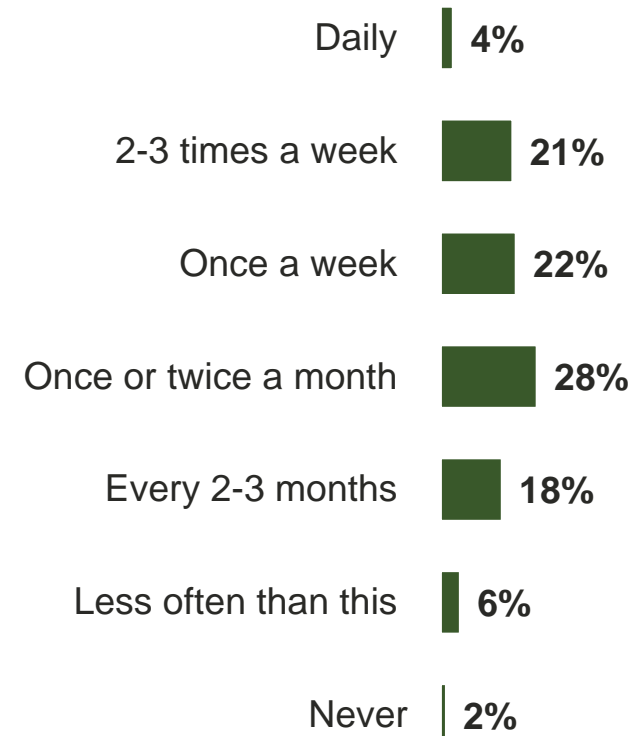
Public Health England is well known by its stakeholders

Q1 How well, if at all, do you feel you know Public Health England? Would you say you know it...
Q2 How often, approximately, would you say you are in contact with Public Health England?



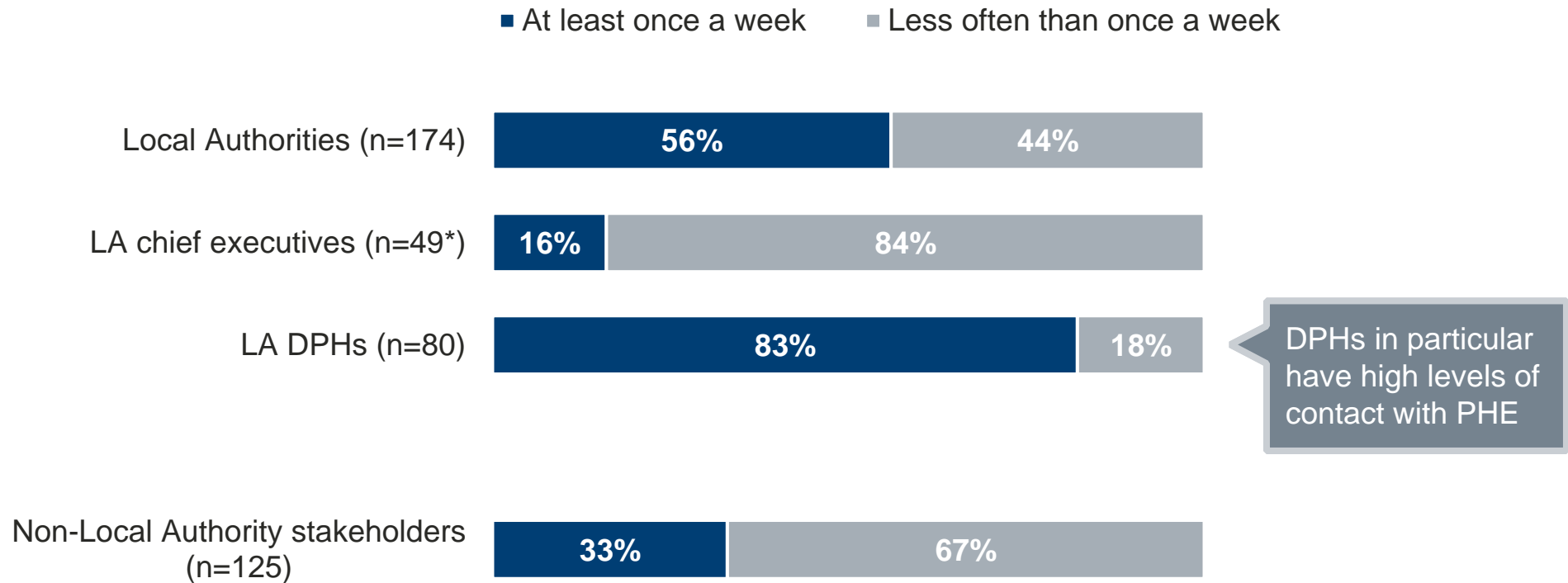
- Very well
- A fair amount
- Just a little bit
- Heard of but know nothing

- The stakeholders surveyed feel they know the organisation well and have a high level of contact with PHE
- Throughout the survey a strong relationship is observed between frequency of contact and perceptions of PHE, with those in more regular contact responding more positively



Local Authority stakeholders are in more regular contact with PHE compared to other stakeholders surveyed

Q2 How often, approximately, would you say you are in contact with PHE?



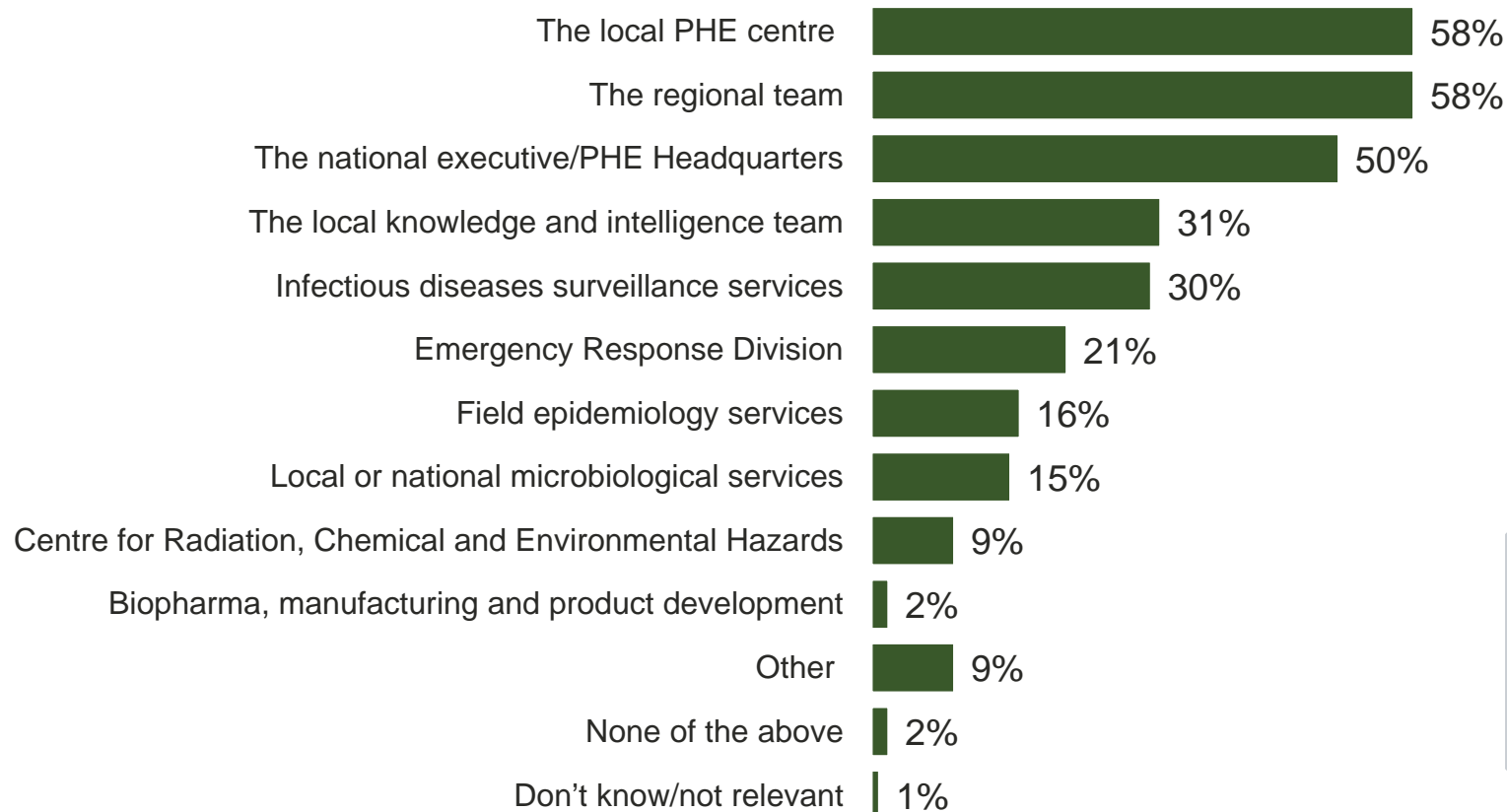
* Caution: small base size

Base: All respondents

Source: Ipsos MORI

Given the high proportion of Local Authority stakeholders surveyed, the most common points of contact with PHE are through the local centres and regional teams

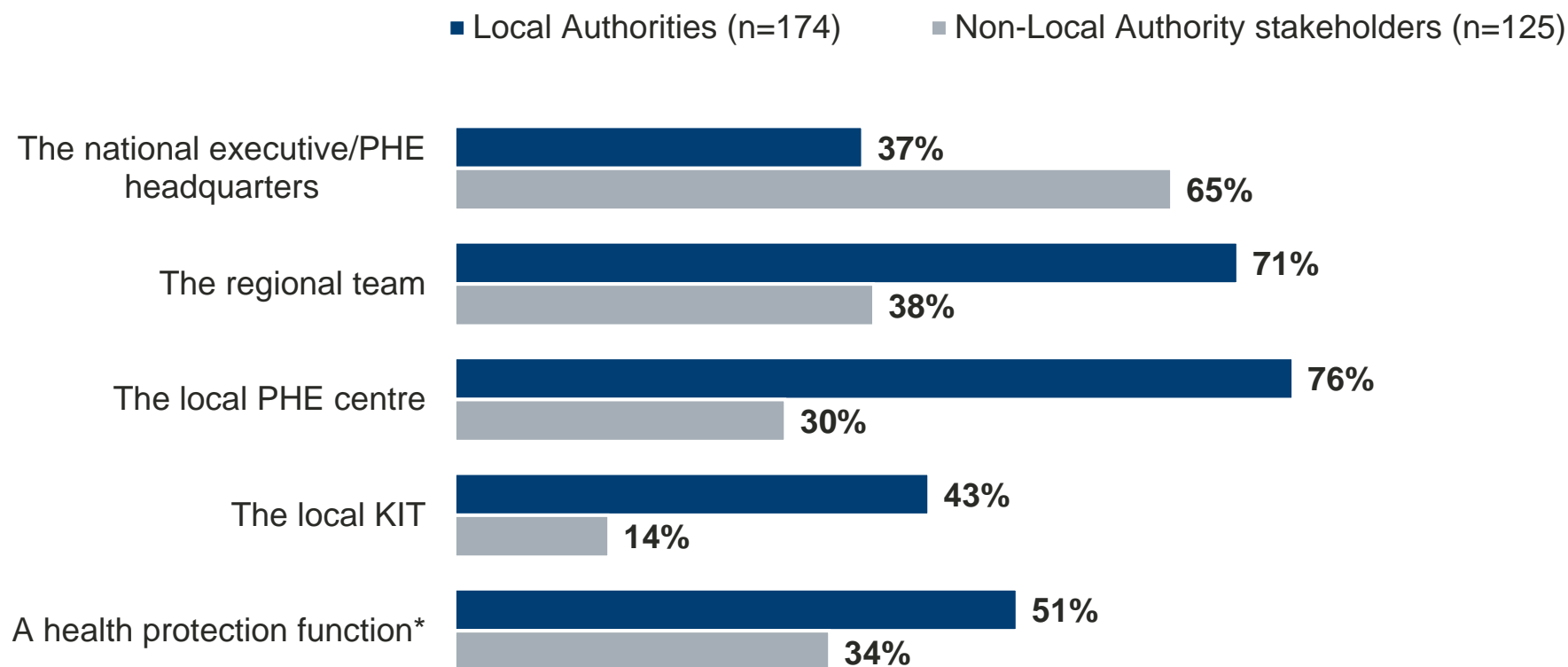
Q3 Which of the following centres or directorates within Public Health England do you currently interact with? (Prompted)



Stakeholders have multiple contact points within PHE (see appendix)

With the exception of the national executive, Local Authorities have greater interaction with a number of contact points within PHE

Q3 Which of the following centres or directorates within PHE do you currently interact with?



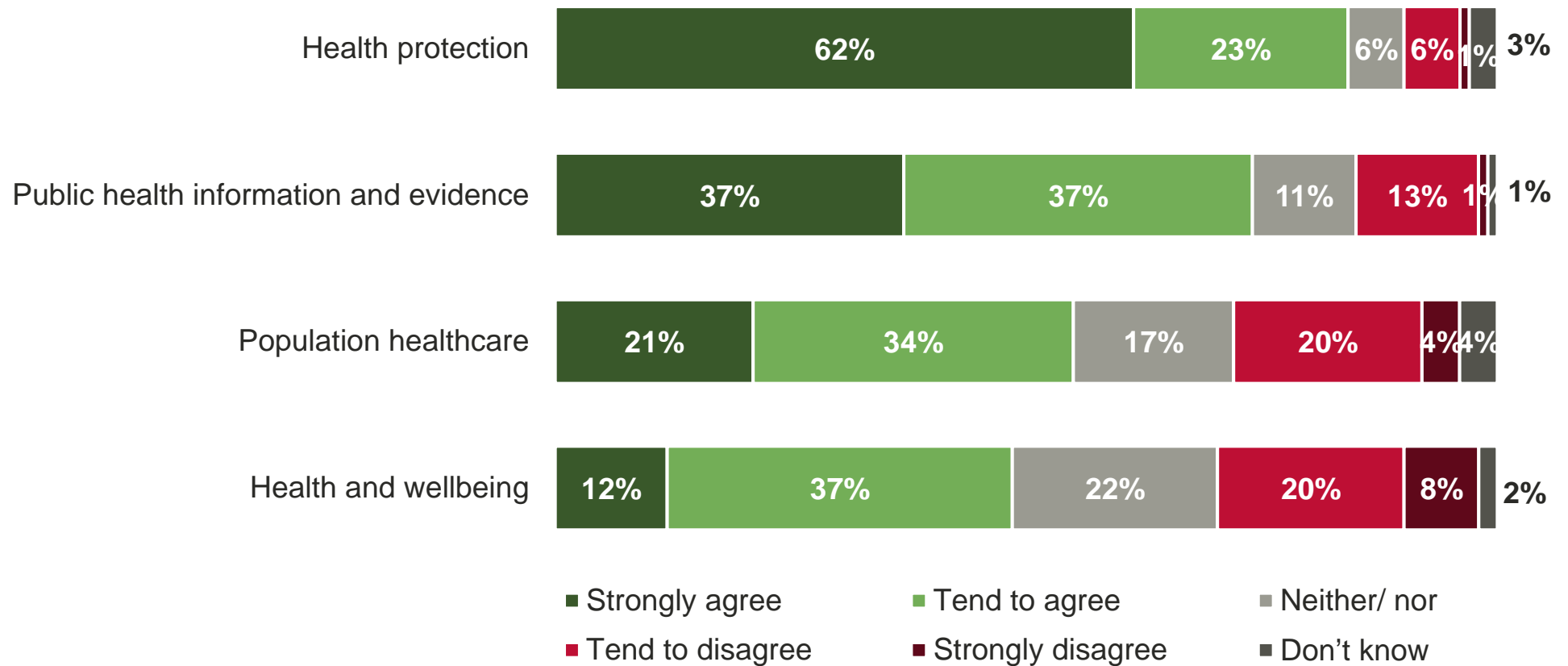
* Infectious disease surveillance services; Emergency Response Division; Field epidemiology services; Local or national microbiological services; Centre for Radiation, Chemical and Environmental Hazards; Biopharma, manufacturing and product development

Base: All respondents

Source: Ipsos MORI

PHE primarily seen as a first port of call for health protection advice

Q16 To what extent do you agree or disagree that “Public Health England would be one of my first ports of call for advice relating to...”



