

Public Health England

Friday message



Duncan Selbie
Chief Executive Designate

30 November 2012

Dear everyone

I am very pleased to be today publishing the [final stage](#) of our People Transition Policy which sets out the terms and conditions for staff transferring into PHE (either by direct slot-in, matching, or redeployment). Staff will move on their existing terms and conditions. In addition, everyone in a Civil Service or NHS scheme will retain the right to remain in their current pension scheme until 2015, after which they will move to the new civil service career average scheme in line with the reforms which affect staff across the public sector. Although all our staff will be civil servants, and new appointments will be on PHE terms and conditions, we will have the flexibility to offer NHS terms, including pensions, for posts in a clearly defined “clinical ring-fence.” This will enable PHE to continue to recruit the specialists it needs, where the market is principally the NHS, and will facilitate mobility across the whole system.

Also today, another major step forward is that confirmation of those staff who will lift and shift into PHE is being sent out to those sender organisations not included in the first phase of notifications. Individual letters communicating the decisions on lift and shift and matches should be with staff in the next week. Those remaining staff subject to competitive matching can get the advice and guidance they need from their HR teams. As I have said before, we are committed to doing everything we can to secure the futures of all staff whose work is moving to PHE – and soon.

I am also very glad to say that the Secretary of State yesterday confirmed that the chair of PHE’s Advisory Board will be [Professor David Heymann](#), who is currently chair of the Health Protection Agency and acting chair of PHE. He brings a wealth of invaluable experience to this role as a public health scientist and doctor at both national and international levels.

Last week I talked about the development of a shared culture with a common language, and a further essential element of this is establishing a core public health literature base – public health literature is very broad, ranging from philosophy and ethics to genetics, and we should identify those books, articles and reports that inform this. Muir Gray and Richard Gleave, who are leading the work on developing a shared culture, are also starting a debate on the top 100 public health documents that form the core of our intellectual heritage and will be seeking contributions to this.

And finally, I have been aware of uncertainty in the field about the financing for community infection prevention and control. This responsibility rests with the embedded public health teams within local government and we have decided that the 50 per cent of the £25 million set aside for this function which was due to be retained by PHE should be handed in its entirety to local government. This will be reflected in the allocations which are expected before Christmas.

With best wishes

A handwritten signature in black ink that reads "Duncan Selbie". The signature is written in a cursive, flowing style.