



Public Health  
England

Protecting and improving the nation's health

# Annual Business Plan 2017-18

April 2017

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## Introduction from Chair and Chief Executive



Sir Derek Myers  
*Interim Chair*



Duncan Selbie  
*Chief Executive*

When we think of health, we often think of diseases and conditions, hospitals and GP surgeries. But good health and wellbeing are about more than healthcare. A good start in life, education, decent work and housing, and strong, supportive relationships all play their part.

Those living in the most deprived communities experience poorer mental health and higher rates of smoking and obesity than the more affluent. Life expectancy for people born in the most affluent area of the country is more than nine years longer for a man, and six years longer for a woman, than for someone born in the most deprived.

The important thing to know is this is not inevitable and much can be done to improve on this.

Economic growth and prosperity being enjoyed by local people is at the heart of closing this health gap. Growth creates jobs for local people, brings benefits to their children, helps their family to stay well and as people get older, helps them to live at home for longer: this is why our plan

makes reference to the new Industrial Strategy<sup>1</sup> and the Prime Minister's determination to tackle social injustice. The decisions we make about the way we live our lives are important too, from the food we eat, to whether we smoke and how much exercise we take.

The NHS also has a vital role in promoting prevention, and the new sustainability and transformation plans are a golden opportunity for the NHS and local government to engage meaningfully with staff, the public and the voluntary and private sectors about prevention and early intervention, to use existing community assets more effectively to ease demand on the NHS and social care, making even better use of the money that we have.

The outcomes should be healthier people with more control over their own health, more joined-up, effective services and a health system that is sustainable for future generations.

Public Health England is supporting the development of a world-class public health system to support policy makers and local system leaders in making this a reality, and science, research and evidence underpins everything we do.

Our many stakeholders tell us that we are already making an impact through the evidence we provide, the influence we have with government and the support we provide to the NHS and local authorities. But they have also told us where we can do more, and we have listened.

This plan sets out where we will focus our efforts over the next year, from building the case for investment in prevention, working to reduce the health gap between the richest and the poorest and continuing to invest in and promote our world class science in the UK and around the world.

To do this we will be engaging further with stakeholders beyond the traditional realms of healthcare, tailoring our support to where we can have the greatest impact and pushing for even greater influence where it matters most.



## Our role and how we operate

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

PHE is the expert national public health agency that fulfils the Secretary of State's statutory duty to protect health and address inequalities, and executes his power to promote the health and wellbeing of the nation. The Minister for Public Health sets out the government's requirements of PHE, including its strategic priorities in an **annual remit letter**.<sup>2</sup>

PHE has operational autonomy. Our freedoms and obligations are described in the **Framework Agreement**<sup>3</sup> with the Department of Health, which makes clear that PHE is free to publish and to speak to the evidence and its professional judgement. We act globally and UK-wide, where we are uniquely placed to do so, and support local priorities through our network of PHE centres.

The **Tailored Review of PHE**<sup>4</sup> carried out by the Department of Health during 2016 confirmed the importance of our role and functions in the health and care system, and concluded that we have made good progress with integrating the staff, cultures, working practices and physical assets of the 100+ organisations from which we were created.

This plan should be read in conjunction with our **Strategic Plan: Better Outcomes by 2020**<sup>5</sup>, which builds on 'Evidence into action: opportunities to protect and improve the nation's health'<sup>6</sup> and the **NHS Five Year Forward View**<sup>7</sup>. It sets out the steps we will take in 2017/18, the second year of our four-year plan, and reflects our contribution to national policies, system-wide priorities and support for local partners, as well as how we will deliver the local objectives and shared goals of the public health system.



This year we will be focusing on:

### Promoting world-class science and evidence

By continuing to invest in science, research and innovation we will further consolidate our position as a trusted, objective and authoritative source of evidence and knowledge. We will identify and tackle potential threats to the public's health with real world solutions.

### Making the economic case for prevention

Public health interventions offer opportunities to secure savings for public services and society as a whole. We will work with the public, employers, industry and retailers to make the healthy choice, the easy choice, and we will support local government and the local NHS to maximise the value from the local pound as they move to full funding through business rate retention and implement NHS sustainability and transformation plans.

