



Public Health
England

Protecting and improving the nation's health

Who we are and what we do: Annual Plan 2015/16

July 2015

Contents

	Page
Introduction from our Chair and Chief Executive	3
Some of our achievements in 2014/15	4
About Public Health England	5
Public Health England at a glance	6
Our priorities and vision of success	7
An evidence-based approach	8
Our local operating model	9

This year's work programme

Protecting the public's health	10
Improving the public's health and wellbeing	11
Improving population health through sustainable health and care services	12
Building the capacity and capability of the public health system	13



Introduction from our Chair and Chief Executive

During the past year, our duty to protect the public from infectious diseases and other environmental hazards has been in the public eye as never before. Our response to Ebola is an ongoing priority - our staff are on the front line in Sierra Leone, providing additional port of entry screening in the UK, and through our laboratories at PHE Porton and Colindale. This is but one example of our ongoing health protection work, which includes emergency preparedness, resilience and response, surveillance systems, diseases registration, screening and vaccination programmes.

We also continue to support local authorities, the NHS and others to help people live longer, healthier, happier lives and reduce health inequalities, recognising that the £200m reduction in this year's public health grant brings with it new challenges for our local authority partners, while at the same time the prospect of devolution creates new opportunities.

The government has explicitly prioritised prevention and we have a key role to play in putting this into practice. There are huge opportunities to prevent illness and improve the health and wellbeing of local communities.

The *NHS Five Year Forward View* and *From Evidence into Action* call for a much greater focus on prevention; public health saves lives and money. If we fail to act now, progress in improving healthy life expectancy will stall, health inequalities

widen and we will end up spending billions on wholly avoidable illness. In the short term, we have identified a clear need to focus on identifying and helping those at risk of poor health, but who do not yet have clinical conditions. That is why we are focusing on reducing childhood obesity, on preventing type two diabetes, and reducing the number of people who smoke or drink to excess.

We also know that there is a pressing need to tackle some of the more long-term public health issues such as adult obesity, supporting those with multiple complex illnesses, caring for our ageing population and ensuring our children have the best start in life. Addressing these will not only improve the health of local communities, but enable the NHS to deliver the efficiencies required to sustain and improve standards of care, support economic growth, and contribute to the establishment of safer streets and neighbourhoods.

So what does all this tell us we need to do to enable us to go further, faster?

We are strengthening our capability in economic modelling and return on investment.

We will exploit the opportunity afforded by the *NHS Five Year Forward View* to reduce growth in NHS activity and to save money but also, crucially, to close the gaps between the poorest and the most wealthy.

We will fully exploit our health marketing capability to engage direct with the public on behavioural change, using technology innovatively, and investing in 'mobile first' digital health.

We will look to accelerate this by supporting devolution wherever the energy and commitment to it exists, and where it can be shown that, by working differently, the gaps can be closed faster than can be done today.

We will enable the system to be held to account for its performance, for example, by publishing public health outcomes data and exposing variation in performance.

We also need to strengthen our science and research, to create a great future for it, so that we can provide the right health protection and health improvement support, in the right way, whenever it is needed.

And finally, we can only meet our commitments, locally and nationally, with the support of others and we will be doing our best to ensure that our partnerships at every level are mutually beneficial and productive.



David Heymann
Chair



Duncan Selbie
Chief Executive

Some of our achievements in 2014/15



Developed in collaboration with our national NHS partners, the [NHS Five Year Forward View](#) made clear that getting serious about prevention, tackling obesity, alcohol and tobacco and helping us all to live healthier lives is essential both for better health and a sustainable NHS. Our initial focus was on introducing a nationwide [diabetes prevention programme](#), a first in the world at this scale



We deployed more than 150 staff to Sierra Leone, Liberia and Guinea as part of our contribution to the international Ebola response. [We established three much-needed diagnostic laboratories in Sierra Leone](#) and tested more than 10,000 samples



We delivered [screening arrangements for Ebola](#) at the UK's main ports of entry. More than 5,700 passengers were screened during the year and all workers returning from west Africa were monitored for 21 days to ensure they remained well



In partnership with NHS England, we launched the [Collaborative Tuberculosis Strategy for England](#). The ten point action plan aims to reduce and ultimately eliminate TB as a public health problem