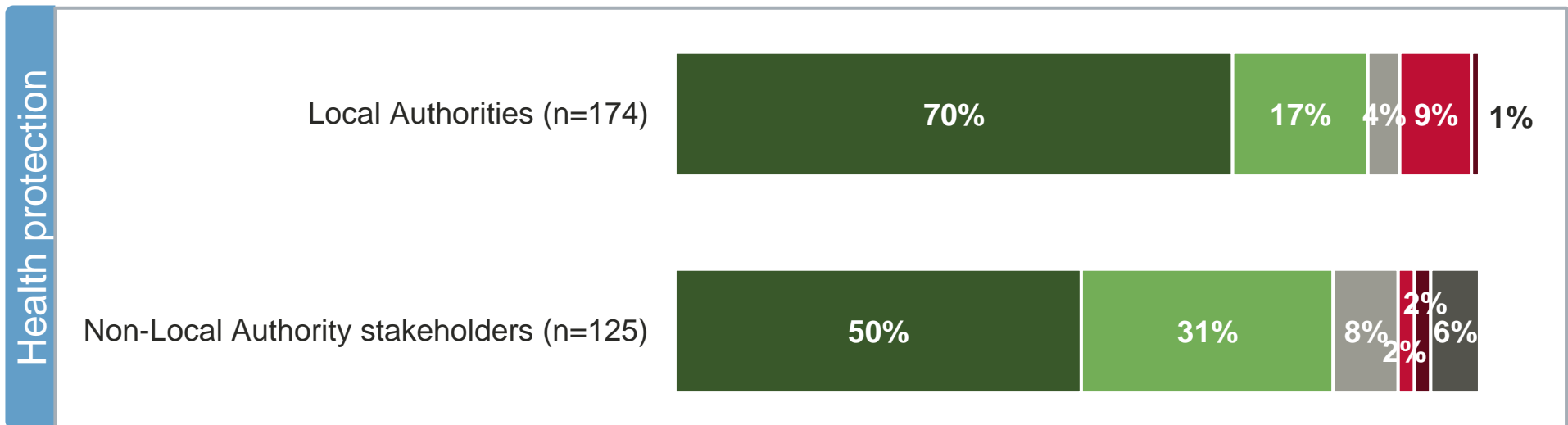
Base: All respondents (299), 6-31 January 2014

Source: Ipsos MORI

Local Authorities are particularly likely to turn first to PHE for advice concerning health protection

Q16 To what extent do you agree or disagree that “Public Health England would be one of my first ports of call for advice relating to...”

- Strongly agree
- Tend to agree
- Neither / nor
- Tend to disagree
- Strongly disagree
- Don't know



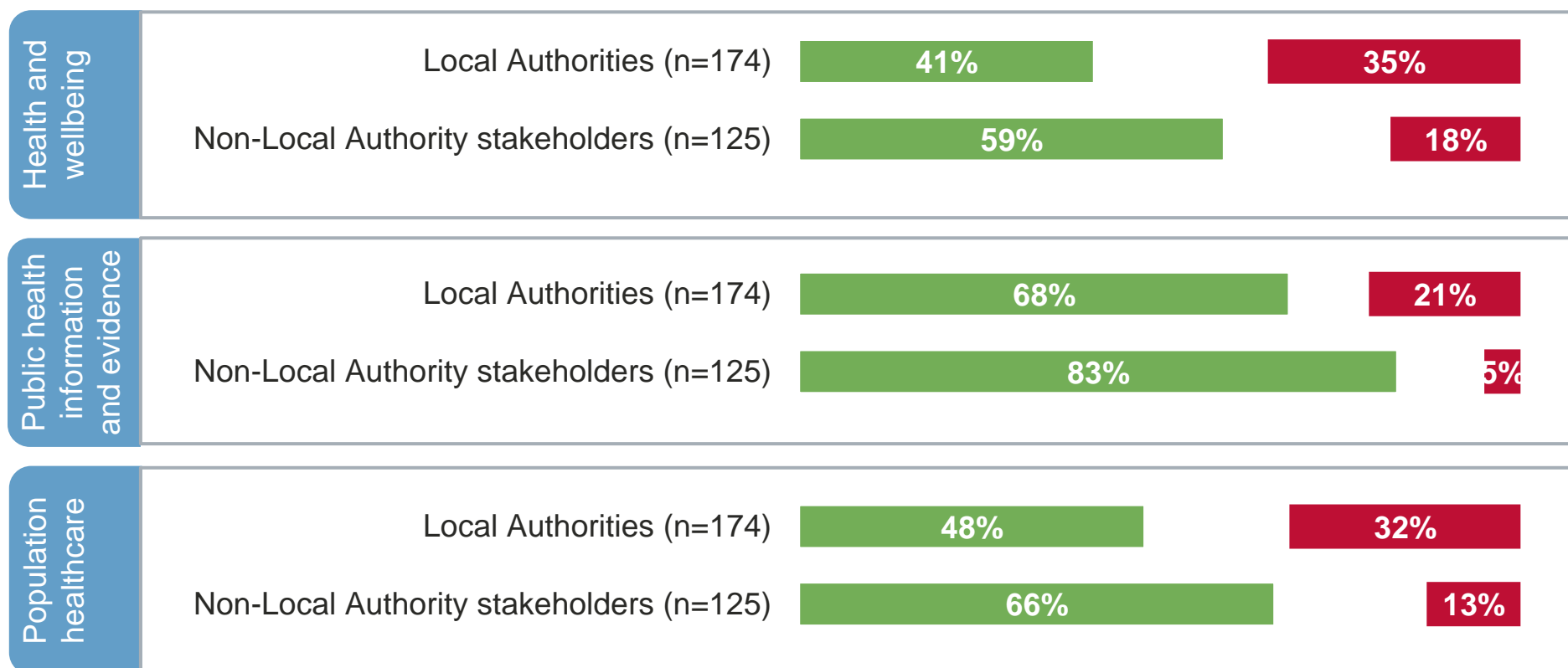
Base: All respondents

Source: Ipsos MORI

Other stakeholders are more likely to turn first to PHE for advice concerning health and wellbeing, information and evidence, and population healthcare

Q16 To what extent do you agree or disagree that “Public Health England would be one of my first ports of call for advice relating to...”

■ Strongly/tend to agree ■ Strongly/tend to disagree



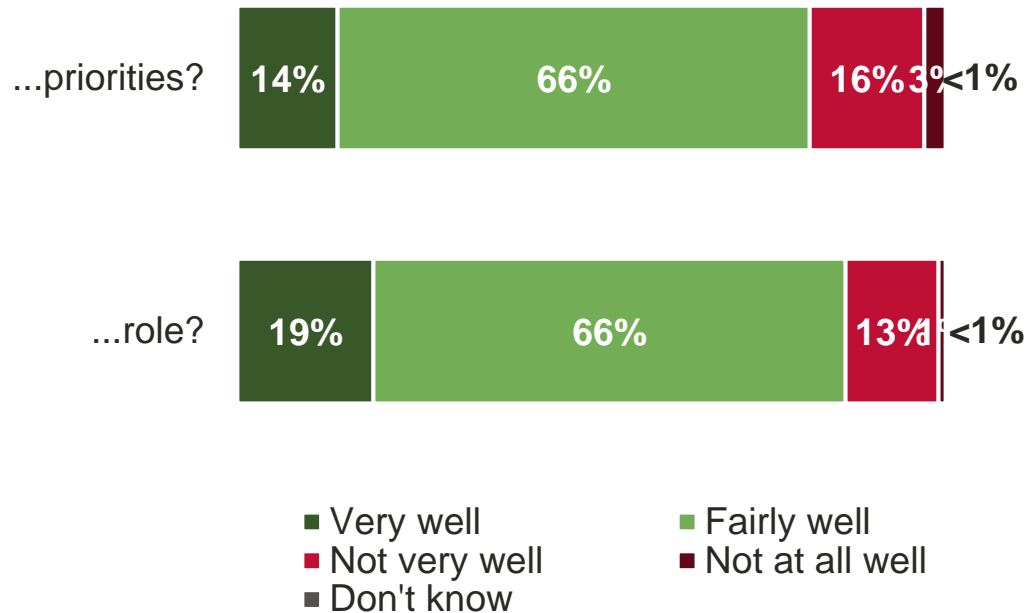
Base: All respondents

Source: Ipsos MORI

Public Health England's role and priorities

Stakeholders feel they have a good understanding of PHE's roles and priorities

Q6/Q7 How well would you say you understand PHE's...



- There is a high level of understanding from all stakeholder groups with regards to PHE's priorities and role, though it is particularly high amongst DPHs (93% understand priorities well)
- Stakeholders in touch with PHE less than once a week still have high levels of understanding of its priorities and role. 73% say they understand PHE's priorities very/fairly well (compared with 88% of those in touch at least once a week) and 83% say they understand PHE's role very/fairly well (compared with 88% of those in touch at least once a week)

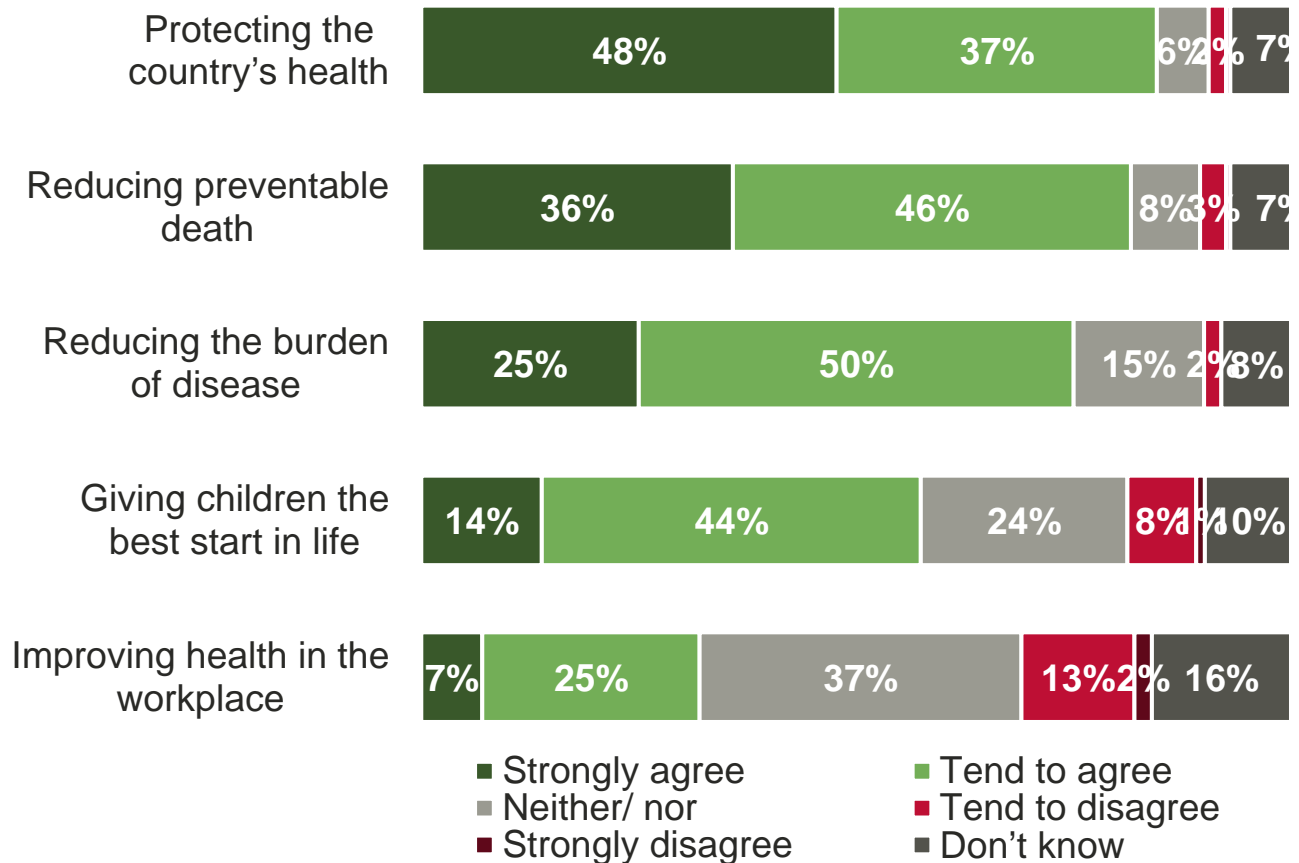
Base: All respondents (299), in contact at least once a week (139), in touch less than once a week (160), 6-31 January 2014

Source: Ipsos MORI

PHE is seen to focus less on giving children the best start in life and improving health in the workplace than its other priorities

Q8 To what extent do you agree or disagree that Public Health England is prioritising the following areas in its work?