### Working towards a healthier, fairer society

We will continue to drive local and national action – across government – to tackle the wider determinants of health that help narrow the health gap between the poorest and the most affluent. We will use our expertise in behavioural science to make sure our interventions and messages reach those with the greatest need.

## Some of our achievements in 2016/17



### National government

- embarked on an ambitious programme to reduce the level of sugar in food and drink by 20% by 2020
- published a comprehensive review of evidence on alcohol harm in England<sup>8</sup>, providing national and local policy makers with the latest evidence to identify policies that will best prevent and reduce alcohol-related harms
- provided expert advice and support in managing the threat of Zika in the UK and its overseas territories
- published atlases of variation for suicide prevention, dementia and NHS diagnostic services<sup>9</sup>
- published a comprehensive review on the performance of the drug misuse treatment system in England<sup>10</sup>



### Local government

- supported devolution agreements across England and particularly with Greater Manchester, London, East of England and the North East
- formed new partnerships with the Police and Fire and Rescue services in their work with the most vulnerable people
- published our first return on investment reports<sup>11</sup>
- co-produced the commissioning guidance for the London Homeless Health Programme<sup>12</sup>
- through the West Midlands Strategic Migration Partnership, improved health screening arrangements and access to services for asylum seekers
- contributed to Thrive West Midlands, the West Midlands' Combined Authority's Mental Health and Wellbeing Concordat<sup>13</sup>
- co-produced a briefing for directors of public health on air quality, working with Defra<sup>14</sup>



### The NHS

- published a menu of preventative interventions<sup>15</sup> to address avoidable ill-health and reduce demand on hospitals and general practice
- achieved a 30% reduction in four years in tuberculosis cases in England<sup>16</sup>, and launched the TB Whole Genome Sequencing Service
- contributed to the antimicrobial resistance strategy resulting in fewer antibiotics being prescribed by GPs and hospital clinicians<sup>17</sup>
- launched a campaign to encourage all hospitals and mental health services to go tobacco-free
- secured agreement for the inclusion of "preventing ill-health by risky behaviours"<sup>18</sup> into the Commission for Quality and Innovation (CQUIN) payments framework for hospitals



### Directly to the public

- launched the Change4Life Be Food Smart Campaign to help families make healthier food choices. Our Be Food Smart app shows how much sugar, saturated fat and salt is in everyday food and drink and has already been downloaded more than half a million times
- our Healthier You<sup>19</sup>: NHS Diabetes Prevention Programme, run together with NHS England and Diabetes UK, helped 10,000 people reduce their risk of developing type 2 diabetes
- launched public awareness campaigns on sepsis and meningitis affecting young children
- 12% of all adults took action to improve their health after seeing the new One You adult health behaviour change campaign
- Stoptober 2016 resulted in 16% of all smokers making a quit attempt, with 4 in 10 of those staying quit for 28 days, earning the PHE marketing team the Gold Award from the Institute of Practitioners in Advertising Effectiveness



## Global health

- launched the UK Public Health Rapid Support Team capable of being deployed on the ground within 48 hours anywhere in the world, making use of the best evidence from research, to respond to public health threats affecting the UK
- our Field Epidemiology Training Programme achieves outstanding status from TEPHINET, the global accrediting body
- supported the development of public health infrastructure internationally, including a new integrated disease surveillance system in Pakistan and the transformation of Ebola laboratories in Sierra Leone to have broader infectious diseases capabilities
- provided science and technical support for implementing the United Nations Sendai Framework for Disaster Risk Reduction
- Chief Nurse directorate designated by the World Health Organization as its first Nursing and Midwifery Public Health Collaborating Centre



## Developing the public health system

- published 'Fit for the Future'<sup>20</sup>, a review of the public health workforce future capabilities and skills, supported by the whole public health family
- delivered a cross-system emergency response exercise Cygnus to assess preparedness and response to an influenza pandemic in the UK
- launched the world's first systemic anti-cancer treatment (SACT) database for chemotherapy
- delivered high-quality training for local government staff in health economics and in making use of PHE return on investment tools
- commissioned and supported the successful aspirant Director of Public Health Programme, preparing 30 more leaders to take on senior roles in public services