We started our pilot programme for [whole genome sequencing for TB](#), providing evidence for improved diagnosis, treatment and public health management of this disease



We published [Due North](#), an independent report on inequalities in the north of England, which, by their scale and intensity, are greater than elsewhere in the country



We worked with NHS England to extend the [childhood flu vaccination](#) to all children aged 2-4 and pilot delivery to secondary school Years 7 and 8



With NHS partners, we expanded the [NHS Newborn Blood Spot Screening](#) to include four rare metabolic diseases. Early detection and treatment for babies and families affected is life-changing, preventing disability and, in some cases, death



Through local government, more than 3 million people were offered an [NHS Health Check](#). The number of people having a check went up by 7.4% to more than 1.4 million, an additional 102,475 people compared to the previous year



Our internationally renowned [stop smoking programme](#) supported 778,000 quit attempts through three highly successful campaigns, including [Stoptober](#)



With the UK Health Forum, we published the [Blackfriars Consensus](#) on the need for action to promote brain health and reduce the risk of dementia. We also supported the Alzheimer Society's [Dementia Friends](#) programme, helping more than 1 million people learn about what they can do to help people with dementia



We launched our [spending and outcomes tool \(SPOT\)](#), helping local authorities identify where investment can best improve local outcomes



We published our [2014 Health Profiles](#), providing a snapshot of health and wellbeing in every local authority. The comparisons with peer areas and the national average provide local authorities and CCGs with 'conversation starters' on local challenges and priorities



Our [Annual Report and Accounts 2014/15](#) provides further insight into our work during the year

About Public Health England

We exist to protect and improve the nation's health and wellbeing, and reduce health inequalities. We do this through world-class science, knowledge and intelligence, advocacy, partnerships and delivery of specialist public health services.

Our **four core functions** are set out in an annual remit letter from Ministers:

- protect the public's health from infectious diseases and other public health hazards
- improve the public's health and wellbeing
- improve population health through sustainable health and care services
- build the capacity and capability of the public health system

The first function is our primary duty: we are the lead for the UK on the International Health Regulations, and this extends to playing our part in protecting the UK from international health hazards, most obviously from communicable diseases.

All of our work is informed by:

- the application of **evidence into practice**, which is at the heart of the work of our scientific and professional teams across the organisation

- a **place-based approach** that engages local communities, building on their assets and addressing the wider determinants of health
- a **life course approach**, promoting a holistic view of an individual's total health and wellbeing needs, seeing public health as one system for improving health and wellbeing

Reducing inequalities is a cross-cutting theme that underpins all our work.

We recognised from our inception in 2013 that bringing together more than 5,000 staff from more than 100 different organisations provided a real opportunity to look for synergies, do things differently and modernise and digitise working practices. Through our Strategic Review, we carefully looked at how we best organise ourselves in delivering our remit, play a central role in making the case for prevention and deliver more and better for less. We are now changing the way we work through **Securing our Future**, our organisational change programme, focussing on three core themes:

- **ensuring that our science continues to compete with the best in the world**, underpinning the creation of a unified National Infection Service. We will secure a world class infrastructure to protect and improve the public's health by taking forward our work on the Science Hub programme

- **bringing that same rigour to bear on our health improvement work**, combining our assets in knowledge and intelligence, health and wellbeing and strategy, to deliver the products and services that the frontline wants
- **aligning our local presence around how local government organises itself**, moving from 14 local centres plus London to 8 plus London. We want to be an organisation that strives to provide central support for local action and we know that this depends on building on and investing in local relationships

We will have delivered more than £100m of savings in our first three years of operation and will deliver further efficiencies going forward.

