

HEALTH AND WELLBEING BOARD SEPTEMBER 2023

HEALTH PROTECTION GROUP OVERVIEW

Board Sponsor

Dr Lisa McNally, Director of Public Health

Author

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Priorities

This report is relevant to the following Joint Local Health and Wellbeing Strategy priorities:

- | | |
|--|---|
| <input checked="" type="checkbox"/> Prevention & inequalities | <input checked="" type="checkbox"/> Homes, Communities & Places |
| <input type="checkbox"/> Mental Health & Wellbeing | <input type="checkbox"/> Jobs & Opportunities |
| <input checked="" type="checkbox"/> Healthy Living at All Ages | |

Safeguarding

This report does not have a direct impact on safeguarding children or adults.

Item for Decision, or Information & Assurance

- | | |
|-----------------------------------|---|
| <input type="checkbox"/> Decision | <input checked="" type="checkbox"/> Information/assurance |
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Recommendation

1. **The Health and Wellbeing Board is asked to note:**
 - a) **The formation of the new Health Protection Group (formally Covid-19 Health Protection Board and the Health Protection Sub-Group) and the contribution made by this group since its formation in late 2022,**
 - b) **The development of a new 5-year Health Protection Strategy which has involved members of the Health Protection Group who will have oversight,**
 - c) **The capability of the Health Protection Group to plan and prepare for future events, such as Winter Planning and horizon scanning, and**
 - d) **The necessity for WCC and the ICB to jointly fund a dedicated IPC team for residential care settings in Worcestershire.**

Background

2. During the Covid-19 pandemic two Worcestershire County Council boards had oversight for Health Protection. The Covid-19 Health Protection Board, who would have oversight of the Outbreak Control Plan and who would make recommendations to focus covid-19 activity, and the Health Protection Sub-Group, who would provide assurance that multi-agency arrangements were in place to

protect the public. As the pandemic response was eased the decision was taken to create one new board with oversight for Health Protection across the county. In early 2022 members of both groups were invited to collaborate on the terms and required membership of the new group, considering the most beneficial elements of the existing groups and any other areas which should be added. This led to the creation of the new Health Protection Group, which continued with a multi-agency membership, and a new Terms of Reference (**Appendix A**) the Health Protection Group have met quarterly since November 2022 and have recently completed their third meeting. There have been high levels of attendance, engagement, buy in and process development at these meetings.

Health protection update

3. Health Protection Strategy

The Health Protection Group have supported the production of, and will have oversight of, a new 5-year Health Protection Strategy for Worcestershire. This will be the first HP Strategy for the county and will detail key Health Protection priorities for Worcestershire. The strategy provides detail of the agreed actions and targets for the Health Protection Group and other stakeholders.

4. Infectious Disease Service

Whilst reviewing the pathways for outbreak and pandemic response, a gap in response was identified in the event of outbreaks and health protection incidents. Working with colleagues from the ICB, a new service has been implemented called the 'infectious disease response service'. This service is an asset that we have not previously had access to, providing enhanced capability to respond to incidents which was not previously possible in this way. This integrates with 'Your Health' vans which target health promotion and interventions within areas of deprivation. Services provided by these vans include health screening, immunisations, and health education.

5. MMR Uptake

The Health Protection Group discuss and plan for key incidents occurring locally and nationally. After seeing a rise in cases of Measles nationally the Group discussed and agreed actions for communications to encourage those who have not received at MMR vaccination to get vaccinated. Partnership working has also been undertaken to develop a Measles elimination plan for Worcestershire. It is important to note that MMR uptake remains high for Worcestershire, exceeding both regional and national figures, with no notified cases. However, the vaccinated population is not evenly distributed and so the plan included targeted comms for key groups such as the GRT community who generally have a low vaccination uptake. Health Protection colleagues have also worked with WCF to promote vaccination to the parents of children who have not yet received their MMR vaccine.

6. Screening and Immunisations

Screening and immunisations are discussed within the HP Group, looking at key trends and any areas which the group may need to focus on. One area the group will review is bowel screening. Worcestershire has seen a significant rise in bowel screening since 2021, with rates rising by nearly 10% and now exceeding the national average. Bowel screening identifies changes in the bowel which could lead to cancer. Screening tests are posted to patients between the ages of 60-74years. These tests were changed in 2019 to make it easier for people to complete which should continue to help our rates increase further. Other screening and immunisation rates have also been successful across the county, such as cervical screening rates which exceed both regional and national rates. The Public Health Protection team have also been involved in awareness campaigns.