## Developing PHE

- our staff were recognised on several occasions. We received the Civil Service Award for best use of data and evidence for our National Cancer Registration and Analysis Service, and our estates team won the Association of Chief Estates Surveyors Award for Excellence in Property Management for innovative co-locations and collaborations with local authority partners delivering substantial financial savings and better working environments
- the results of our 2016/17 stakeholder survey<sup>21</sup> carried out by Ipsos MORI show that 57% of our stakeholders speak highly of us, up from 50% the previous year. This is the third best score of any public body surveyed by MORI over the past decade
- our 2016 public opinions survey<sup>22</sup> showed that 83% of the public have confidence in our advice, and we have improved our staff engagement index by 4% to 56%
- our new National Infections Service public health microbiology framework will deliver greater agility, improved value for money and greater use of small and medium sized organisations
- black and ethnic minority external applicants are now twice as likely to be appointed to posts than when PHE was created in 2013
- published 'Digital-first public health'<sup>23</sup>, our strategy for PHE becoming a digital organisation
- completed research funded by more than £20.5 million in external income, contributed to training over 100 PhD students and published more than 770 peer reviewed research papers<sup>24</sup>

# A changing environment – opportunities and challenges

Commitment to tackling the wider determinants of health is growing across the system, and as we move into the second year of delivering our strategic plan, we will look to take advantage of emerging opportunities to improve people's health.

## The public's health

### Making the economic case for prevention

Public health interventions offer opportunities to secure savings for public services and society as a whole, by reducing demand and delivering a healthier, more prosperous population. We are already helping local systems to identify the most cost-effective preventative solutions and we will continue to work with NHS England, local government and other system partners to maintain this momentum and demonstrate the return on investment that prevention offers both in the short term and for the future.

### Working to reduce the health gap

Sustainability and transformation plans and greater local control of services through devolution offer opportunities to ensure public health interventions are targeting those in greatest need, and to tackle pockets of variation across the country. We continue to support the place-based approach that engages local communities and builds on existing community assets such as the built and natural environment. We will present the best available evidence of what works to influence policies that promote health and wellbeing at every stage of life.

### Maximising the value from the local pound

Local systems are adapting their priorities, relationships and ways of working in response to a changing local environment. Local authorities will be moving to a system of being fully funded locally and full business rate retention from 2019. This will create opportunities to further strengthen place-based approaches and support the process of integrating services locally, including through the devolution of powers.

### Promoting our world-class science and evidence

Investing in science, research and innovation is a key pillar of the government's industrial strategy. We will continue to invest in innovation and work across the system and forge new partnerships, attract new funding and develop the workforce of the future.

### Optimising behavioural science

We are developing ever-greater knowledge of what works to encourage people to lead healthier lives, and creating innovative digital platforms to help make the healthy choice the easy choice. Our behavioural science will enable better-informed policy making and support services in being more effective.

### Building a fairer society

The Prime Minister has set out an agenda focused on building a fairer society and the development of a revitalised industrial strategy. This speaks to the evidence that it is economic prosperity being enjoyed by local people that most improves health and wellbeing, and we will play our full part in supporting this.





## Our actions for 2017/18 to deliver our strategic plan

This section highlights how we plan to put the second year of our strategic plan into action; and recognises the importance of tackling inequalities and the wider determinants of health in all that we promote and do. We will work as One PHE, delivering alignment and synergies across all parts of our agency so that we use the skills and commitment of our staff to deliver the biggest impact and best value for the taxpayer and our partners.



### National government

Promoting health in all policies

- deliver the programme of work to significantly reduce childhood obesity, by implementing the **sugar reduction programme**; developing work on salt, fat and total calorie reduction; supporting local delivery including by the wider public health workforce, and working with industry, schools, local government and the NHS
- implement the PHE-led commitments in the forthcoming **tobacco control** plan, focusing on reducing variation in England and including publication of an updated evidence report on e-cigarettes and novel tobacco products
- support the follow-up to the **work, health and disability** green paper<sup>25</sup>, in particular developing tools and information for employers and the public; and supporting the promotion of both health at work and the importance of work as a health outcome, across all business sectors, local employers, partners and among clinicians and the NHS

- support cross-government commitments to tackle **child sexual abuse and exploitation**
- implement PHE-led commitments in the Home Office's **drugs strategy**<sup>26</sup>
- support the Government's ambition to reduce **antimicrobial resistance (AMR)** by working with the NHS, in particular on reducing inappropriate prescribing (including through behaviour change); and reducing healthcare associated Gram-negative bloodstream infections; as well as implementing the PHE-led commitments
- contribute to cross-government activity on addressing environmental factors that can pose a risk to public health, including but not limited to **air pollution**
- contribute to the development of the **industrial strategy**



