



Public Health
England



Duncan Selbie
Chief Executive

Friday message

1 March 2013

Dear everyone

I am very pleased to say that we have made [appointments](#) to six of our eight vacant Centre Director posts. Dr Jane Rossini, currently Joint Director of Public Health for NHS Heywood, Middleton and Rochdale and Rochdale Borough Council, has been appointed Centre Director for Cumbria and Lancashire; Dr Fu-Meng Khaw, currently Joint Director of Public Health for NHS Newcastle and Newcastle City Council, will be Centre Director for Lincolnshire, Leicestershire, Nottinghamshire and Derbyshire; Dr Gina Radford, currently Consultant in Public Health at NHS Cambridgeshire, will be Centre Director for Norfolk, Suffolk, Cambridge and Essex; Dr Shona Arora, Joint Director of Public Health for NHS Gloucestershire and Gloucestershire County Council, will be Centre Director for Avon, Gloucestershire and Wiltshire; Professor Debra Laphorne, currently Joint Director of Public Health for NHS Plymouth and Plymouth City Council, will be Centre Director for Devon, Cornwall and Somerset; Dr Jim O'Brien, currently Deputy Regional Director of Public Health NHS South-West, will be Centre Director for Hampshire, Isle of Wight and Dorset. This means our frontline is almost complete and it will be hopefully reassuring for our partners in local government, the voluntary and community sector and the NHS to know who they will be working with. Most of our new appointees will be in place by the time PHE is up and running in April but where not, contingency arrangements will be confirmed. The remaining two posts for the Centres in Thames Valley and Bedfordshire, Hertfordshire and Northamptonshire will be advertised next week.

On Tuesday the Local Government Association held their second annual public health conference, opened by their Chairman Sir Merrick Cockell and addressed by Ben Page, Chief Executive of MORI, amongst many others. Sir Merrick spoke with passion, knowledge and ambition in taking on their new statutory duties to improve the public's health and I do wish this could have been broadcast across the nation. Ben shared the [findings](#) from MORI's recent work around the public's understanding of their own health and what could be done to improve it. The essential message, conveyed in a captivating way, is that while people understand what they could do to improve their health they are very often reluctant to act on this and we need to be more savvy in how we listen and respond in ways that are more effective than we have hitherto managed.

On Monday I had the pleasure of meeting the network of Chairs of the 14 Health and Wellbeing Boards across the West Midlands. This was a stimulating and practical conversation – and I am keen to have many more in such fora – which emphasised the critical role of Health and Wellbeing Boards and their mission to be bold and ambitious for their communities and to focus unremittingly on *health* and not solely on *illness* in tackling the causes of inequalities and poor outcomes.

And finally, homeless people cost the NHS eight times more than people with homes but still have appalling health outcomes dying, on average, at just over 45. At an inaugural international conference on homelessness and exclusion in London yesterday I committed PHE to working with all those with an interest to address this as it plays entirely to our mission to improve the health of the poorest and most poorly fastest.

With best wishes