- There are high levels of agreement that PHE is prioritising *protecting the country's health* (86%), reducing *preventable deaths* (82%) and the *burden of disease* (75%) in its work
- *Giving children the best start in life* (58%) and *improving health in the workplace* (32%) are believed to be the areas least prioritised by PHE
- Those in more regular contact with PHE are more likely to agree PHE is prioritising all areas listed compared to those in less frequent contact

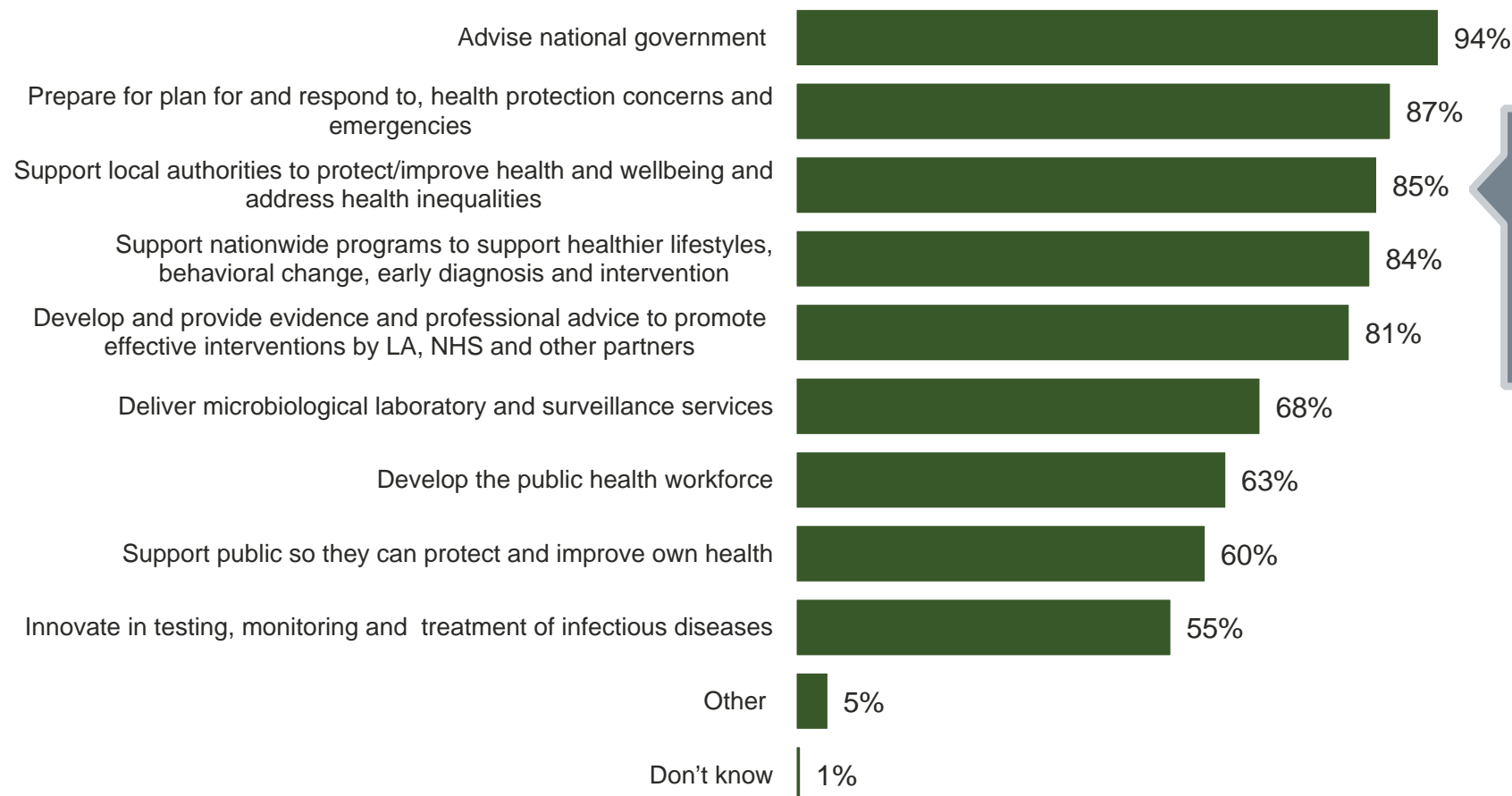


Base: All respondents (299), 6-31 January 2014

Source: Ipsos MORI

PHE is seen to have a diverse set of functions

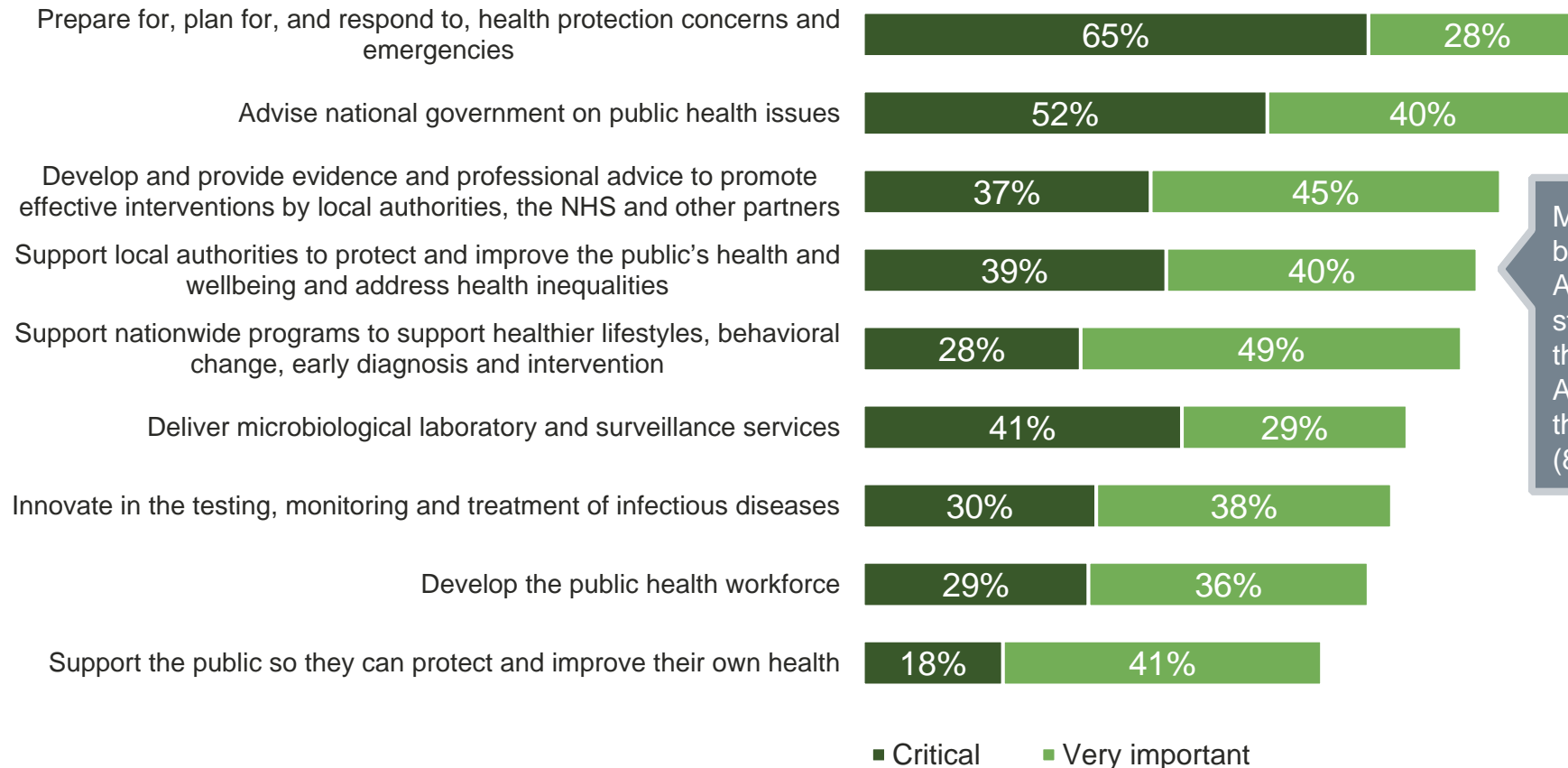
Q9 Which of the following statements, if any, best describe the functions of Public Health England?
(Prompted)



Mentioned by Local Authority stakeholders and other stakeholder groups equally (83% vs. 89% respectively)

Many of PHE's core functions are considered critical or important to perform

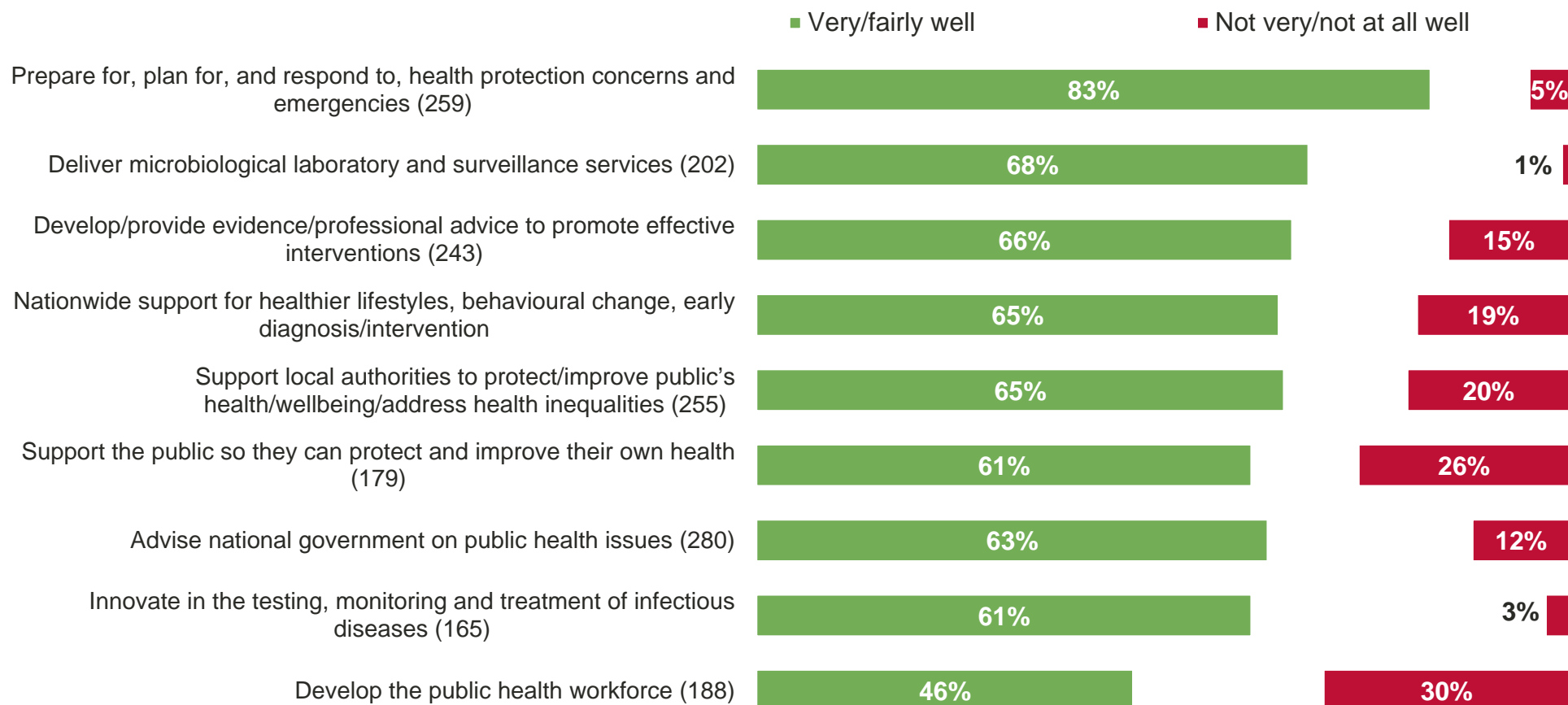
Q11 How important, if at all, is it for Public Health England to perform the following functions?



Mentioned more by non-Local Authority stakeholders than Local Authorities themselves (86% vs. 74%)

PHE is seen to be performing its health protection function particularly well, but development of the public health workforce is rated less well

Q10 How well, if at all, do you think Public Health England performs each of the following functions?

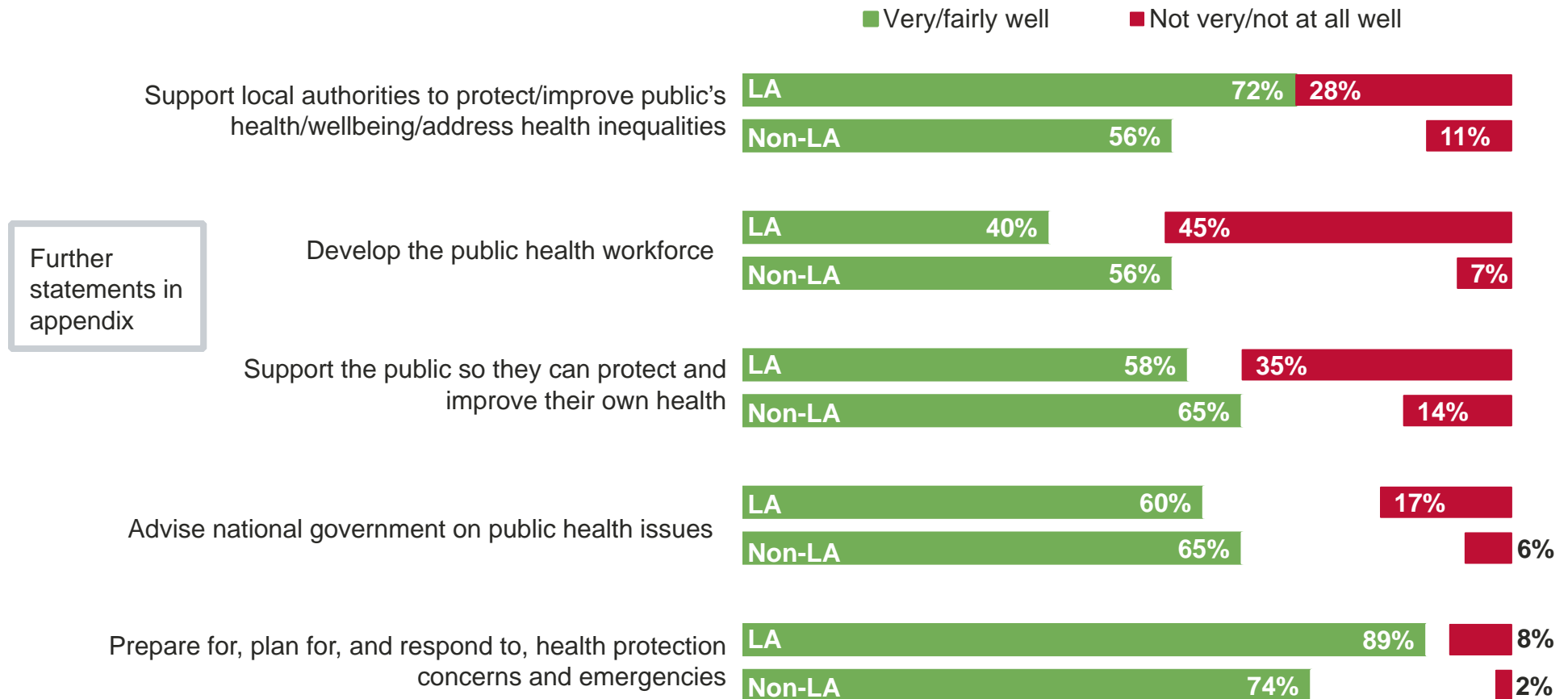


Base: All who selected statement as a function of PHE at Q9, 6-31 January 2014

Source: Ipsos MORI

Local Authority stakeholders are better able to give an opinion on PHE's performance

Q10 How well, if at all, do you think Public Health England performs each of the following functions?



