



Public Health
England

Developing a Research and Academic Strategy for Public Health England

Professor John Newton
Chief Knowledge Officer



Research Strategy – key points from previous AMS meeting

Public health researchers, practitioners and policy makers must have a closer working relationship than at present.

Organisations that aim to address public health in England are currently operating in a complex system. PHE is well situated in this system to facilitate knowledge exchange between research and practice.

Support for PHE's current strategy to move away from internal funding/commissioning of health protection research programmes

Large population-based data sets are essential to the field of public health. PHE must facilitate straightforward access to centrally held datasets to support research.



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Research Strategy supporting Public Health England's mission

Public Health England's mission is to protect and improve the nation's health and to address inequalities through working with national and local government, the NHS, industry and the voluntary and community sector.



Framework Agreement between the Department of Health and Public Health England November 2013

Functions in framework in relation to research:

Main document: Section 2.2 ‘undertaking and contributing to research and development in areas relevant to its other functions’

Annex A: ‘lead on the development of a science and research strategy for the public’s health, vibrant educational programmes for under and post-graduates and continuing professional development’

Annex B: Statutory duties: ‘Section 1E of the 2006 Act – in so far as this duty relates to the statutory functions performed by PHE a duty to promote research on matters relevant to the health service (including public health), and the use of evidence obtained from research

paragraph 13 of Schedule 1 to the 2006 Act – a power ... to conduct, commission or assist research in relation to public health ‘



Research Strategy – an approach

- Strategic priorities x5
- Research Programmes
- Persisting questions x9
 - Crosscutting x4
 - Thematic x5





Strategic priorities for research

- Generate new knowledge to improve and protect health
- Build and share high quality infrastructure to allow research by others
- Support and develop relevant research capacity in PHE and elsewhere
- Drive translation of research into practice in public health
- Communicate widely and openly about research and its contribution to improving and protecting health



Determining research priorities

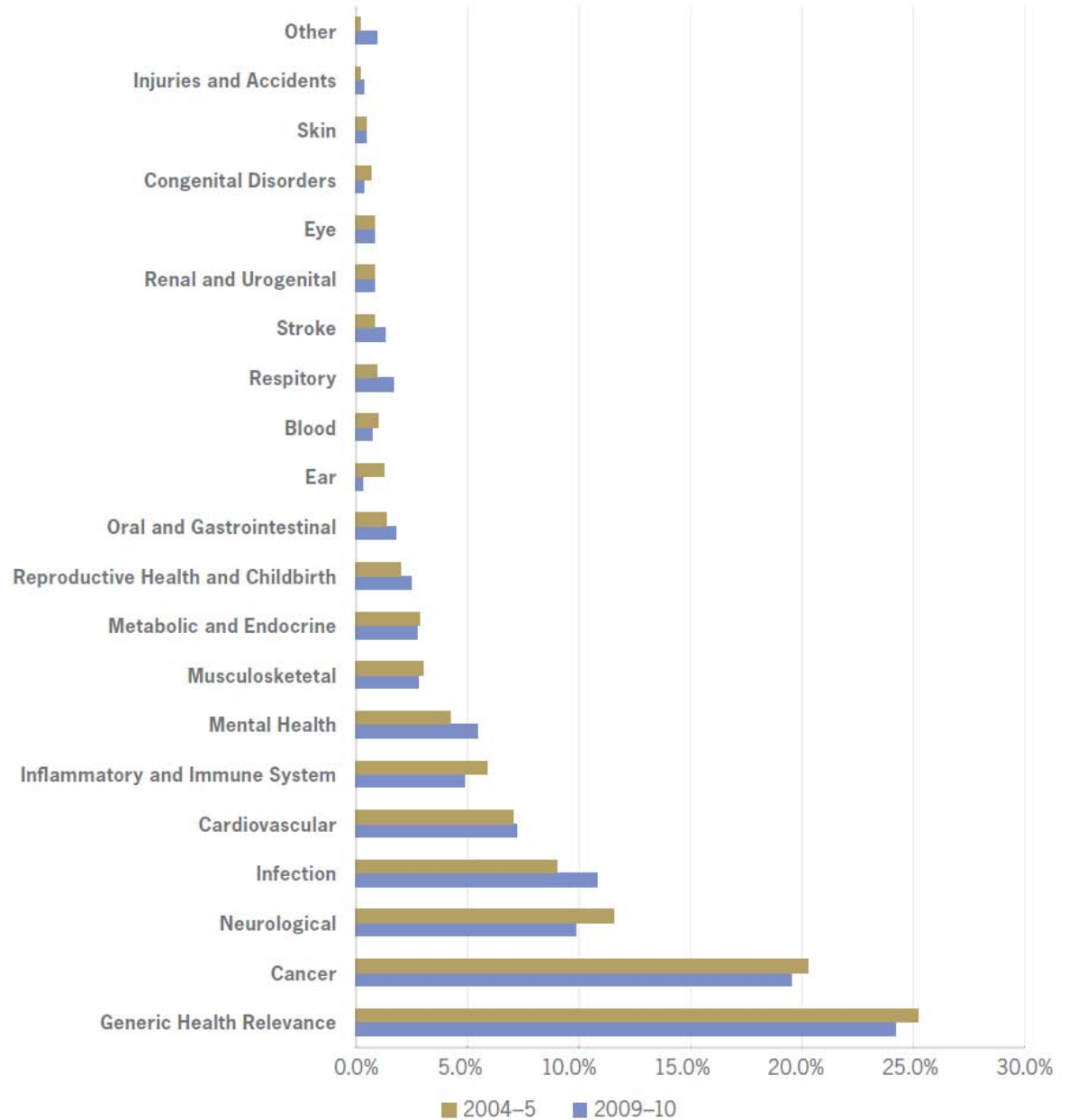
Scientific process that takes forward the work through current substantial research activity

