



Public Health
England



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Chief Executive

Friday message

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Dear everyone

I continue to meet the senior leadership teams, political and full-time management, of local authorities, and in many instances the leading local GPs are also in the conversation. I have now spent time with most upper tier and unitary authorities, last week visiting five parts of the country, from Luton to Plymouth. With their statutory duty to improve the health of their people, the public's health, and with their CCG partners also having a legal duty to address inequalities, the obvious point is that the leadership and responsibility rests with them together to decide on their priorities, and our role in PHE is to help and support them in every way we can. Refreshingly for me given my 34 years in the NHS, and notwithstanding the austerity faced by Local Government over the past three years, they rarely begin our conversations with a complaint about money, preferring to focus on an asset-based view of the world – this is what we have got, how can we make the most of it. I entirely accept that money matters, but believe that leadership matters much more and that by working together, prioritising the combined local pound, they will get better value for the tax payer and the citizen than hitherto, working separately. There are examples of great work by GPs and councils all over the country, including through the Pioneers, and we all need to make sure we do all we can to support them, so with the NHS Clinical Commissioners we are looking to identify five or six striking examples of GPs and councils working together to secure both better public health outcomes and a better deal for the tax payer, which we will showcase at our second annual conference in September. If you have a case study you are proud of and want to share in this way, please let me know.

PHE and Department of Health public health nursing teams have run their third week of action and on Tuesday held their second annual conference, 'At the heart of it all', which it was my very great privilege to open. The theme was health promoting practitioners and practice – putting the three quarters of a million registered nurses, midwives, health visitors and allied health professionals in England right where they belong, at the heart of patient care and improving and protecting the public's health. Over 3000 tweets were sent and over 300 people attended conference for the launch of the [Personalised Care and Population Health Framework](#) and its accompanying [infographic](#) which focused on the huge difference even small changes in practice can make.

As the Prime Minister emphasised this week, antibiotic resistance is a global challenge, but one which the UK can help to lead. PHE provides expertise both operationally and strategically to the NHS on the diagnosis, surveillance, prevention and control, and treatment of infection, notably due to antibiotic resistant bacteria. We also work in partnership with industry in developing new interventions, including the development of novel antibiotics. So, PHE is well placed to help meet the challenge posed by antibiotic resistance.

And finally, yesterday in Newcastle, I visited Changing Lives, a national charity for the homeless and vulnerable, which has 380 people working across the country with 6,000 of the most disadvantaged in our society every day, and making a positive difference to their lives. Their name, 'Changing Lives', is an absolutely accurate reflection of their work. Listening to the views of those with the least about what matters the most to them, it is not surprising that this begins with a roof over their head, enough money to live on and someone to talk to. They do a fabulous job.

With best wishes