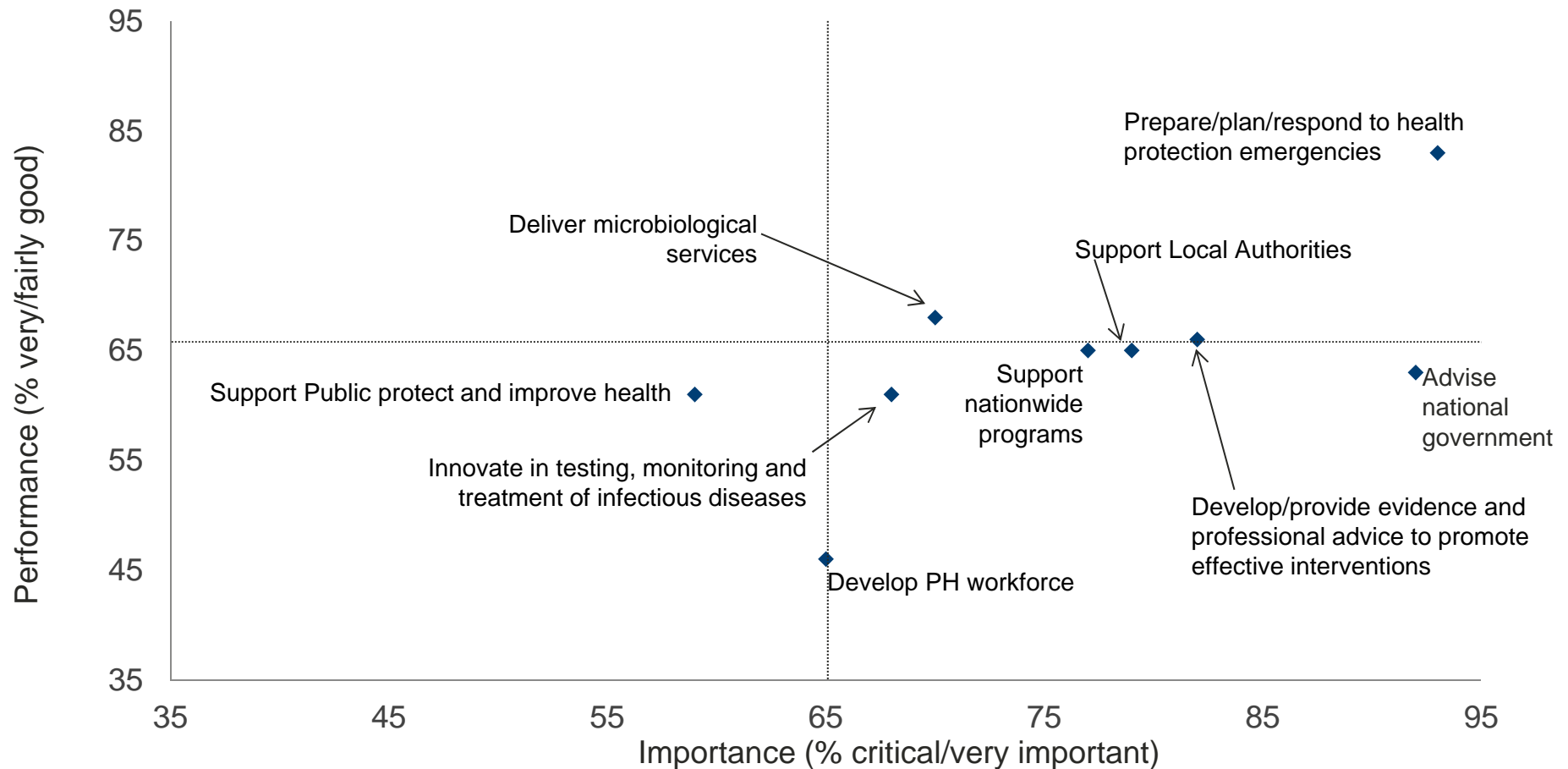
Further statements in appendix

Base: All who selected statement as a function of PHE at Q9, 6-31 January 2014

Source: Ipsos MORI

There are some functions which require (relatively) more work to improve them given their importance

Q10/Q11

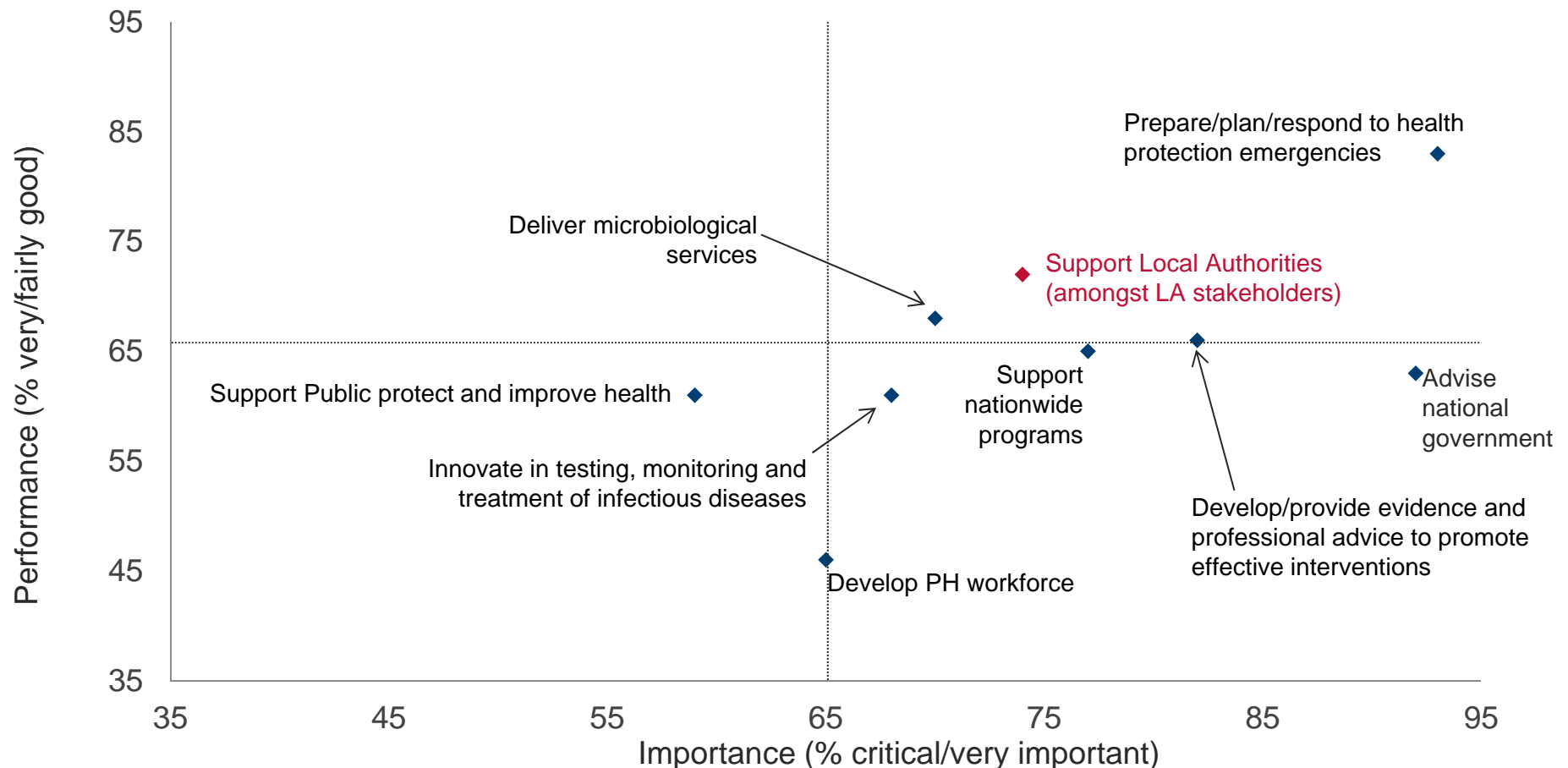


Base: Q10 performance: All who selected statement as a function of PHE at Q9. Q11 importance: All stakeholders (299)

Source: Ipsos MORI

Local Authorities rate the support provided to them more highly than other stakeholders who are less able to comment on this function

Q10/Q11

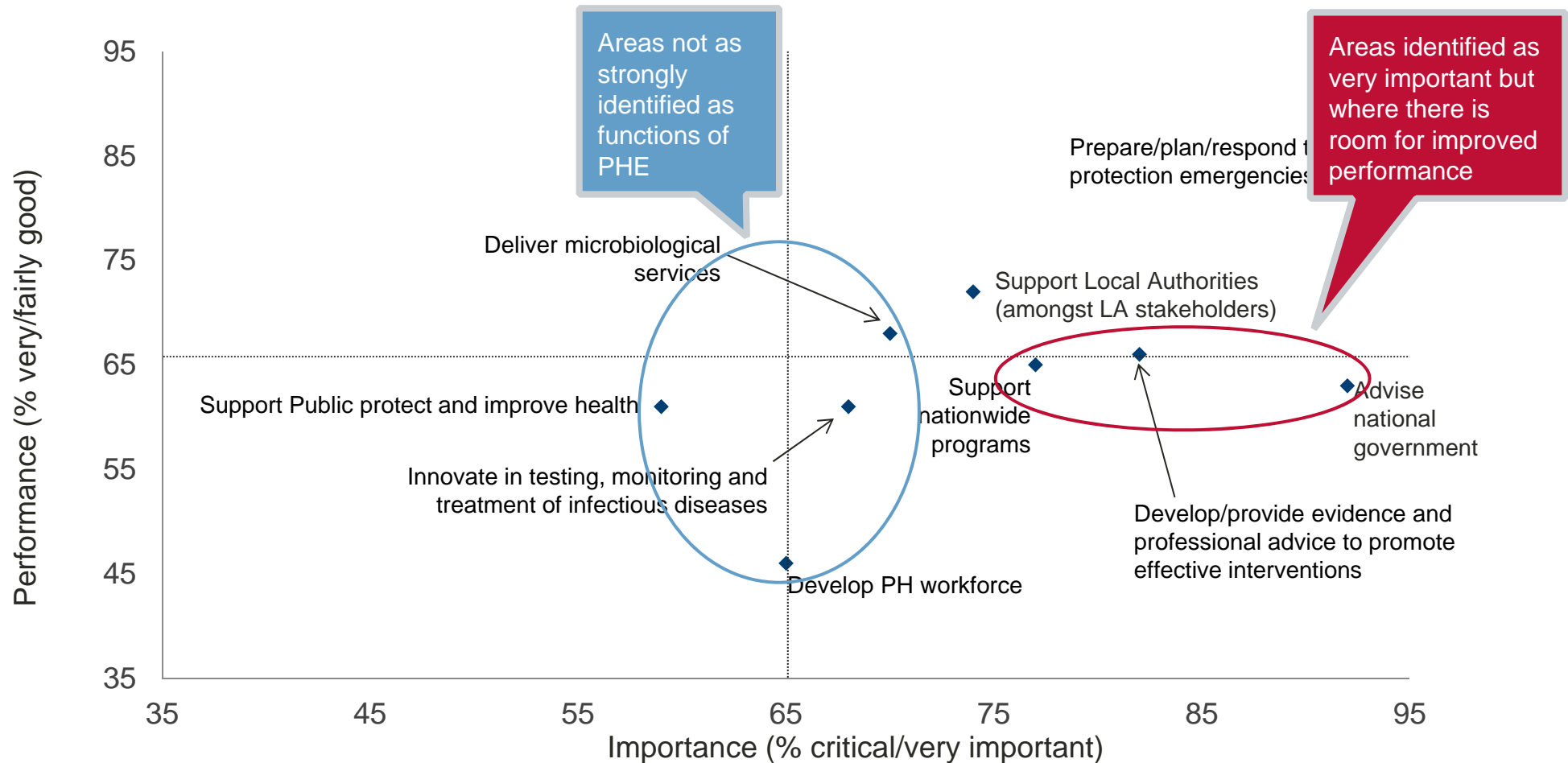


Base: Q10 performance: All who selected statement as a function of PHE at Q9. Q11 importance: All stakeholders (299). 'Support Local Authorities' shown for Local Authority stakeholders only Q10 (144). Q11 (174)

Source: Ipsos MORI

Leaving two possible strategies for improvement

Q10/Q11



Base: Q10 performance: All who selected statement as a function of PHE at Q9. Q11 importance: All stakeholders (299). 'Support Local Authorities' shown for Local Authority stakeholders only Q10 (144), Q11 (174)

Source: Ipsos MORI

PHE's early impact and focus

PHE's greatest impact felt at an individual level at present

Q14 What impact, if any, has Public Health England had on...?