Works with key stakeholders to ensure the long and mid-term priorities are the most appropriate for health protection and improvement in England e.g..

Research councils,
LA, Public Health practitioners
DH, NICE, NIHR
VCS and charities
Commercial sector
UK, European and other agencies

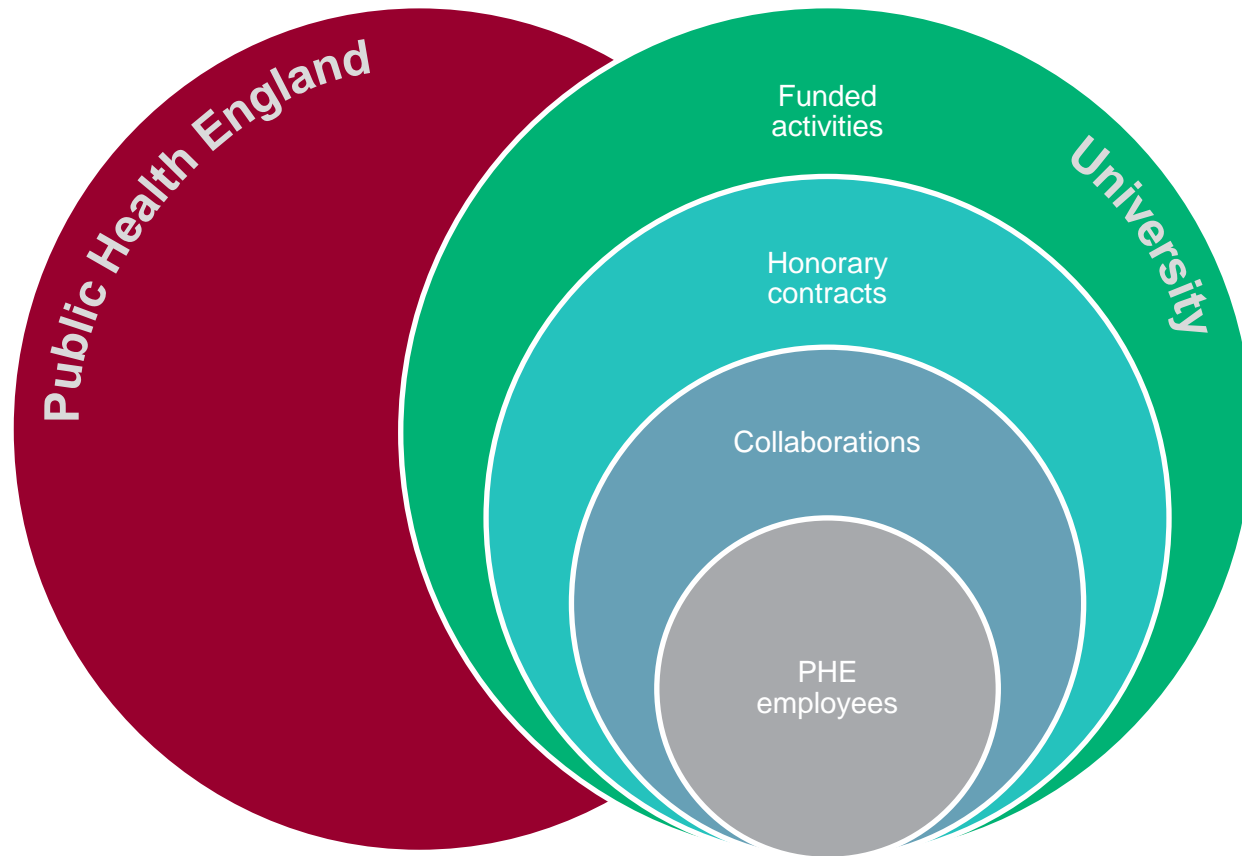


Figure 5: Proportion of Combined Spend on Health Specific Categories





The university partnership





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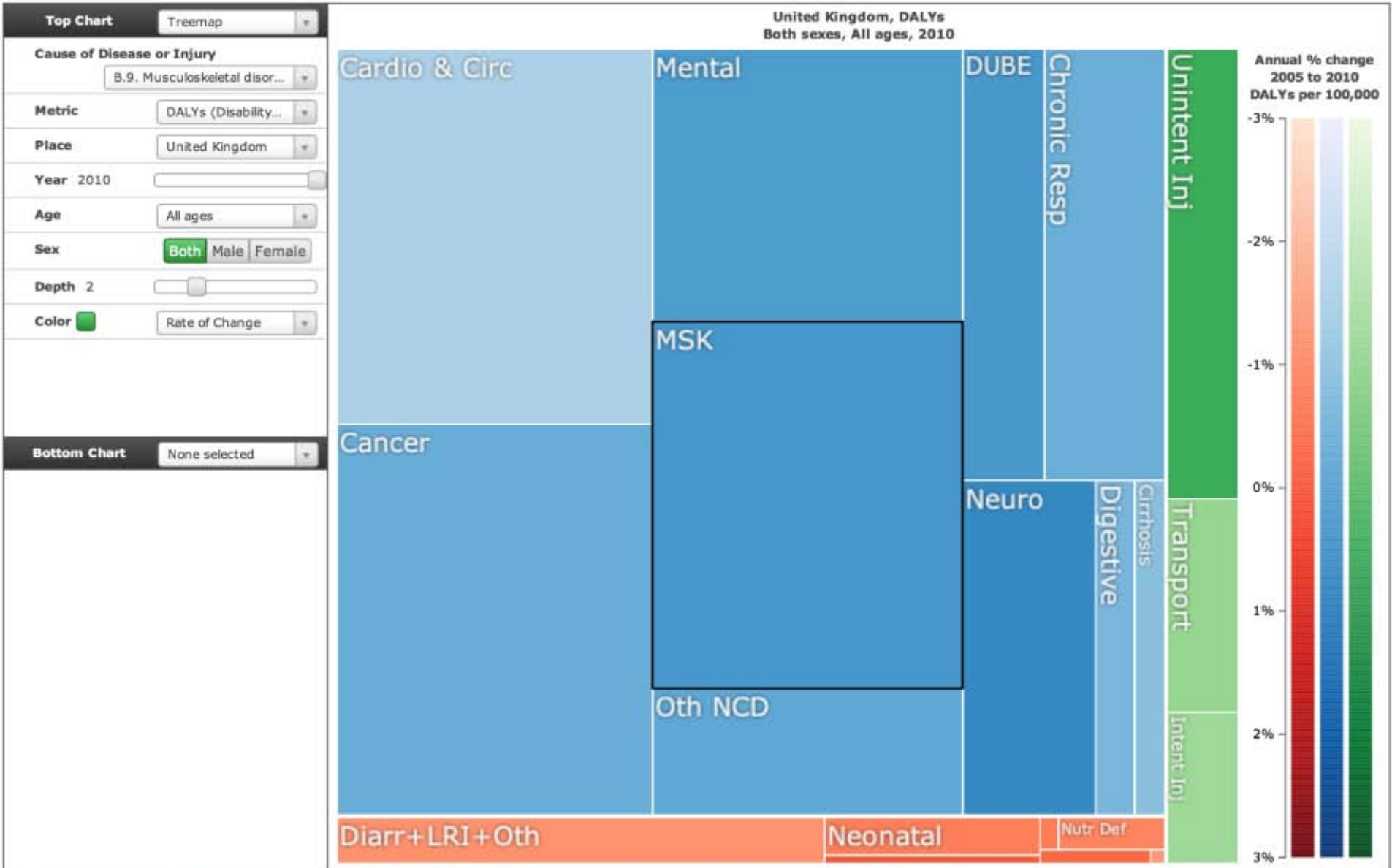
National Map of PHE's Partnership with Universities