### Local government

Sharing our expertise and evidence on what works

- **support local delivery** through promoting sustained improvement and reduced variation in public health outcomes by supporting local government to deliver effective and efficient public health interventions and services in line with the Public Health Grant conditions and regulations
- support the development of a **new assurance and financial framework** for the public health system (greater devolution and a future move from grant funding to 100% Business Rates Retention) promoting transparency of public health outcomes and supporting local accountability and improvement
- deliver targeted and usable information via **Health Matters**<sup>27</sup> to support the commissioning of effective evidence-based public health interventions at a local level
- work with local government and the NHS to maximise the delivery and outcomes of the **NHS Health Check** programme



- promote good **mental health**, prevent mental health problems and improve the lives of people living with and recovering from mental illness, including through the implementation of the key PHE commitments from the Five Year Forward View for Mental Health<sup>28</sup>
- implement actions to enhance commissioning of **sexual and reproductive health** services, focusing on helping delivery organisations reduce the variation in health outcomes in England, as well as supporting NHS England and local government in implementing the PrEP pilot
- support the identification of **local health priorities** through provision of robust intelligence and the assessment of what works to improve population health outcomes, while taking due regard for data confidentiality and security
- work with local government and health visitors on **Best start in life** to drive improvements in child health outcomes at scale, assure local delivery of the five 0-5 universal checks (to all children, everywhere) and provide evidence on priority interventions in universal plus and universal partnership plus service; support the development of a strategy to address the needs of children living with alcohol dependent parents; and lead the prevention workstream within the national **Maternity Transformation Programme** working across the local NHS and local government
- partner with Wiltshire Council and the Defence Scientific Technology Laboratories to develop the **Porton Science Park**
- support local action to reduce **health inequalities**, working in partnership with the Department of Health, the Local Government Association, NHS England and relevant national bodies
- continue our work with the **Well North programme** supporting local community based approaches to public health, in particular through helping its transition to a community interest company and assisting with the finalisation of its evaluation strategy



## The NHS

Getting serious about prevention and support for STPs

- **make the case for prevention** with the Department of Health and NHS England, and work with the NHS and local government to support local implementation of the NHS Five Year Forward View prevention agenda – particularly on closing the health, financial and quality gaps – to help reduce avoidable increases in demand on NHS services. In particular:
  - support the implementation and delivery of **sustainability and transformation plans** helping NHS and local government commissioners to deliver savings, and to prioritise activities with greatest impact on the public's health in order to support improved value for money
  - support NHS England in delivering a two-year programme, which will promote the implementation of **preventative interventions at scale** by the NHS, in collaboration with local health and care partners
  - developing proposals to make better use of **behavioural science** to help people take more control of their health, with a specific focus on increasing uptake of prevention programmes to reduce demand on the NHS
- introduce the **hexavalent vaccine** for the primary infant vaccinations (diphtheria, tetanus, pertussis, poliomyelitis, *Haemophilus influenzae* type B and hepatitis B) to the childhood vaccination programme
- design and finalise an implementation strategy for the faecal immunochemical test within the **bowel cancer screening** programme





## Directly to the public

Making the healthy choice the easy choice

- educate, inform and secure **behavioural change** through campaigns:
  - starting well: helping every child to have the best start in life through: Change4life, Start4life, RiseAbove and Frank campaigns
  - living well: tackling lifestyle behaviours in 40-60 age group such as smoking through One You, Smoking cessation and sexual health campaigns
  - ageing well: supporting the public to identify signs and symptoms and encourage them to access healthcare through Be Clear on Cancer, Act FAST (stroke), AMR and sepsis campaigns
- help people to take more control of their own health by understanding the evidence of **behavioural science** in improving health and informing new interventions
- engage over 1 million adults on their heart health by promoting access to the **Heart Age Tool**



## Global health

Protecting people living in the UK

- work closely with the Department of Health as part of a strategic 'one government' approach on **global health**, to:
  - strengthen the co-ordination of global health activities on infectious disease, environmental hazards and health improvement to protect people living in the UK, support the development of public health systems and improve capacity and expertise in agreed countries
  - implement the global health security agenda
- deliver research on chemical, radiation and hazardous assessment of substances, through **international and EU collaborations**