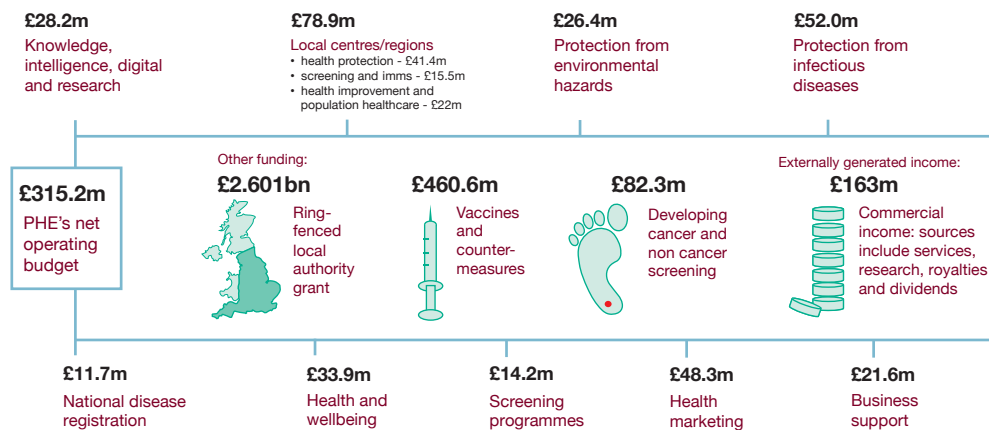
We aim to increase the proportion of our stakeholders who speak highly or very highly of us in the annual stakeholder survey and achieve staff engagement scores 5% better than the average for comparable government organisations. We will develop a diverse, resilient and fully engaged workforce passionate about our mission, partnerships and achievements.

Public Health England at a glance

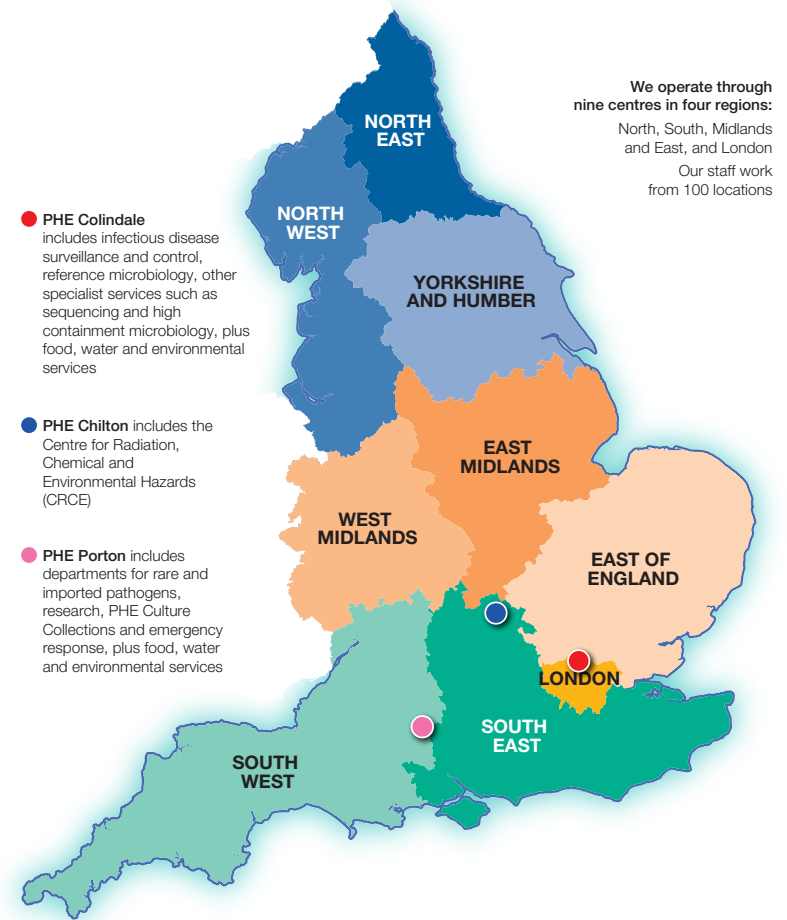
To deliver a broad range of products and services we employ approximately 5,600 staff:

<p>2397 Protection from infectious diseases</p> <p>National centres, regional network and capability to identify infectious disease, surveillance and management of outbreaks</p>	<p>517 Protection from environmental hazards</p> <p>Including chemical, radiation and environmental hazards, emergency response</p>	<p>1075 Local/regional</p> <p>includes: • health protection - 536 • screening and imms - 243 • health improvement and population healthcare - 277</p>	<p>322 Knowledge, intelligence and digital</p> <p>Translating data, research and experience into practical guidance for local decision making; digital capacity and supporting the use of digital technologies</p>	<p>293 Disease registration</p> <p>Including the world's largest cancer database</p>
<p>264 Screening programmes</p> <p>Developing and quality assuring cancer and noncancer screening programmes</p>	<p>30 Research translation and innovation</p> <p>Enabling rigorous researched evaluation of public health interventions both locally and nationally</p>	<p>199 Health and wellbeing</p> <p>National expertise in public health evidence-based interventions</p>	<p>60 Health marketing</p> <p>Delivering healthy behaviour change campaigns</p>	<p>20 Global health</p> <p>Protecting the UK from emerging international threats, maintaining and developing relations with WHO and other international and national public health agencies</p>
<p>With business support from:</p> <p>167 Financial and commercial</p>	<p>136 Infrastructure (ICT and estates)</p>	<p>47 Human resources</p>	<p>66 Communications</p>	<p>64 Corporate affairs</p>

Our funding 2015/16



Our national and local presence



We operate through nine centres in four regions: North, South, Midlands and East, and London
Our staff work from 100 locations

PHE has eight regional public health laboratories based in large NHS hospitals

Our priorities and vision of success

We published our priorities document *From evidence into action: opportunities to protect and improve the nation's health* in October last year. Designed to be read in tandem with the *NHS Five Year Forward View*, it sets out how we can make greater progress on obesity, smoking, alcohol, ensuring a better start in life, reducing dementia risk and robustly tackling tuberculosis and antimicrobial resistance. Both documents put prevention at the very heart of our NHS and public health systems, which will enable us to better manage demand, improve efficiency and tackle funding pressures.

The seven priorities in *From evidence into action* are by no means our only areas of interest, nor do they represent the full range of contributions that we make to improving and protecting the public's health, the Government's expectations of us being more fully set out in the annual remit letter from Ministers. They are, however, the areas that we have identified as most in need of improvement in the coming years and on which we will relentlessly focus our efforts.

They are supported by a number of **game-changers** that offer unique opportunities for positive change and much faster progress on our public health priorities: place-based approaches led by local authorities; evidence on return on investment of public health interventions to support prioritisation and spending decisions;

behaviour change, particularly the opportunity to exploit digital technology, the contribution of employers to improving the health and wellbeing of their staff; measures of 'wellness' to give a broader, person-centred view of health; and developing evidence-based NHS preventive programmes in partnership with NHS England.

This plan sets out how we will continue to focus on our seven priorities and four core functions; the Government's commitment to prioritise prevention; the aspirations of local government in their role as local place-based leaders for improving the public's health; and the actions set out in the *NHS Five Year Forward View*. We have set out the key outcomes we are working towards and the most significant actions we will take to deliver them.

Our vision of success is one in which:

- the country is kept safe from threats to health, including outbreaks of infectious disease in the UK and abroad
- prevention is core to the Government's agenda, on which we are a trusted adviser nationally and locally
- local authorities and the NHS regard us as the 'go to' partner for advice on protecting and improving health and return on investment

- prevention is recognised as integral to delivering the NHS efficiency challenge and the wider NHS is fully engaged in securing broader preventive action
- we continue to be recognised as a leading scientific institution, respected nationally and internationally for our work in the application of evidence to address public and population health issues, and continue to be part of the essential national infrastructure for life sciences research
- we continue to demonstrate that we are efficient, economic and effective in all that we do, with a growing reputation as one of the world's leading public health agencies

An evidence-based approach

World class science is at the heart of our capability and central to our evidence base. Research, development and innovation must continue to underpin all our work. Whether conducted alone, or in concert with partners, we must translate research into frontline applications. This includes new diagnostic techniques, new protocols for controlling threats to health, better ways of treating and managing patients, and strategies that empower people to improve their own health.

On the one hand, we have to understand the health profile of the nation in intricate detail, collecting data at individual, local authority and national level. This knowledge helps us to determine the nature of health inequalities and how they can be reduced; we can assess which public health programmes have the greatest impact and how health can be most improved. On the other hand, we have to prepare for health challenges that arise suddenly in the UK or overseas. We must continue to plan for, and anticipate, these kinds of challenges – sharing our expertise, sharing our insight and helping where we can.

We will implement *Doing, Supporting and Using Public Health Research*; our strategy for research, translation and innovation. This supports the full range of our work from identifying evidence gaps, through high quality

research to acquiring new knowledge, increasing its value by translating it ready for practical use by the frontline.