7. TB

Worcestershire is a generally low incidence area for TB. However due to a changing population including people from countries of high incidence, the need to identify any gaps in current service provision has been recognised. It has also been recognised that there is a potential risk of people with no recourse to public funding being diagnosed with active TB. Therefore, a TB needs assessment is being undertaken to understand gaps and to provide recommendations and considerations to the Health Protection Group and wider system.

8. IPC Support for Residential Care Homes

Following the Covid-19 pandemic, and the removal of COMF funding for care home support, it became apparent that there is a lack of ongoing support for outbreak prevention and management within residential care homes. This leaves an infection prevention and control gap for this, often older and more vulnerable population living in residential care. This risk was identified by the HP Group, and a subsequent proposal was produced for joint WCC and ICB funding for a dedicated residential infection prevention and control team. We look forward to further collaboration and joint funding with the ICB on this proposal.

9. Winter planning and horizon scanning

Discussions within the Health Protection Group include focuses on potential Health Protection risks which are appearing nationally or planning for those which may begin to appear. The group will develop key actions to address these concerns which may include joint communications. This will include winter planning for the reduction and prevention of winter illnesses.

10. Air Quality

The HP Group receives updates from the Air Quality Action Group on current air quality issues and priorities across the county and key actions which are being taken forward. This includes grant funding which has been sourced for active air monitors to be set up around the county. These monitors will provide real time information on the air quality of key locations, enabling us to develop action plans to improve air

quality for our residents. Public Health are working collaboratively with other WCC colleagues, District Councils, WRS and NHS to produce an Air Quality Strategy for Worcestershire. Public Health are working collaboratively with other WCC colleagues, District Councils, WRS and NHS to produce an Air Quality Strategy for Worcestershire.

Impact on health disparities

11. The Health Protection Group reflects the priorities of the Health & Well-being board in the prevention of health inequalities across Worcestershire. This includes ensuring that the health and well-being of local vulnerable people and settings are addressed and that plans are implemented to support their Health Protection needs.

Legal, financial and HR implications

12. There are no legal, financial or HR implications arising from this report. Any future financial implications arising from discussions within the Health Protection Group will be considered by Worcestershire County Council as required.

Contact points and partnership working

County Council Contact Points

County Council: 01905 763763

Worcestershire Hub: 01905 765765

Specific Contact Points for this report

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Background Papers

In the opinion of the proper officer (Dr Lisa McNally, Director of Public Health) the following are the background papers relating to the subject matter of this report:

- Health Protection Group Terms of Reference (**Appendix A**).

APPENDIX A – Worcestershire Health Protection Group Terms of Reference

Date 29 April 2022

1. Purpose

- 1.1 A collaboration of partner agencies to give assurance, identify inequalities, create resolutions, and problem solve current and predicted threats to the Health and Wellbeing of Worcestershire residents.
- 1.2 To monitor the impact of COVID-19 within Worcestershire and to identify and escalate potential threats.

2. Objectives

- 2.1 The Health Protection Group will have oversight of the Worcestershire Health Protection Strategy and achieve the following objectives:
 - 2.1.1 To ensure that Worcestershire County Council (WCC), District Councils, NHS England (NHSE) and UK HSA (as category 1 responders), and the Clinical Commissioning Groups (CCGs) (as category 2 responders) [or the Integrated Care Board which supersedes them, which will become a category 1 responder] deliver their responsibilities for Emergency Preparedness, Resilience and Response (EPRR) under the Civil Contingencies Act, and where relevant for health protection under the Health and Social Care Act.
 - 2.1.2 To identify and share major threats to health and wellbeing which impact Worcestershire at both a local community and district level and at a wider county level, and ensure that comprehensive, up to date and tested plans are in place, working with the West Mercia Local Health Resilience Partnership and West Mercia Local Resilience Forum.
 - 2.1.3 To reflect the priorities of the Health & Well-being board in the prevention of health inequalities across Worcestershire. This will include ensuring that the health and well-being of local vulnerable people and settings are addressed and that plans are implemented to support their Health Protection needs.
 - 2.1.4 To review immunization coverage, overall and in specific groups, and to oversee the development and implementation of plans for improvement where necessary.
 - 2.1.5 To review the coverage and quality of national screening programmes, overall and in specific groups, and to oversee the development and implementation of plans for improvement where necessary.
 - 2.1.6 To monitor and identify any escalating risks from infectious disease outbreaks, to include COVID-19, with a focus on high-risk settings and communities of interest.
 - 2.1.7 To escalate concerns to the Health and Wellbeing Board where deficiencies in the preparation, resilience and/or response to threats to health and wellbeing are identified.

3. Membership

3.1 The group will comprise of representatives from relevant organisations in Worcestershire NHS E and UK HSA. The group will be chaired by the Director of Public Health.