## Developing the public health system

Building capacity and capability

- work in partnership with the voluntary, community and social enterprise sector, Department of Health and NHS England through the new **Health and Wellbeing Alliance programme** to drive transformation of health and care systems to promote equality and address health inequalities
- continue to build capability in the **public health workforce** to enable leadership and delivery of the public health priorities now and in future, including taking the lead in implementing 'Fit for the Future'
- scale up the '**All Our Health**'<sup>29</sup> programme to reach 200,000 health and care professionals to embed and extend prevention, health protection and promotion of wellbeing and resilience into everyday practice
- act on the specific recommendations and actions of the most recent **Caldicott Review**<sup>30</sup> and the Review of Informed Choice<sup>31</sup>
- contribute to **the implementation of the Academy of Medical Sciences report** 'Improving the Health of the Public by 2040'<sup>32</sup>

- protect the public's health by working with system partners to complete the audit of **local health protection** arrangements, including the development of a national system to collate and disseminate lessons learnt from incidents
- build on **whole genome sequencing** with a view to extending testing to a further three high priority pathogens
- submit the planning application for **PHE Harlow**
- build **health economics** capacity and capability across the system
- continue to strengthen the **economic case for prevention** at national and local levels
- work with government and NHS England to develop a joint programme of work and produce plans for the public health system's response to **high-consequence infectious disease** incidents
- support the dissemination and increased use of research outputs from the National Institute for Health Research (NIHR) **Health Protection Research Units**, including novel analytical tools, online resources and masterclasses to provide timely, reliable evidence about emerging health threats



## Developing PHE

### Strengthening skills, building resilience

- strengthen **organisational capability** and operational effectiveness as well as long-term sustainability and resilience by acting as a learning organisation by continually learning from benchmarking information and reviews, including international reviews
- strengthen the skills of our leadership to manage change well, **inspiring and engaging our staff**, by supporting every team, over the next two years, to use the teams and leadership digital platform to accelerate reflective practice securing continuous improvement in our staff engagement scores
- **National Infection Service**: start implementation of the new organisational arrangements
- strengthen our **digital and information and communications technology** capacity and capability
- take forward the **Tailored Review** recommendations
- establish and implement a systematic approach to **managing and delivering research** and development that strengthens PHE's position in a competitive research landscape and supports the attraction, career development and retention of excellent public health scientists
- achieve maximum use of the **PHE estate** by co-locating staff from Skipton House to Wellington House in London, West Dean to PHE Porton, and staff based in Sheffield into a single location
- further embed our **taxpayer value strategy** to deliver more and better services for less, supported by our robust and enhanced financial governance framework
- work alongside the Chartered Institute of Public Finance and Accountancy to launch a new model for demonstrating **return on investment** in upstream prevention
- embed our new **Integrated Emergency Response Plan** to further strengthen our effective response to public health incidents and outbreaks by a programme of cross-sector exercising and testing throughout the year



# PHE Harlow: our future science campus and headquarters

When PHE Harlow fully opens in 2024 it will become a world-leading centre of public health science and the culmination of many years of planning. This investment of over £400 million is one of the government's major infrastructure projects and will bring together the legacy of the scientific excellence in infectious disease developed at Porton and Colindale with the national expert scientific teams in non-communicable disease, environmental and behavioural science and health improvement. It will also become our headquarters and the national centre for our response to major incidents that threaten the public's health.



*PHE Harlow: the future campus for UK public health science and headquarters*

This year we are accelerating our work in getting to know the community of Harlow through public exhibitions and local meetings and on the technical design work. It is an especially important year as we will be submitting the Town and Country Planning application and publishing a framework setting out the support our staff will receive as they make the move between 2021 and 2024. Over the course of the year many staff will be visiting the campus to see the potential for themselves, and we will continue our work on staff engagement in new ways of working.