We will launch *Health Matters* in autumn 2015, a suite of communications products and tools for our partners in the public health system. Each edition will focus on a particular priority in *From Evidence Into Action*, helping public health professionals make the case and secure support for implementing evidence-based interventions.

Our research strengths are recognised by our ability to publish in the most prestigious scientific journals. Our researchers contributed to more than 1,000 peer reviewed publications, many with the potential to impact significantly on public health practice and services at local through to international level. Studies are undertaken either by ourselves or in partnership with academe or other research organisations. Our research has wider benefits for the organisation and UK plc – we work in partnership on many projects with the private sector to develop commercial value.

Our *knowledge management platform* will be complete by March 2016, facilitating access to the evidence base for public health through comprehensive, systematic searching of scientific and practice-based literature. It will include knowledge updates on priority topics and shared search results. Our professional

library and information science staff will continue to provide bespoke support to colleagues on evidence searching. At the same time, training programmes in search strategies and critical analysis will build capacity among wider staff groups. This training, together with a range of knowledge management services, will be accessible to partners in the wider public health system.

To ensure that the best available evidence is incorporated into our products and services, a *PHE publication standard* has been developed. With the exception of papers submitted for scientific peer review, all our reports, guidelines and other evidence-based products will be required to meet this.



Our local operating model

Our Centres work as part of local health systems, contributing to local and national priorities and enabling others to improve health and reduce inequalities. They:

- enable our partners to recognise local needs and priorities and identify ways of operating at scale, bringing local insight and expertise to bear
- inform and advise partners on the practical and optimal use of our products and services, as well as working with them to co-design new and innovative ones responsive to local needs
- foster and support sharing and learning from best practice
- support local partners in their use of data and insights from a range of sources, including the public health outcomes framework and local joint strategic needs assessments
- deliver specialist health protection services to help keep people safe from harm

We play an enabling role in supporting localities to deliver their health and wellbeing strategies – agreements and initiatives informed by locally identified priorities. This community-based, flexible response is a core part of our work. Each of our Centres set out their own priority actions in a Centre business plan. The examples below illustrate the wide variety of activities they undertake.

<p>Local “place based” public health programmes</p>	<p>Key role in identifying local community assets and developing place-based approaches to improve health outcomes and address wider determinants of health, for example:</p> <ul style="list-style-type: none"> • supporting formulation of the London Health Commission’s recommendations • working with communities using asset/community based approaches, to address fuel poverty, social housing and tackle inequalities • working with clinical networks and mental health providers to address smoking cessation and embedding community-centred approaches to wellbeing • progressing <i>Well North</i>, a collaboration with the University of Manchester, to develop, test and pilot a set of linked interventions to improve health in some of the most deprived areas of northern England • supporting the <i>northern powerhouse</i> in closing the gaps between the poorest and most wealthy faster than hitherto, with an initial focus on Greater Manchester
<p>Local delivery of national public health programmes</p>	<p>Supporting delivery of national programmes and ensuring they are tailored to local need, for example:</p> <ul style="list-style-type: none"> • ensuring greater impact and effectiveness of national campaigns such as <i>Change4Life</i> and <i>Stoptober</i> • supporting the delivery by the NHS of section 7A commissioning, for example, transfer of 0-5 public health commissioning to local authorities, extending newborn blood- spot screening and roll out of bowel scope screening • ensuring multi-system co-ordination to tackle TB, informing commissioning and sharing best practice
<p>Our products and services</p>	<p>For example:</p> <ul style="list-style-type: none"> • specialist investigation and control of disease outbreaks through our local health protection teams • addressing and investigating chemical incidents, radiation and other environmental hazards through our local Centre for Radiation, Chemical & Environmental (CRCE) hazards teams • high quality data and intelligence through local knowledge and intelligence and field epidemiology teams

Protecting the public's health

We provide national and international leadership and scientific advice to reduce harm from infectious diseases and environmental hazards. We ensure there are effective surveillance arrangements nationally and locally to identify threats and prepare, plan and respond to health protection concerns and emergencies.