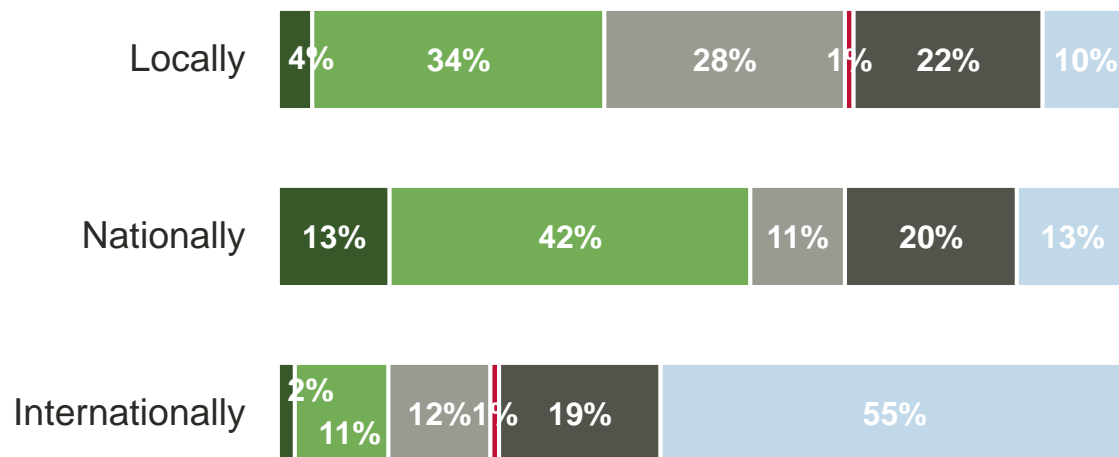
- PHE is presently seen to have the biggest impact on stakeholders' own job role and their organisation
- Almost a third say it is too soon to judge PHE's impact on the health and social care sector (30%)
- Local Authority stakeholders are more likely than others to comment that PHE has 'made no difference' to their work or their organisation, whilst other stakeholders are more likely to suspend judgement at this stage – saying it is 'too soon to tell' or they 'don't know'



PHE's impact is also felt nationally, more so than locally or internationally

Q15 What impact, if any, has Public Health England had on public health issues...

- A large positive impact
- It has made no difference
- Too soon to say
- A small positive impact
- A small/large negative impact
- Don't know/ not relevant



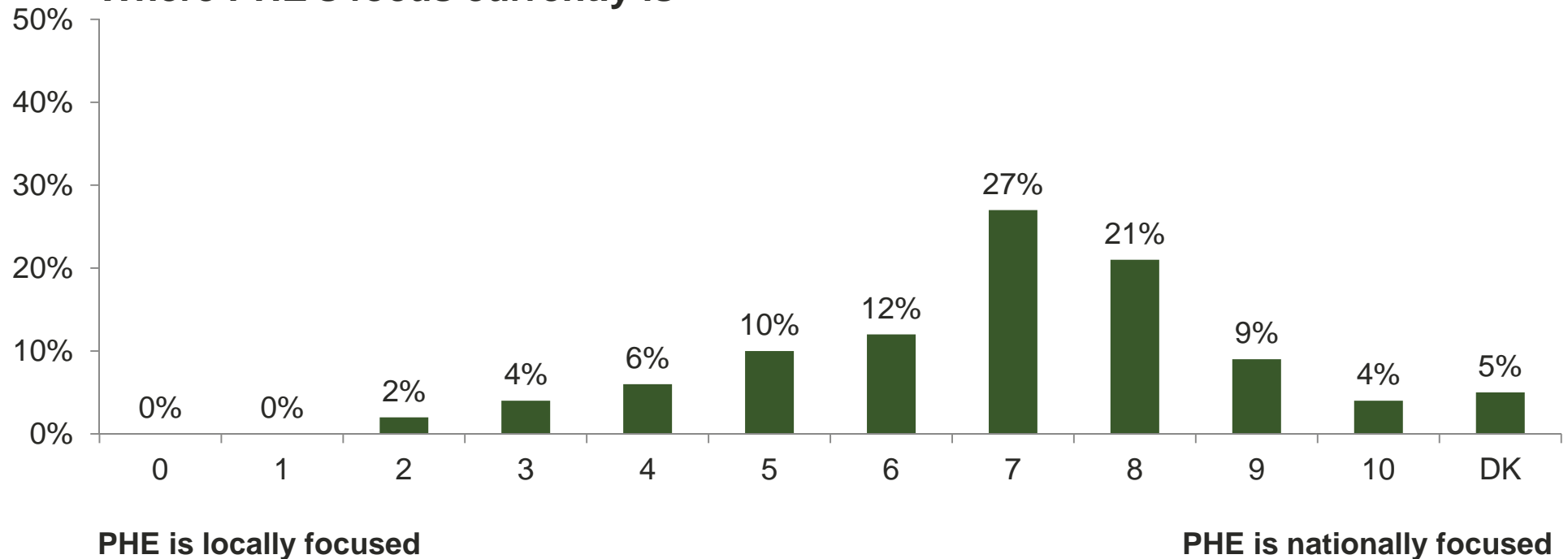
- PHE is seen as having a greater positive impact nationally rather than locally (55% vs. 38%) whilst a higher proportion of stakeholders say it has, as of yet, made no difference on public health issues locally (28%) compared to nationally (11%)
- When asked about PHE's international impact, the majority of stakeholders felt they did not know, or it was too soon to tell (74%)
- Very low levels observed for PHE having a negative impact
- Local Authority stakeholders are more likely to say PHE has had an impact locally (44% compared with 30% for all other groups)

Accordingly, PHE is currently seen as more nationally focused than locally focused

Q18a Below are two statements representing either end of a scale from 0 to 10... please tell me where your view of Public Health England's work currently sits on this scale.

Mean score 6.76

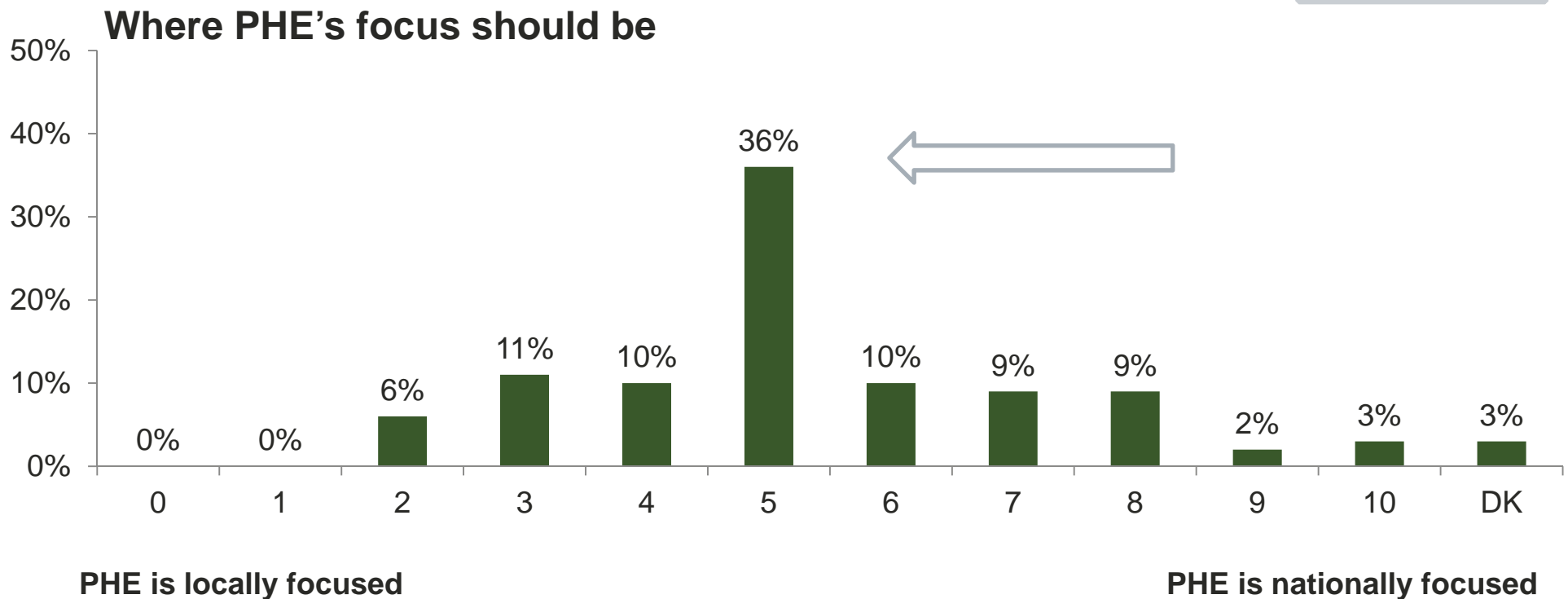
Where PHE's focus currently is



There are calls for PHE to become more balanced in its national/local focus

Q18b Below are two statements representing either end of a scale from 0 to 10... using the same scale, please tell me where you think Public Health England's focus **should** be

Mean score 5.31

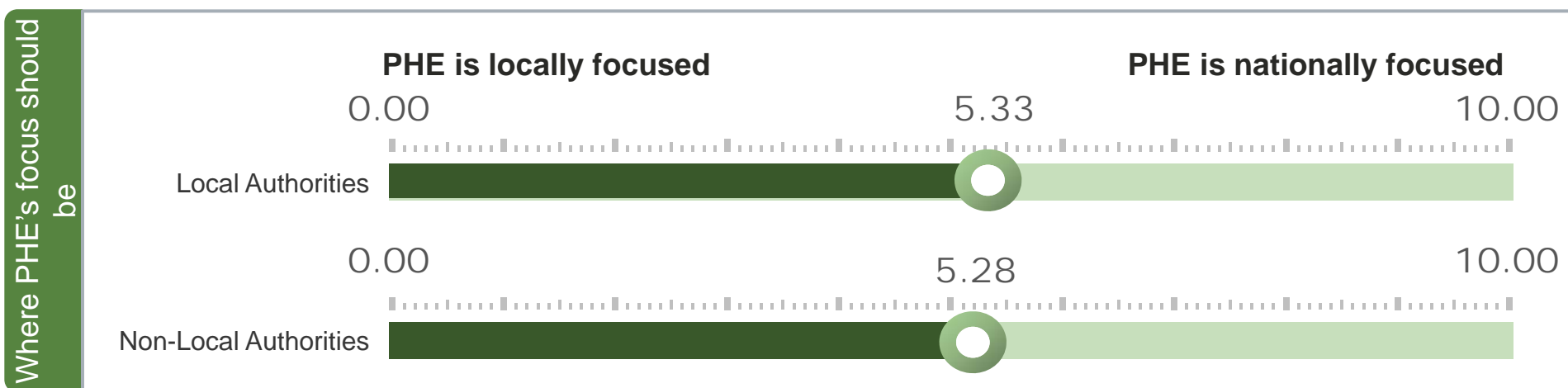
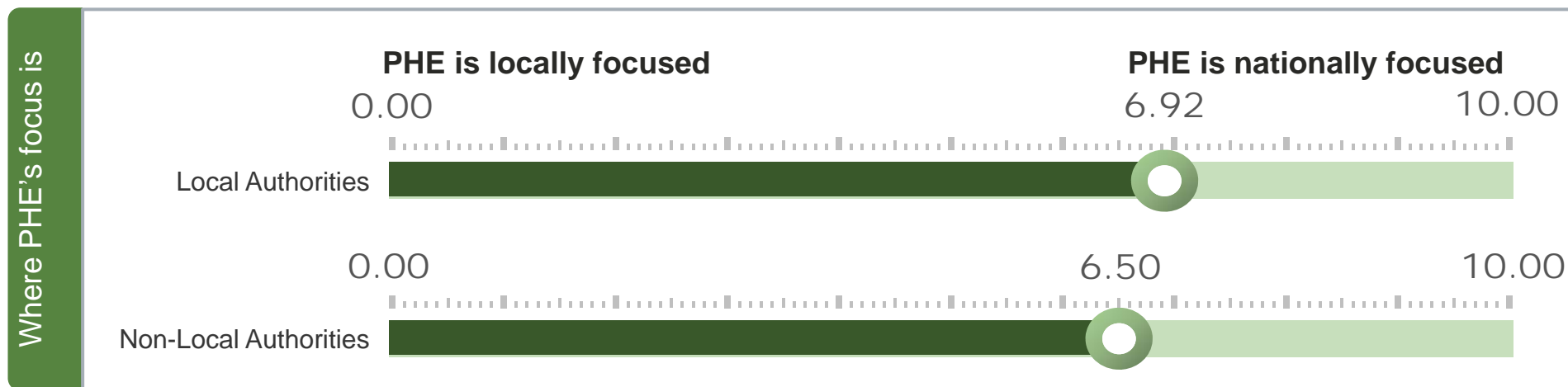


Base: All respondents (299), 6-31 January 2014

Source: Ipsos MORI

Local Authority stakeholders are more likely to claim PHE has a national focus at present

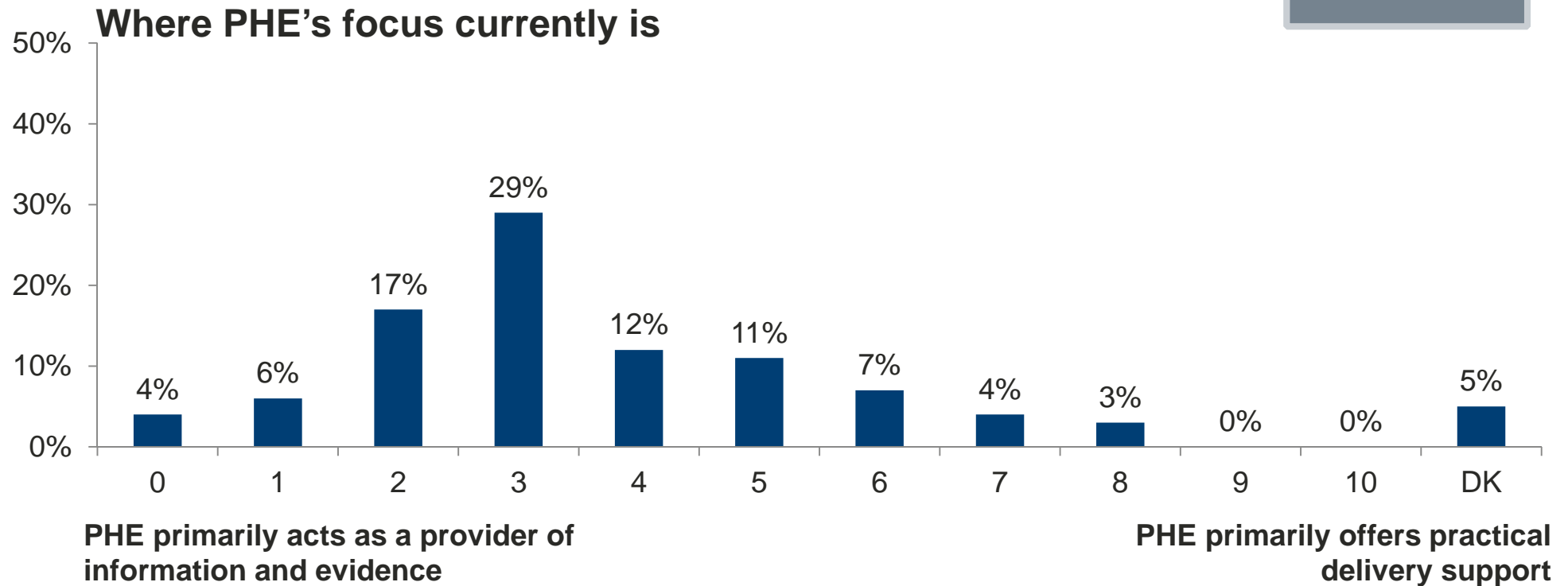
Q18a/b – Below are two statements representing either end of a scale from 0 to 10... local/national split



PHE primarily seen as a provider of information and evidence

Q17a Below are two statements representing either end of a scale from 0 to 10... please tell me where your view of Public Health England's work currently sits on this scale.