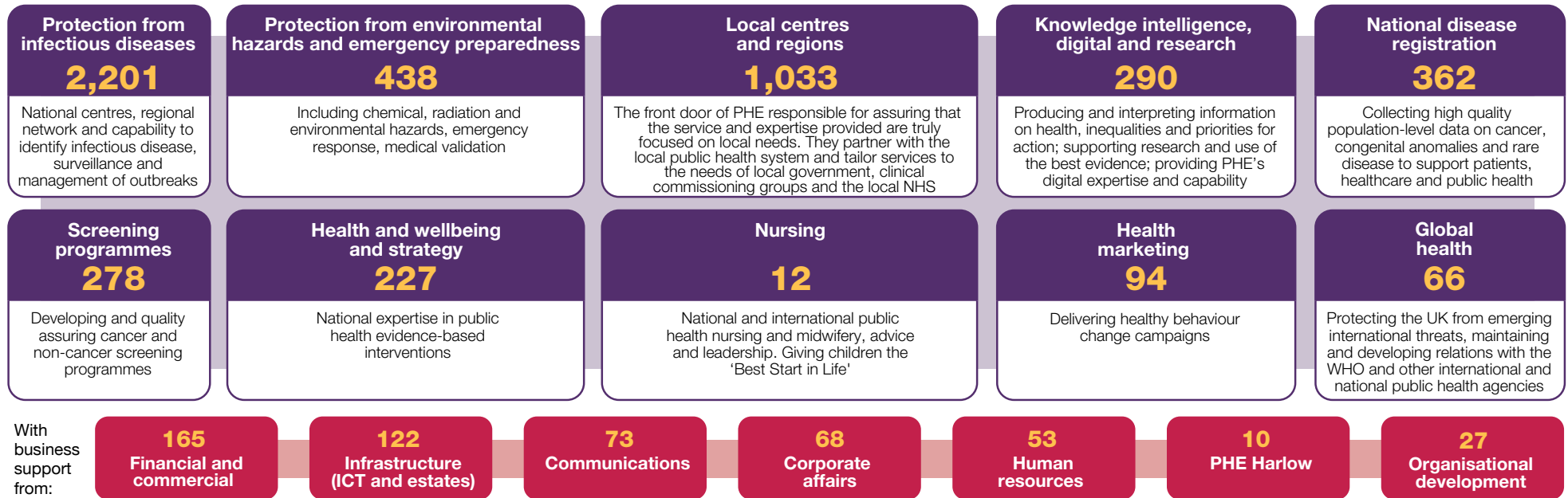
## Timeline of events



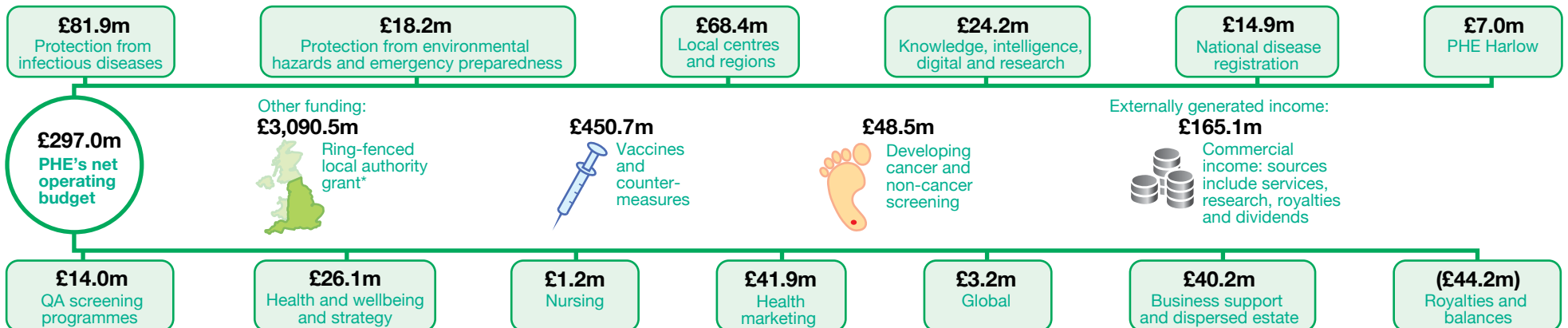


# People and budgets

To deliver a broad range of products and services we employ 5,519 staff:



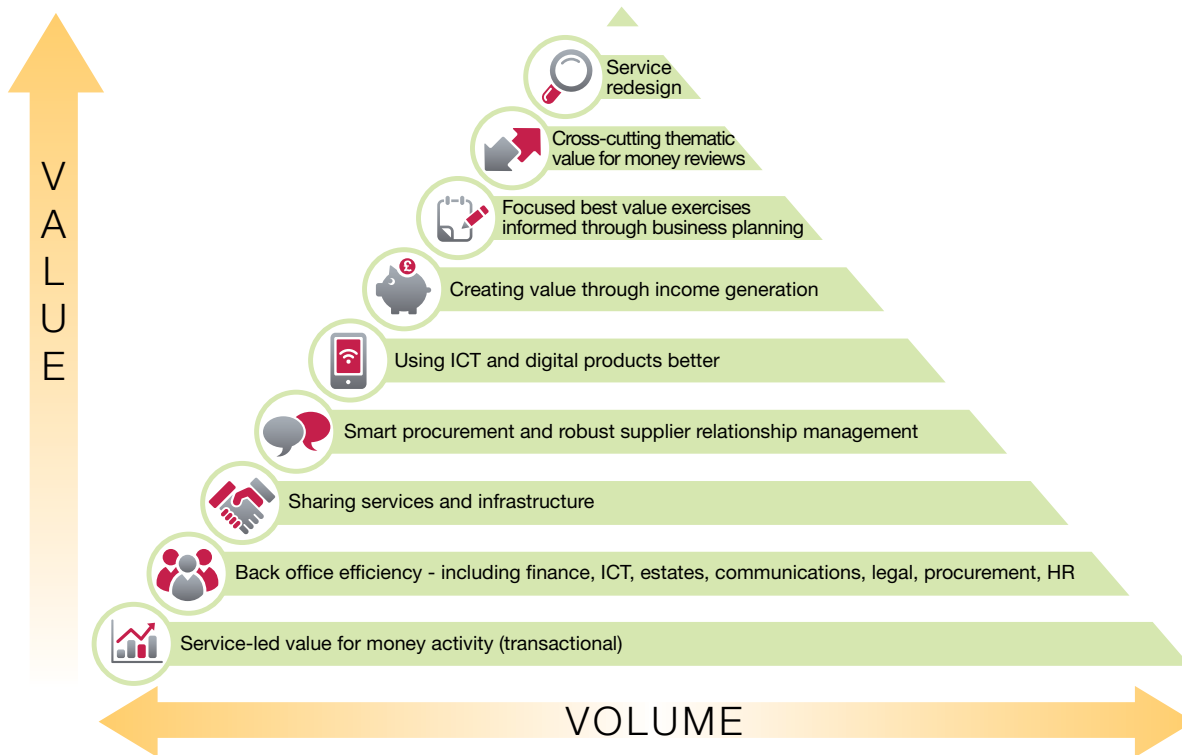
## Our revenue funding



\* Total public health funding allocated to local authorities is £3.3bn, including £213.4m of business rate income that the ten Greater Manchester local authorities will be able to retain to fund their public health function.

### Taxpayer value strategy and delivery

Through a relentless focus on value for money, encapsulated in our taxpayer value model below, we have delivered recurrent efficiency savings of £145m. This is a saving of more than 30% of our net operating costs and cumulatively represents around £0.5bn savings for the taxpayer since we were formed in 2013. We have achieved this while continuing to keep the nation safe from infectious disease, environmental hazards and working to improve the public's health.



### Our national and local presence

- PHE Harlow**  
PHE national centre, bringing together work of PHE Colindale and PHE Porton, from 2021/22 onwards
- PHE Colindale**  
includes infectious disease surveillance and control, reference microbiology, other specialist services such as sequencing and high containment microbiology, plus food, water and environmental services
- PHE Chilton**  
includes the headquarters of the Centre for Radiation, Chemical and Environmental Hazards (CRCE). CRCE operates from 11 locations over England, Scotland and Wales
- PHE Porton**  
includes departments for rare and imported pathogens, research, PHE Culture Collections and emergency response, plus food, water and environmental services

**We operate through nine centres in four regions:**  
North, South, Midlands and East, and London  
Our staff work from 64 locations

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



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# About Public Health England

Public Health England exists 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 the delivery of specialist public health services. We are an executive agency of the Department of Health, and are a distinct delivery organisation with operational autonomy to advise and support government, local authorities and the NHS in a professionally independent manner.

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