- Outcomes:**
- tackle antimicrobial resistance
 - reduce TB
 - apply cutting-edge science to our work
 - contribute to improved global health security

- Actions:**
- lead health sector delivery of 4 of the 7 national workstreams set out in the antimicrobial resistance implementation plan
 - produce new data and intelligence for the NHS on antibiotic prescribing that helps reduce their use
 - deliver the first year actions in the TB Strategy for England, including the establishment of local TB control boards in partnership with local government and NHS England
 - review and implement a methodology for reference and diagnostic work on TB, including the link into surveillance
 - improve access to HIV testing outside conventional sexual health services through working with local authorities to establish a national home sampling service, delivering up to 50,000 postal kits
 - deliver routine genome sequencing of specific infectious organisms, enabling developments in whole genome sequencing as part of the 100,000 Genome Project
 - review our Centre for Radiation, Chemical and Environmental Hazards (CRCE), strengthening the profile and understanding of its work, and ensuring that its functions are those required by the UK and internationally
 - pilot the Global Health Security Agenda (GHSA) assessment tool, making proposals for further development and identifying best practice to share with other participating nations in advance of the annual GHSA ministerial event in September
 - continue our support to the international response to Ebola in West Africa and establish a PHE Field Office in Sierra Leone as part of rebuilding its public health capacity
 - devise a programme to support national and local action to reduce the health burden in England attributable to air pollution
 - undergo an assessment by the International Association of National Public Health Institutes (IANPHI) of our contribution to the UK and international public health systems, identifying opportunities for further development



Improving the public's health and wellbeing

We support local authorities, the NHS and central government to secure the greatest gains in health and wellbeing and reductions in inequalities through evidence-based interventions. We act nationally where we are uniquely placed to do so. We promote actions to build healthy places, people and communities, making the case for prevention and early intervention.

- ### Outcomes:
- reducing smoking and harmful drinking
 - tackling childhood obesity
 - reducing dementia risk
 - ensuring every child has the best start in life
 - improving workplace health and wellbeing

- ### Actions:
- deliver over 550,000 quit attempts through our smokefree campaigns, including *Stoptober*
 - publish independent evidence-based reports and advice to Government on addressing the health effects of sugar, alcohol and e-cigarettes
 - recruit 135,000 new parents into the *Start4Life* Information Service for Parents and 750,000 new registrations with *Change4Life*
 - review the evidence on what can be expected of the drug treatment and recovery system and provide advice to Government to inform future policy
 - publish a *Liver Disease Framework* on tackling this preventable disease
 - support the development and implementation of a new tobacco control plan, focussed on smoking in pregnancy and targeting wide regional variation
 - increase the uptake of the NHS Health Check, giving more people aged 40-74 the opportunity to take increased control over their own health
 - raise awareness of actions people can take to reduce their risk of dementia through *NHS Health Checks* and provision of evidence-based tools, data and guidance
 - successfully transition the *Dementia Friends* programme to Alzheimer's Society
 - roll out a type 2 diabetes prevention programme for 10,000 people at high risk of developing this avoidable disease
 - support the development and implementation of a national *childhood obesity strategy*
 - support an increase in local physical activity by promoting tools, new initiatives and the latest evidence, particularly on sedentary behaviour and its impact
 - support the transfer of 0-5 children's public health commissioning from the NHS to local authorities in October
 - increase the number of local authorities running a Workplace Wellbeing Charter Scheme using national standards, as well as the number of NHS and other organisations working for accreditation under this scheme
 - develop evidence-based tools for schools and educational settings to support pupils' mental wellbeing
 - continue to improve recovery rates for drug and alcohol treatment and reduce health-related harms, HIV, hepatitis, TB transmission and drug-related deaths
 - progress towards reaching a chlamydia detection rate of 2,300 per 100,000 nationally by supporting local authorities to increase detection and treatment
 - promote and share locally the evidence base to support sustainable services to deliver the healthy child programme and early intervention to enable families and communities to give all children the best start in life

Improving population health through sustainable health and care services

We are the public health adviser to NHS England, supporting NHS commissioners and providers as they seek to improve population health and tackle inequalities, and to develop more personalised, proactive care that can help each of us maintain the best possible health and wellbeing.

Our specialist staff provide the evidence and analysis to help the NHS and local authorities allocate their resources most effectively, with a greater shift towards prevention and early intervention.