Mean score 3.51

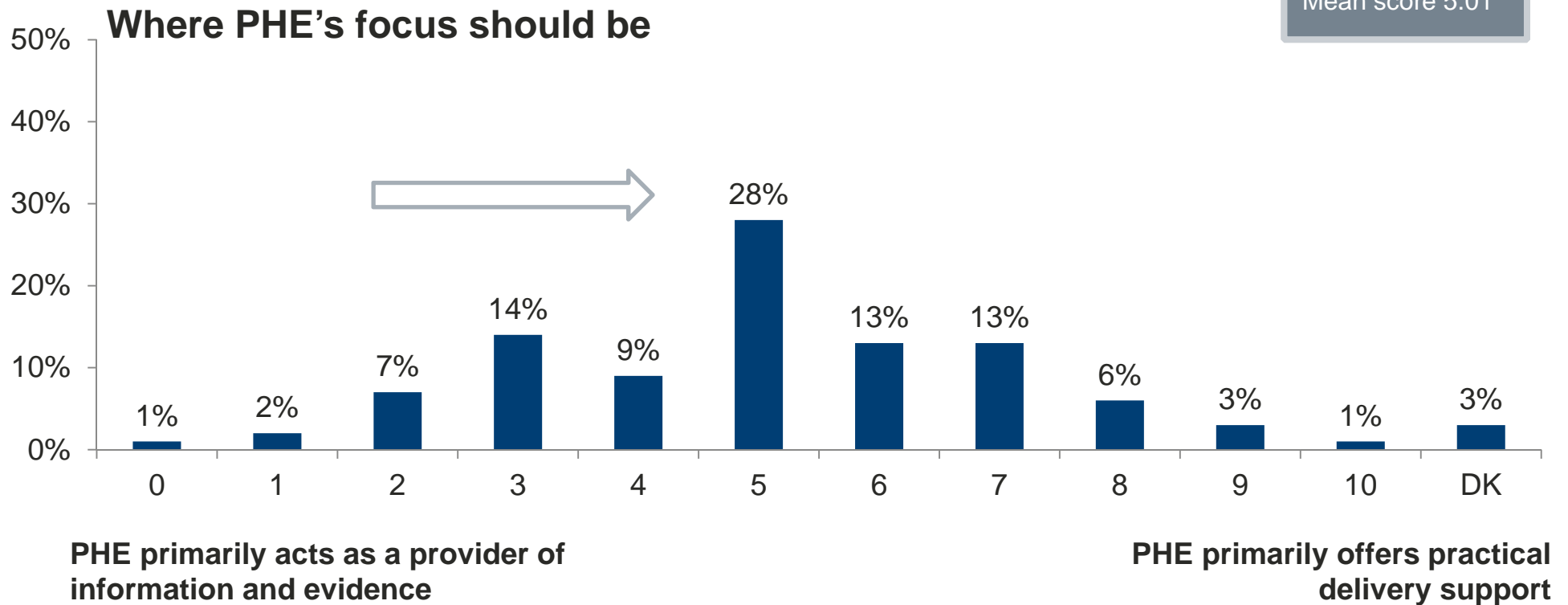


Base: All respondents (299), 6-31 January 2014

Source: Ipsos MORI

But again, stakeholders would like to see a more balanced focus for PHE in terms of the support it provides

Q17b Below are two statements representing either end of a scale from 0 to 10... Using the same scale, please tell me where you think Public Health England's focus **should** be

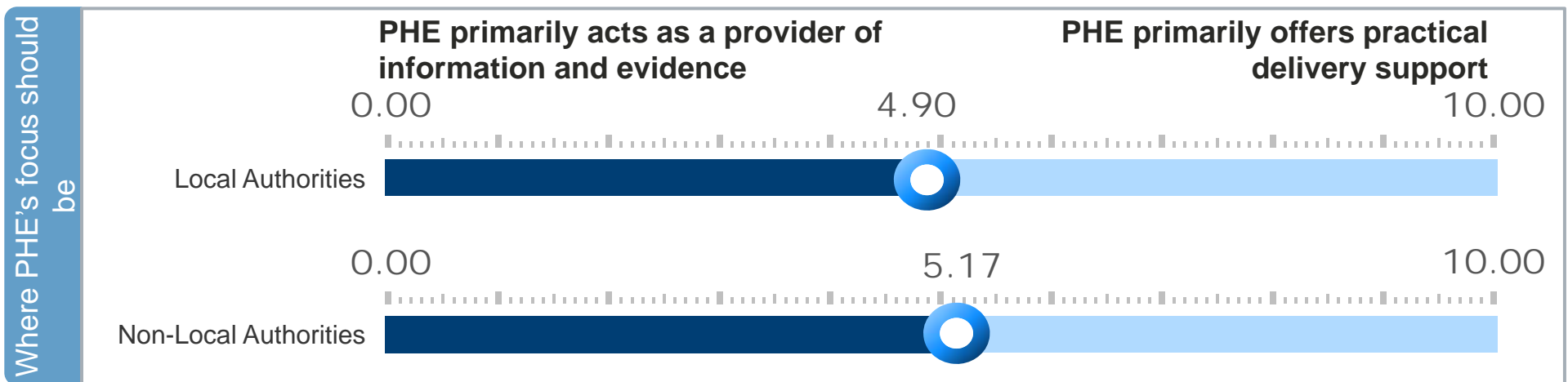
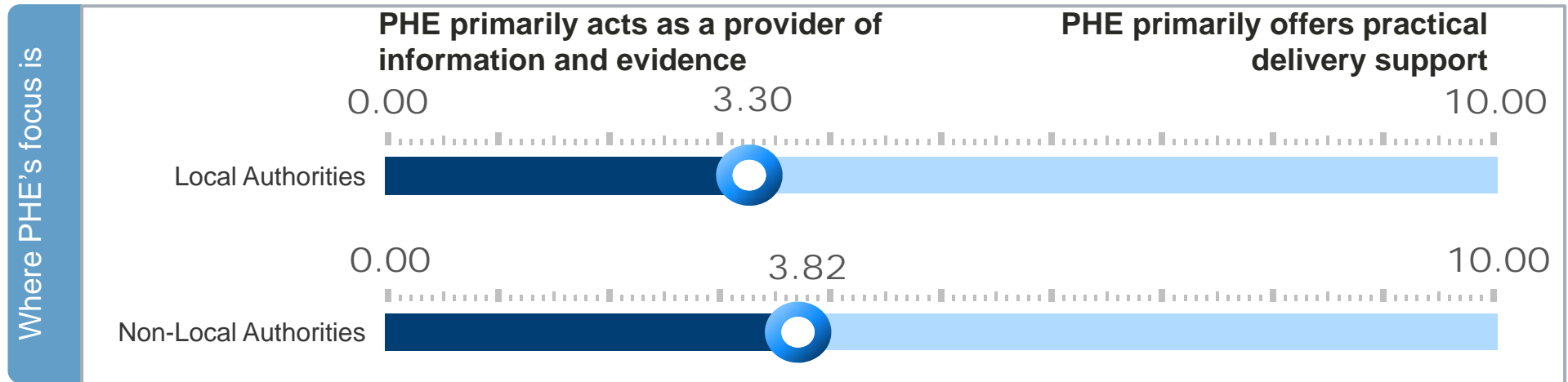


Base: All respondents (299), 6-31 January 2014

Source: Ipsos MORI

Both Local Authority stakeholders and others want a more balanced focus for PHE in terms of the information and support it provides

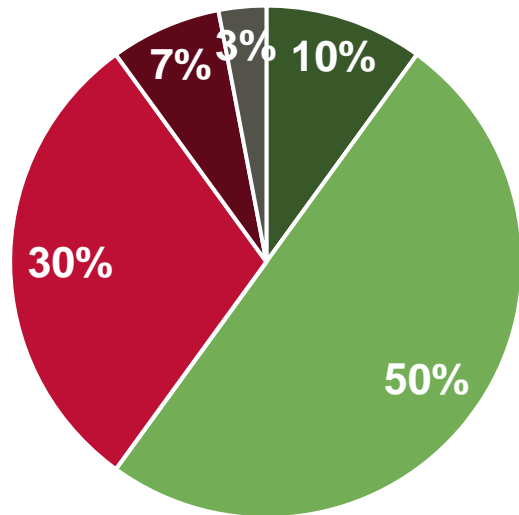
Q17a/b – Below are two statements representing either end of a scale from 0 to 10... evidence/delivery



Working relationships

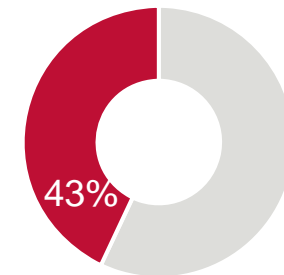
Stakeholders feel that PHE understand the responsibilities of their organisations, but Local Authorities are less positive

Q19 How well do you think Public Health England understands the responsibilities of your organisation?

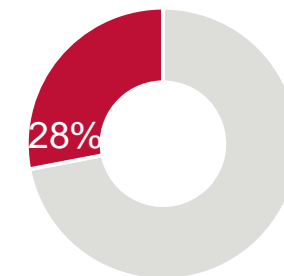


- Very well
- Fairly well
- Not very well
- Not at all well
- Don't know/not relevant

- Just under two-thirds of stakeholders feel PHE understands the responsibilities of their organisation (60%)
- Local Authority stakeholders are more likely to say PHE does not understand the responsibilities of their organisation well (43% vs. 28% of non-Local Authority stakeholders)



Not very/not at all well
LA stakeholders

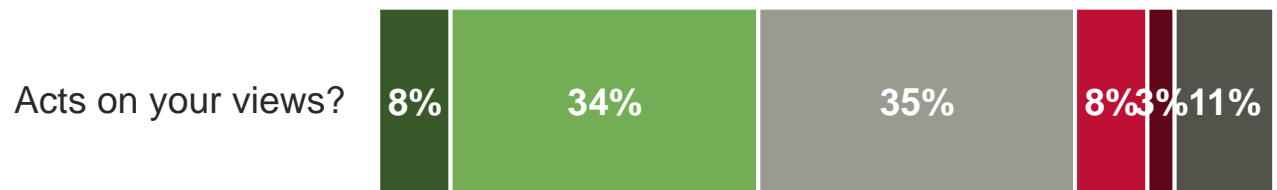


Very/fairly good
Non-LA stakeholders

PHE is generally thought to be listening to its stakeholders

Q20 Overall, to what extent are you satisfied or dissatisfied that Public Health England...

- Stakeholders are more likely to say PHE listens to their views than acts on their views, but levels of dissatisfaction remain low for both
- Local Authority stakeholders display a higher level of dissatisfaction, with 13% dissatisfied that PHE listens to their views (compared with 3% of other stakeholders) and 15% dissatisfied PHE acts on their views (vs. 6%)
- Higher levels of satisfaction for PHE listening are seen amongst those in more frequent contact with PHE



- Very satisfied
- Fairly satisfied
- Neither/Nor
- Fairly dissatisfied
- Very dissatisfied
- Don't know/ not relevant

And most stakeholders have a clear point of contact within PHE

Q21 To what extent do you agree or disagree with the following statements about Public Health England:

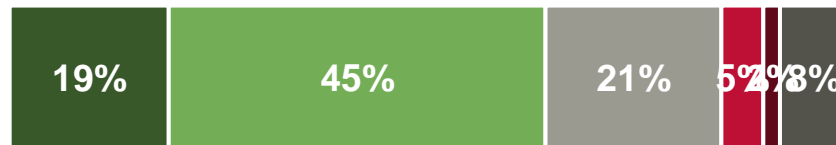
I have a clear point of contact to get in touch with Public Health England



When I contact Public Health England, I generally receive a prompt response



When I contact Public Health England, I generally receive what I need

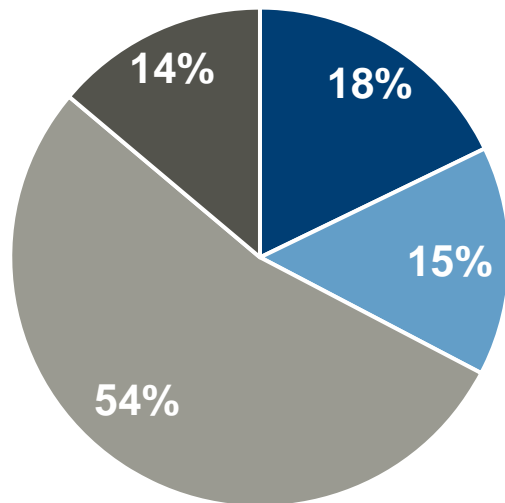


- Strongly agree
- Tend to agree
- Neither/ nor
- Tend to disagree
- Strongly disagree
- Don't know

- A high proportion of stakeholders say they have a clear point of contact within PHE (86%) and that they generally receive a prompt response (79%)
- Agreement with these statements is higher for those stakeholders with more frequent contact with PHE

Stakeholders are broadly satisfied with the quantity of information they receive from PHE

Q23 Thinking about the volume of information you receive from Public Health England, would you say it is...?



