



Duncan Selbie
Chief Executive

Friday message

Friday 28 October 2016

Dear everyone

Last week I attended the 2016 Annual Meeting of the International Association of National Public Health Institutes (IANPHI) in Shanghai, hosted by the Chinese Center for Disease Control and Prevention. This year's meeting marked 10 years of IANPHI, which now brings together the leaders of over 100 of the world's national public health institutes to share knowledge, insights and experience. It is a valuable opportunity to find new ways to collaborate, link assets and foster strong partnerships. Highlights included a session on Disaster Risk Reduction led by PHE's Professor Virginia Murray, and a dynamic session on combatting antimicrobial resistance – both truly global problems. I have been elected to the Executive Board of IANPHI and look forward to contributing to its mission of creating, connecting and transforming national public health institutes worldwide.

The number of cases of tuberculosis (TB) in England has thankfully declined year-on-year over the past four years. This is good news following improvements in TB control building up to and since the launch of the Collaborative TB Strategy for England in 2015. There is still more to do to bring down the incidence of TB in England, which remains among the highest in Western Europe. TB can be seen as a barometer of health inequalities and we need to raise awareness, tackle stigma among high-risk populations and build on existing achievements to address gaps in current service provision. On Thursday last we published the latest edition of *Health Matters*, focused this time on reducing the burden of TB in England. Please do share the [supporting content](#) including infographics, case studies, video and blogs with colleagues.

Thank you to all who participated in Exercise Cygnus last week. This was a vital exercise to test and ensure our systems across PHE, local government and the NHS are fully prepared for a future pandemic, and PHE was glad to have taken the lead in organising this. Our regions and centres, the National Infection Service and our emergency response team put considerable input into the exercise design, as well as participation in the cross-government three-day exercise. There will, of course, be learning from this and improvements to be made and more on this in due course.

The childhood obesity plan, published in August, committed to a 20% reduction in the sugar content of foods that children eat – a world first. Next week we start the first of our food group roundtables with the food and drink industry to discuss targets to [reduce the amount of sugar](#) in nine product categories that are the most popular with children: breakfast cereals, confectionary, yoghurts, ice cream, sweet spreads, cakes, biscuits, puddings and morning goods such as croissants. The objective is a 5% reduction in this coming year and 20% by 2020. We will be publishing targets in March 2017. Openness and transparency are at the heart of the programme and we will publish comparable, detailed data at regular intervals.

PHE works with the World Health Organization (WHO) on many programmes, including through formal WHO Collaborating Centres. This week, following many months of development, PHE's Chief Nurse Directorate has been designated the first Nursing and Midwifery Public Health Collaborating Centre. The programme will focus on developing prevention in practice, community health and the contribution of nurses and midwives to maternal and child health.

And finally, I am pleased to say that our National Cancer Registration Service has been shortlisted for the 2016 [Civil Service Awards](#). This is in itself an achievement, and final decisions will take place on 24 November. The team is a jewel in our crown and, whatever the outcome, is of considerable credit to PHE, to supporting the NHS in caring for people who experience cancer and to academia for research.

With best wishes