Outcomes:

- establish prevention programmes that reduce growth in NHS activity and improve outcomes in the following areas: atrial fibrillation; hypertension; falls in the frail elderly; smoking in pregnancy; diabetes; and alcohol harm
- improve quality and coverage and reduce inequality in uptake of national screening programmes
- extend and improve world-class immunisation programmes
- support individual and societal behavioural change

Actions:

- help the NHS to provide a healthy environment for patients, staff and visitors and establish itself as a leader in workplace health and wellbeing
- play our full part in implementing the recommendations of the independent task forces on mental health, cancer and maternal health
- lead implementation of a preventive service programme to help reduce demand and contribute to the NHS efficiency challenge
- support the Vanguard programme to enable local pilots to maximise their contribution to improving population health
- implement the Quality Assurance Operating Model for national screening
- assess the faecal occult blood bowel cancer screening trial and publish recommendations on national roll out by March 2016
- complete the second phase pilot of the addition of pulse oximetry to the new born screening programme by spring 2016
- publish an evidence review on the HPV primary screening pilot in 2015
- pilot changes to the screening interval in diabetic eye screening from 1-2 years
- maintain progress on the roll-out of the bowel scope screening programme so that lead commissioning can transfer into the main section 7A agreement for 2016/17 and continue to progress towards 100% of centres live by the end of 2016
- improve coverage for flu vaccine for those aged 65 and over and increase coverage for under 65s with liver diseases, neurological disease and immune suppressed, exceeding 50% for each group
- target 60% uptake overall, and at least 40% for each eligible cohort for childhood flu vaccination to children aged 2-4, and school Years 1 and 2; and undertake an end of season evaluation of the impact of health inequalities on coverage
- review the evidence and make recommendations on the scope of a public-campaign to raise awareness of Sepsis
- Run two national early diagnosis symptom campaigns: *Be Clear on Cancer* in summer 2015 and a second in early 2016, and pilot a generic symptom awareness campaign in early 2016
- re-run the *FAST* campaign on recognising and acting on the early signs of stroke

Building the capacity and capability of the public health system

We support the development of the public health system as a whole – ensuring access to the best evidence and intelligence, to ensure the current and future excellence of the public health workforce and by publishing outcomes to ensure transparency and promote improvement.

We work closely with local authorities, the Association of Directors of Public Health, the Faculty of Public Health, the Royal Society of Public Health, Chartered Institute of Environmental Health, the voluntary and community sector, universities and the NHS as we build the capacity and capability of the public health system as a whole.

Outcome:

- ensure the public health system is able to tackle today's challenges and is prepared for those emerging in future

Actions:

- review and make recommendations to Government on the future capability, skills and experience of the public health workforce to operate across all public health functions; and to understand the barriers to effective working and freedom of movement in public health irrespective of employer
- review and make recommendations to Government on effective health interventions that can support people to return to work in order to inform wider programmes to tackle ill health and support people back into the workplace
- support the establishment of a What Works Centre for Wellbeing as an independent charity
- review the evidence on health outcomes of improvements in services for people in detained settings to inform future government health interventions and prioritisation
- support the development of a Mental Health Intelligence Network, creating a transparent and effective benchmarking tool for local authorities and CCGs
- establish a single comprehensive national rare disease registration service and non-communicable disease surveillance system
- work with local government and other partners to develop public health professionals at every stage of their career, ensuring a pipeline of future Directors of Public Health ready to meet the challenges of tomorrow
- support local authorities in developing new place-based approaches to improving the public's health
- support local authorities to have an effective suicide prevention plan
- publish a report of the Global Burden of Disease 2013 model with an update for England compared with other countries, including analysis by region and deprivation
- on behalf of the NHS National Information Board, and in partnership with NICE, lead work to provide citizens with access to a set of health and care apps endorsed by the NHS
- further digitise the Personalised Care and Population Health framework and assess the impact of extending nurses, midwives and allied health professionals' knowledge base and their health improvement and protection roles
- implement a cross-government engagement strategy, identifying the priority organisations to influence this year, the actions to achieve maximum impact and measures to review success
- work with the Chief Fire Officers Association and other local and national stakeholders to develop and integrate the public health role of fire and rescue services

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