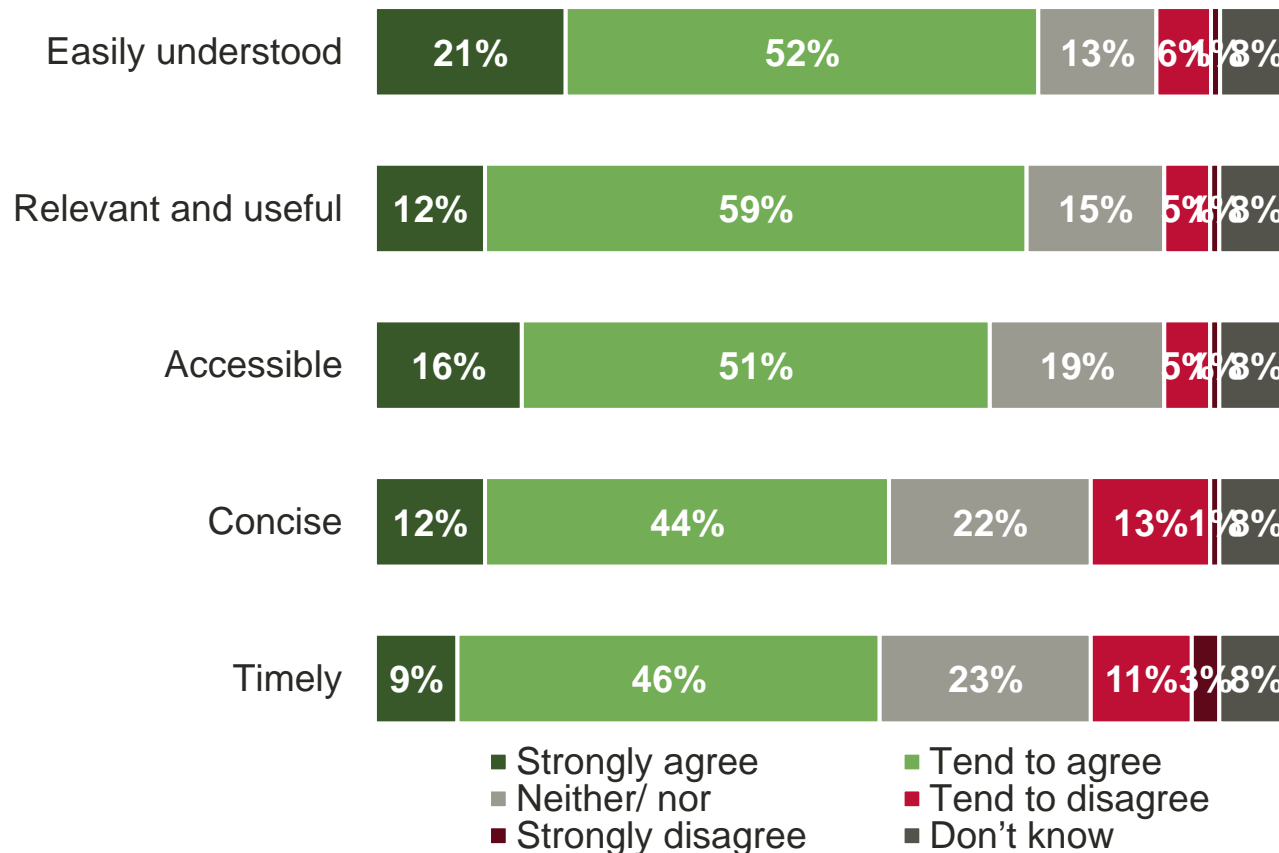
- Too much – I do not have time to look at all the material which comes to me
- Too little – I expect more information and advice
- About the right amount
- Don't know/not relevant

- Just over half of all stakeholders think they get the right quantity of information from PHE (54%) with an even split amongst those saying they receive too much (18%) or too little (15%)
- Local Authority stakeholders are more likely than others to say they receive too much information (26% vs. 6%) whilst other stakeholders are more likely to say they don't know (23% vs. 7% of Local Authority stakeholders)

"Target communication better; sometimes more is less – easy to feel bombarded. Shorter concise messages more impactful." (Council Chief Executive)

Communications are generally well-received, though could be more concise and timely

Q22 To what extent do you agree or disagree that communication material and resources you receive from Public Health England are:



- In general, PHE’s communication materials are well-received, with high levels of agreement that they are *easily understood* (73%), *relevant and useful* (71%), and *accessible* (67%)
- Communications are rated less well in terms of being *concise* (57%) and *timely* (55%)
- There is higher disagreement amongst Local Authority stakeholders that PHE’s communications are timely (18% vs. 10% of non-Local Authority stakeholders)
- Those with more regular contact with PHE are more satisfied with PHE’s communications across the board

Conclusions and implications

- The results from PHE's first ever stakeholder survey are encouraging. In the main, stakeholders are positive about PHE or remain neutral at this early stage in its development and levels of perceived independence are high
- Positivity towards PHE increases with frequency of contact, re-iterating the importance of regular engagement with stakeholders
- Local Authorities are broadly positive about PHE and this is boosted by their regular contact with PHE
- However, there are calls for PHE to improve its communication and engagement – particularly amongst Local Authority stakeholders – focusing on the quality of liaison (the extent to which stakeholders feel understood and listened to, and the delivery of more concise and timely information)
- PHE's inherited role in health protection is resonating more strongly with stakeholders than its responsibilities in relation to health and wellbeing, and PHE is not seen to be focusing on all of its 2013/14 key priorities evenly
- Stakeholders are keen to see a more even balance in PHE's focus between national and local priorities; it is thought to be too nationally focused at present

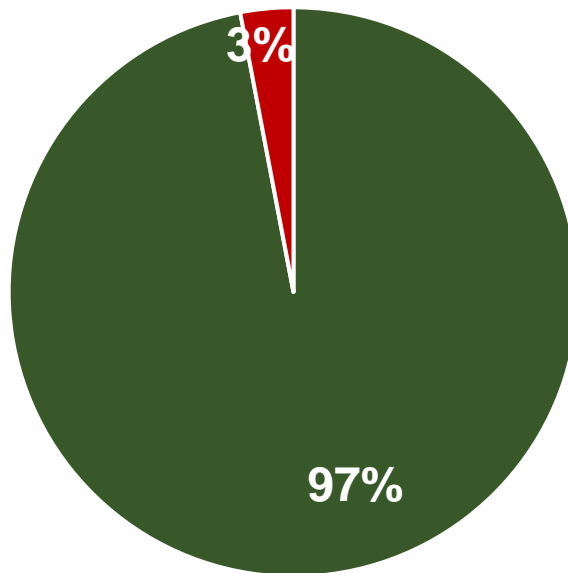
Appendix

- Questionnaire created to benchmark perceptions of PHE; 25 questions including two open-ended questions to gather more detailed feedback from respondents on PHE's performance and development
- Sample provided by PHE of 520 contacts (email and phone)
- Initial email sent by Duncan Selbie to advise and invite stakeholder to participate in survey
- Link to online survey sent via email (502 successful receipts) on 6th January; with an additional reminder email sent on 14th January
- Additional telephone phase from 20th January for two weeks
- Referrals by respondents to appropriate others within the organisation were accepted; approximately 30% of surveys were referred

Who we spoke to – referrals

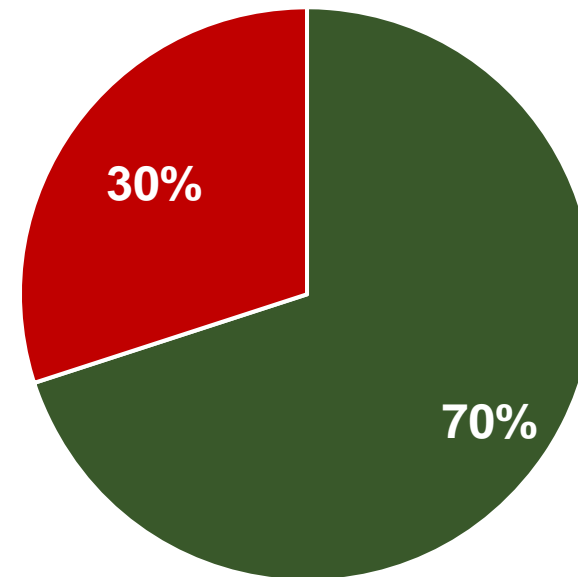
Can we confirm that... a) your organisation is/ b) your job title is ...correct?

Organisation



■ Yes, correct ■ No

Job title



■ Yes, correct ■ No

Respondent numbers by group

Regions

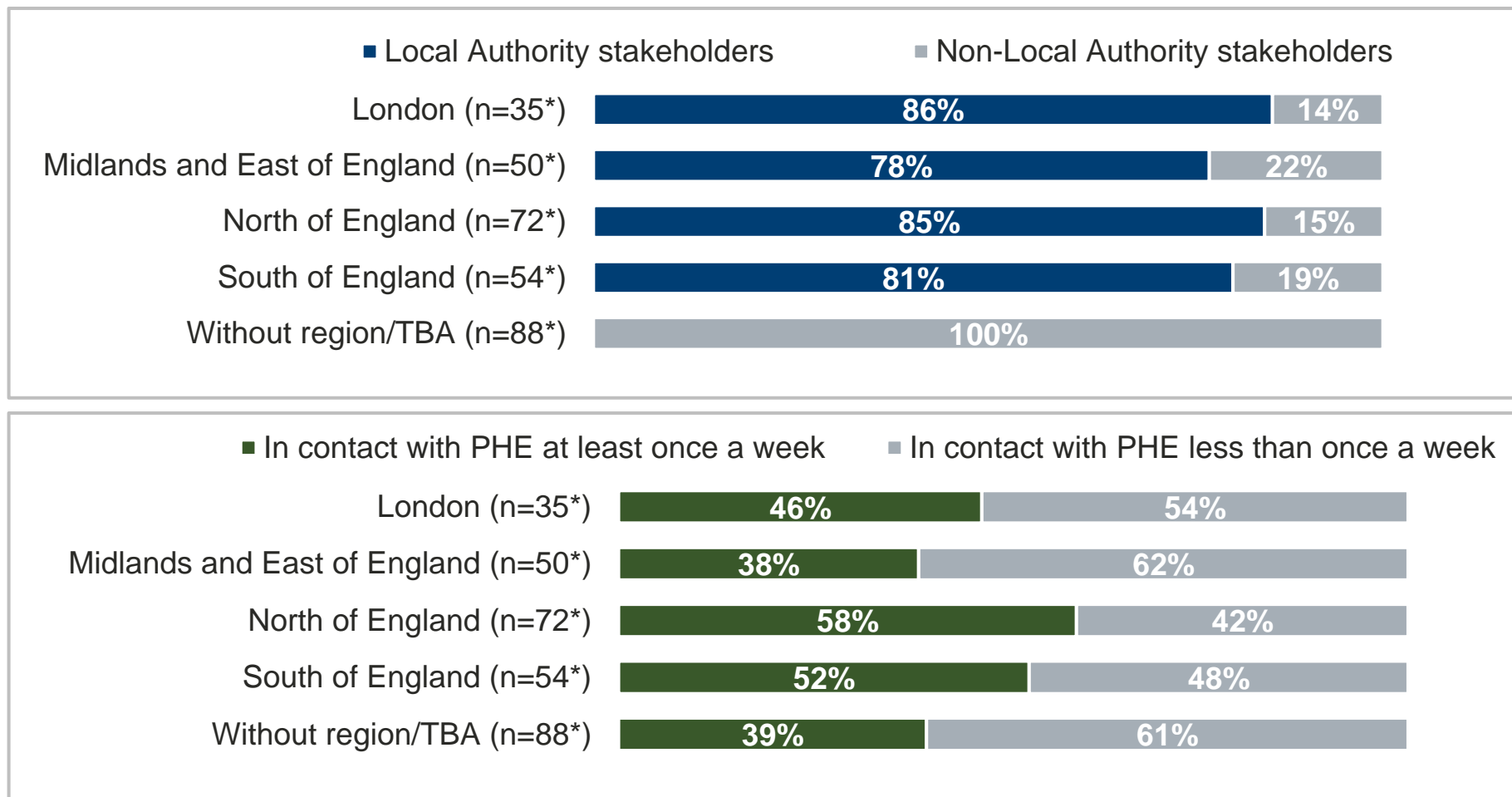
| London | Midlands and East of England | North of England | South of England | Without Region |
|--------|------------------------------|------------------|------------------|----------------|
| 35 | 50 | 72 | 54 | 88 |

Local Centres

| Anglia and Essex | Avon Gloucestershire and Wiltshire | Cheshire and Merseyside | Cumbria and Lancashire | Devon Cornwall and Somerset | East Midlands | Greater Manchester | Kent Surrey and Sussex | London | North East | South Midlands and Hertfordshire | Thames Valley | Wessex | West Midlands | Yorkshire and Humber | Without Region |
|------------------|------------------------------------|-------------------------|------------------------|-----------------------------|---------------|--------------------|------------------------|--------|------------|----------------------------------|---------------|--------|---------------|----------------------|----------------|
| 11 | 12 | 14 | 6 | 8 | 10 | 13 | 14 | 35 | 15 | 12 | 8 | 10 | 15 | 20 | 96 |

