

Real-life story - John Tomlinson

John worked as a GP before training to become a public health consultant. He took up post of deputy director of public health in 2006 originally in the NHS but when public health transferred into local authorities in 2013, his employment moved to the County Council.

John Tomlinson Deputy director of public health

Employer or university Nottinghamshire county council

Salary range Unknown

How I got into the role

I have always been interested in human biology and health. By training as a doctor I knew I'd be entering a worthwhile job and be able to help people.

After finishing medical school I worked in hospitals in Merseyside and North Wales. I then worked in hospitals in Jamaica and Australia and after finishing GP training I went to work for Save the Children Fund in Somalia. All these posts opened my eyes to the health inequalities of very poor people.

In 1989 my colleagues and others close to me encouraged me to become a public health consultant. I discussed my options with various people, and spent a week shadowing consultants in a public health department. I eventually opted to train to be a public health consultant because of the opportunities it would give me to work on some of the root causes of health inequalities. I took up my first consultant post in 1994.

What I do

I am a public health consultant with additional responsibility to deputise for the director of public health (DPH) who acts as the lead officer in the local authority for health and wellbeing.

My lead areas include tobacco control, the NHS Health Check Programme, homelessness and health inequalities. I am responsible for developing and delivering strategic plans and programmes to meet public health targets in these areas and generally promote evidence-based high-quality services that are fair and equitable for our population.

An important aspect of my role is to provide public health advice and leadership to two local Clinical Commissioning Groups (CCGs).

I was until recently seconded for one day a week to Public Health England (PHE) to support appraisal and re-validation processes for public health consultants in the Midlands and East region. I am also the elected East Midlands Local Board Member of the national Faculty of Public Health board.

When I entered medical school to train as a doctor I never dreamt that one day a core part of my role would be influencing politicians!

The best bits and challenges

Every day is different and might be spent in the office or out and about across the patch. I really enjoy the variety.

I particularly enjoy tobacco control work. Smoking is public health enemy number one so if public health had to choose just one agenda to work on, in my opinion, this is the most vital. I was influenced early on in life when I saw the effects of smoking on people in my family, and I also like the fact that this work brings so many partner agencies together with a common purpose; no single partner can do this on their own so I get great job satisfaction from contributing.

I've always enjoyed looking at data and working out what statistics and evidence tell us. I do this constantly in my role as it helps me to come up with plans or strategies to tackle issues. Turning the evidence into practical, workable solutions that can be used to improve health and wellbeing is what drives me.

I'm proud of a lot of things accomplished over the years, such as working in a war zone in Somalia in the mid-1980s for Save the Children. If I had to choose one thing that had a significant impact on the health of the population I would have to say being involved in lobbying local Members of Parliament (MPs) to ban smoking in public places comes top. At first, only two of our local MPs supported the ban but following public health lobbying, nine out of eleven voted for the ban. When I entered medical school to train as a doctor I never dreamed that one day a core part of my role would be influencing politicians!

Life outside work

Compared to jobs I have had in the past my current role provides a good work-life balance. I live quite close to where I'm based which helps; and I am able to work flexible hours as necessary.

Career plans and top tips for others

At the moment I'm content in my role and have no plans to move on. Recent years have been challenging because public health has moved from the NHS into local government and has had to adjust to a more political environment. This has changed how public health consultants perform their role; in the NHS it may be more about making decisions and being accountable whereas in local government the emphasis is on using knowledge and expertise to formulate a range of options for politicians to make decisions.

There are a variety of settings and sectors in which you might work as a public health consultant and each of these can be very different so it is very important to talk to people already working in the role in different organisations to fully understand what the post is like in reality. ?

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