Reviewer’s report
Title: Beyond the parish pump: what next for public health?

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Reviewer: Beth A. Resnick

Reviewer's report:
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Background and overview of the history of the British public health system was helpful and the questions posed set the stage for an interesting study. However, the methods and results are lacking. Additional details are needed on the specific research questions, of both the larger study and this qualitative portion. Additionally, more information is needed on how the sites for interviews were selected, the make-up of the respondents (a respondent table), and the analysis approach.

The results need to present an objective assessment of the interview findings and themes that emerged from the analysis of all 55 interviews, rather than using selected quotes to substantiate what seems to be the authors' perceptions. Examples of this are as follows:

lines 337-341, "These two quotes highlight the need for public health teams, in particular DsPH, to be able to persuade decision-makers within their LAs. This element of persuasion within a politicized environment seemed to be a new, post-Act feature of the hybridity of the public health professional role."
These quotes suggest that attempts to move away from the archaic medicalisation of public health, and embrace hybridity, may have varying degrees of success because of the diverse siting of DsPH within LAs.

This quote suggests some concerns that PHE is staffed primarily by career civil servants who are sensitive to the principles of politics, rather than by public health specialists who embody the principles at the heart of 'pure' public health professionalism. The implication appears to be that PHE is thus located somewhere 'outside' the public health community, which is completely at odd with its intended role as the profession's flagship.

Both of these quotes suggest that dividing of commissioning responsibilities between PHE and LAs may have inadvertently undermined feelings of connection with aspects of 'pure' public health professionalism, which makes embracing hybrid roles difficult. For DsPH in LAs, there may be strong resentment that they have lost a traditional element of their professional identity. Yet for PHE employees embedded in NHSE, there may also be some dissatisfaction with a hybrid role that seems to foreground aspects of managerialism at the expense of advocacy working with vulnerable populations that is also perceived to be at the heart of 'pure' public health professionalism.

Taken together, these quotes suggest that the term 'public health' has a particular interpretation by CCGs based upon their responsibilities for their local populations. There are suggestions that public health colleagues in LAs appreciated clear signs that CCGs are thinking seriously about public health. Yet for CCGs, their hybridised form of public health professionalism may emphasise managerial aspects of fiscal efficiency, and there appears to be some enduring confusion about the remit of CCGs, PHE and LAs in relation to public health.

The changes in the British public health system in 2012 offer opportunity for meaningful research on the impact of such changes on the professionalism of the field of public health. If the article could be revised to present results of a formal analysis of the 55 interviews organized around clear research questions the work could be a valuable addition to the literature and to the professionals in the field.
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.
No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.
Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.
No

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