Profile of respondent by region varies

Sample composition of regions



Base: All respondents * **Caution: small base size**

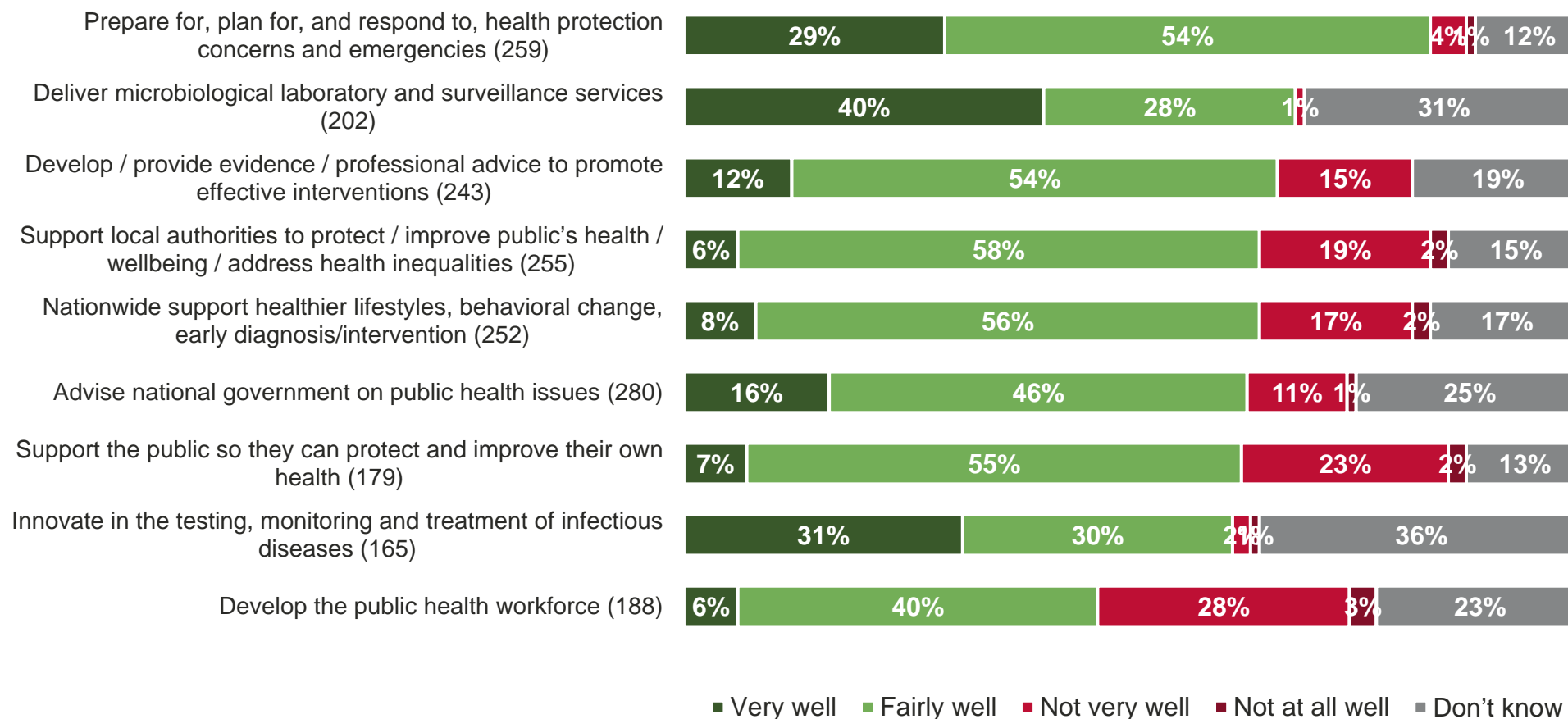
Source: Ipsos MORI

Contact with directorates

| | The local PHE centre (n=171) | The regional team (n=171) | The national executive/ PHE Headquarters (n=146) | The local knowledge and intelligence team (n=92*) | Infectious diseases surveillance services (n=88*) | Emergency Response Division (n=61*) | Field epidemiology services (n=46*) | Local or national microbiological services (n=44*) | Centre for Radiation, Chemical and Environmental Hazards (n=26*) | Biopharma, manufacturing and product development (n=6*) |
|--|------------------------------|---------------------------|--|---|---|-------------------------------------|-------------------------------------|--|--|---|
| The local PHE centre | 100% | 69% | 48% | 85% | 77% | 79% | 76% | 61% | 69% | N=2 |
| The regional team | 69% | 100% | 54% | 75% | 68% | 72% | 78% | 61% | 69% | N=3 |
| The national executive/PHE Headquarters | 41% | 46% | 100% | 47% | 42% | 57% | 63% | 43% | 58% | N=3 |
| The local knowledge and intelligence team | 46% | 40% | 29% | 100% | 52% | 51% | 59% | 50% | 54% | N=1 |
| Infectious diseases surveillance services | 40% | 35% | 25% | 50% | 100% | 59% | 74% | 75% | 73% | N=3 |
| Emergency Response Division | 26% | 26% | 24% | 34% | 41% | 100% | 57% | 43% | 62% | N=2 |
| Field epidemiology services | 20% | 21% | 20% | 29% | 39% | 43% | 100% | 45% | 65% | N=1 |
| Local or national microbiological services | 16% | 16% | 13% | 24% | 38% | 31% | 43% | 100% | 65% | N=2 |
| Centre for Radiation, Chemical and Environmental Hazards | 11% | 11% | 10% | 15% | 22% | 26% | 37% | 39% | 100% | N=3 |
| Biopharma, manufacturing and product development | 1% | 2% | 2% | 1% | 3% | 3% | 2% | 5% | 12% | N=6 |

PHE's performance of key functions

Q10 How well, if at all, do you think Public Health England performs each of the following functions?

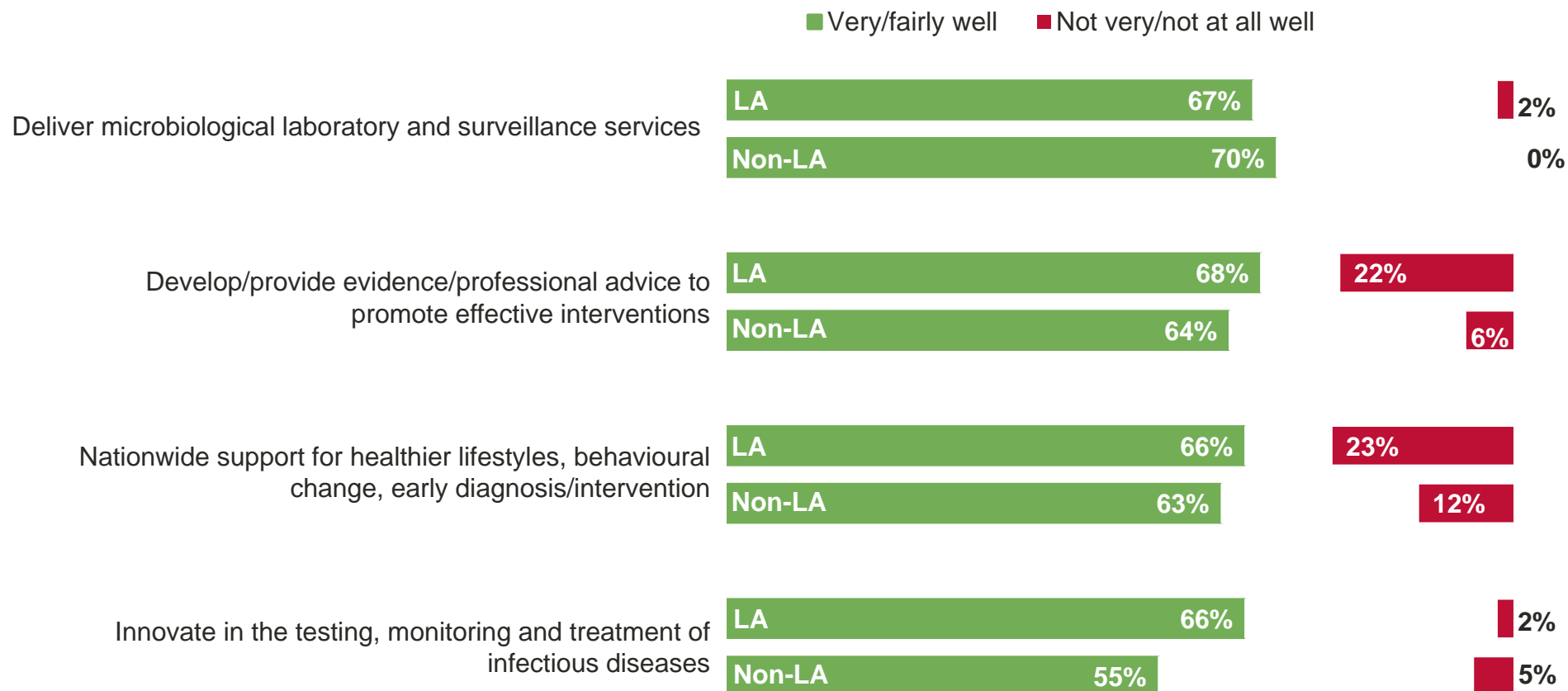


Base: All who selected statement as a function of PHE at Q9, 6-31 January 2014

Source: Ipsos MORI

Performance of key functions by stakeholder type

Q10 How well, if at all, do you think Public Health England performs each of the following functions?

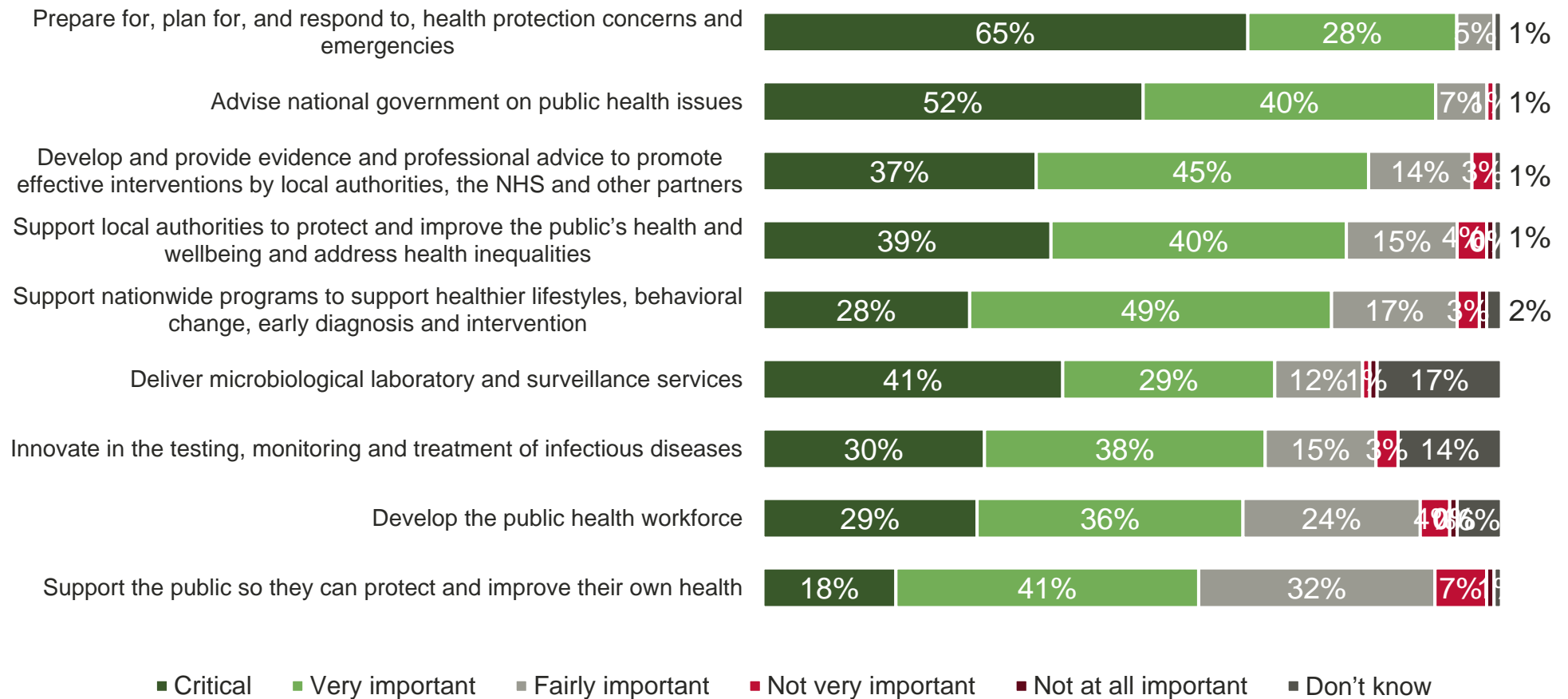


Base: All who selected statement as a function of PHE at Q9, 6-31 January 2014

Source: Ipsos MORI

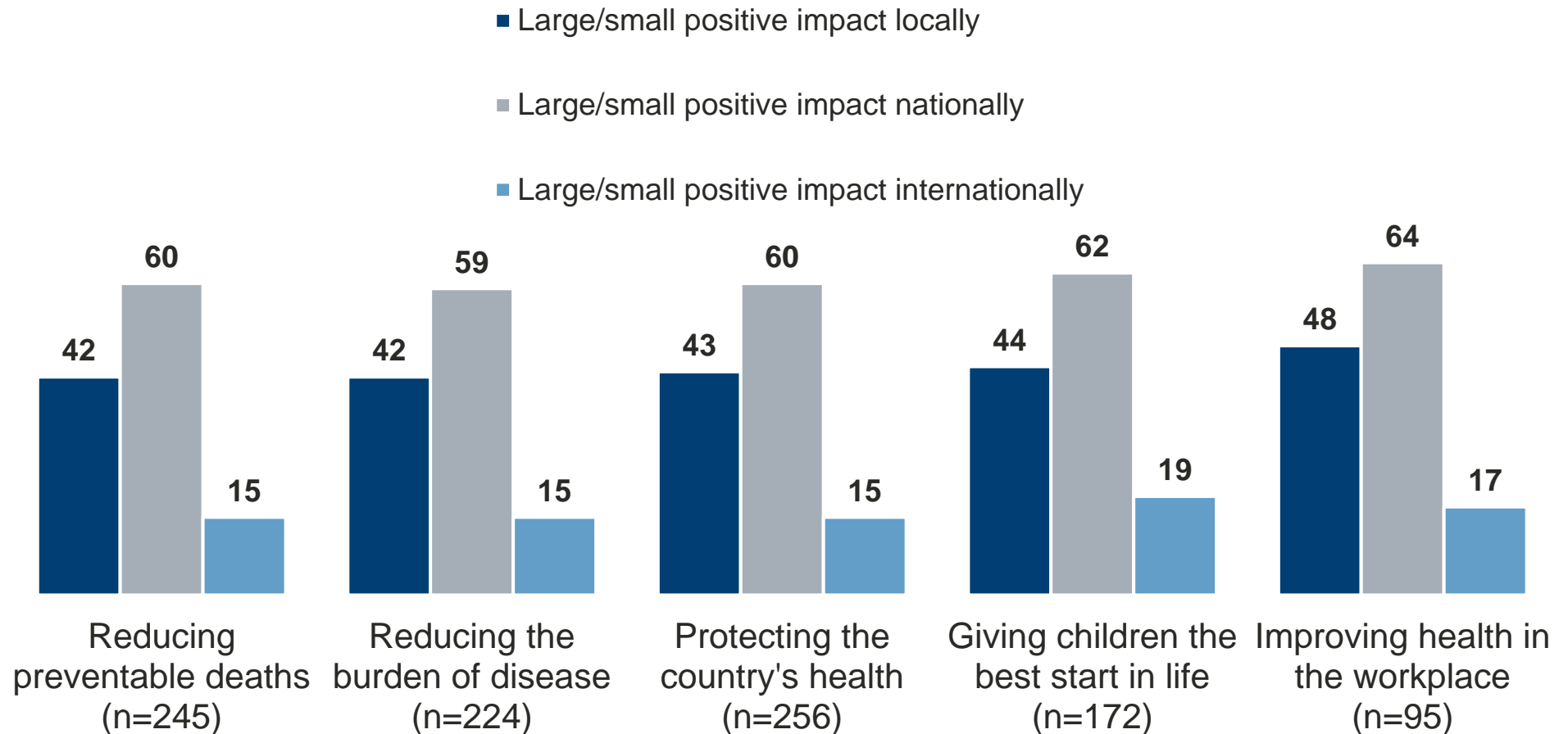
Importance of PHE's functions

Q11 How important, if at all, is it for Public Health England to perform the following functions?



Perceived impact of PHE not affected by areas PHE thought to be prioritising

Q15 What impact, if any, has PHE had on public health issues... (Large/small positive impact)



Base: Stakeholders who strongly/tend to agree PHE is prioritising following areas of work.

Source: Ipsos MORI