3.2 Membership is as follows:

Worcestershire County Council

- Director of Public Health (Chair)
- Public Health Consultant
- Senior Public Health Practitioner
- Communications Lead (Guest)
- EPRR Lead

District Councils

- Senior Representative

Herefordshire & Worcestershire ICB

- Chief Nursing Officer
- Lead IPC Nurse
- EPRR lead

UK Health Security Agency

- CCDC
- HP Practitioner Lead
- EPRR Lead

NHS E

- Screening & Immunisations Lead

Worcestershire Acute Hospitals NHS Trust

- Microbiologist
- EPRR Lead

Worcestershire Regulatory Services

- Head of Regulatory Services

Worcester University

- Director of Student Life

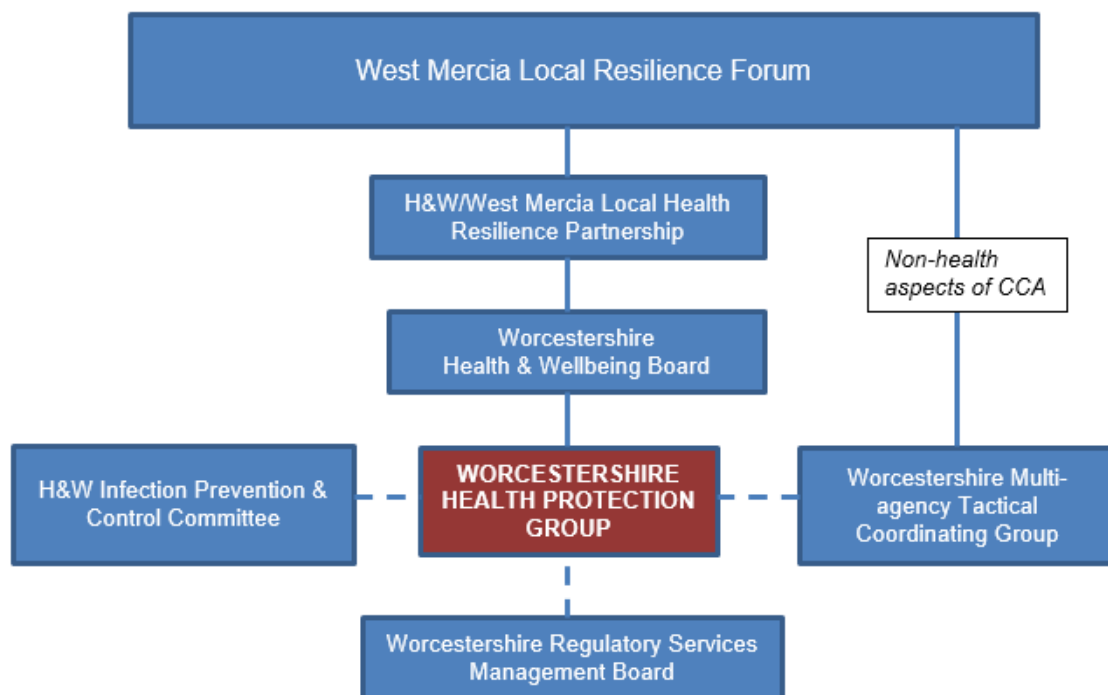
3.3 Members are expected to attend all meetings, or in exceptional circumstances to arrange for a suitable named delegate to attend in his/her place. In case of delegating, the nominee should be appropriately briefed prior to attending the meeting and able to make decisions on behalf of the individual they represent.

Additional members will be invited at the discretion of the Chair to join the meetings for discussion of specific items of interest.

4. Reporting

- 4.1 The Worcestershire Health Protection Group is a sub-group of the Health and Wellbeing Board, providing bi-annual update reports, the HP Group will also escalate issues as appropriate.
- 4.2 The below diagram shows the relationship between the Worcestershire Health Protection group within the Worcestershire Health and Care System. This demonstrates the groups that will be supported by the HP group.

Diagram 1. (Detailed for the purpose of Health Protection)



5. Frequency of meetings

- 5.1 Meetings will take place quarterly, with the Chair able to call additional meetings at their discretion.
- 5.2 Extraordinary meetings will be called in the event of major incidents.
- 5.3 Documents will be circulated at least 5 days in advance of meetings.
- 5.4 The HP Group is serviced by WCC Public Health and agenda items to be added via Chair or Lead Public Health Consultant.

6. Quorum and Decision-making

- 6.1 Decisions of the group will be made by consensus wherever possible. If a consensus cannot be reached the Chairman will call for a vote from amongst those voting members present at the time. The Chairperson will have a second or casting vote in the case of equality of votes.
- 6.2 Meetings will be quorate if there is a representative from UK HSA, WCC and three further organisations.