Persisting questions – cross-cutting?

- What is the quantitative contribution of different risk factors to current burden of morbidity and mortality (descriptive epidemiology)?
- What are the most effective interventions or approaches for improving health and health inequalities?
- What are the most effective methods of implementing those interventions or approaches in different settings?
- What actions should we take to mitigate the health risks associated with climate change?



In UK 15% of DALYS is due to MSK



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How to mitigate risks from extreme climate change?



David Shukman

Science editor

More from David



'Low health risk' from fracking, says UK agency

COMMENTS (273)



The risks to public health from fracking for shale gas are low, according to a new official report.

Any problems publicised so far - such as in the US - are the result of

More from David

A deep sea mission

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Persisting questions – thematic?

- How do we best protect the population from infectious disease and control it when present?
- How do we assess risk of environmental hazards and control them?
- How do we best exploit large datasets and genomics to improve population health?
- How can we go further and faster to tackle the risk factors associated with disadvantage including obesity, tobacco, physical inactivity and substance misuse?
- How can we improve the health and resilience of our (a) older people and (b) children?



Areas and opportunities to explore further?

Collaborative work with the Farr Institute and with international partners

Joint grant applications could be explored

Use of CLARHCs and AHSNs with local implementation – where is effort most effective?

Joint working across UK countries using expertise and interest appropriately

The UKCRC centres may have something to offer in terms of working with local government.

ESRC may be able to help with translation resources

The area of new laboratory measurement techniques should not be ignored - PHE has lots of these



PHE RESEARCH STRATEGY TIMETABLE

28 th November 2013	Academy of Medical Sciences meeting
2 nd December 2013	Meeting of the Academic Research Scientists
16 th December 2013	First draft (v1) sent out for internal review
January 2014	R&D Group Workshop to discuss the v1 draft
January 2014	Second draft to wider consultation
March 2014	Document to the PHE National Executive.



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Knowledge Strategy for consultation

1. Provide the intelligence that local government and local NHS need
2. Support, conduct and translate research
3. Build and manage linked datasets
4. Translate knowledge into action
5. Build and develop health intelligence networks
6. Extend the use of surveillance to inform health responses
7. Connect people to share experience
8. Develop a web portal to report and provide access to information and evidence