

ANNUAL HEALTH PROTECTION REPORT (2018)

To: **Health Committee**

Meeting Date: **23 May 2019**

From: **Director of Public Health**

Electoral division(s): **All**

Forward Plan ref: **n/a**

***Key decision:* No**

Purpose: **To present the Cambridgeshire and Peterborough Annual Health Protection Report (2018), which provides information on and assurance of the local delivery of health protection functions.**

Recommendation: **The Committee is asked to note the information in the Annual Health Protection Report (2018).**

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BACKGROUND

- 1.1 The Annual Health Protection Report (2018) attached as Appendix 1 is the sixth annual report on health protection produced in Cambridgeshire since the transfer of public health functions to local authorities.
- 1.2 This report is submitted to the Board from the Cambridgeshire County Council Public Health Directorate, and is produced using data and information provided by partner organisations including Public Health England, NHS England and the Cambridgeshire and Peterborough Clinical Commissioning Group. These organisations meet together on a quarterly basis at the Cambridgeshire and Peterborough Health Protection Steering Group, chaired by the DPH.
- 1.3 The services that fall within Health Protection include:
 - i. communicable diseases – their prevention and management
 - ii. infection control
 - iii. routine antenatal, new born, young person and adult screening
 - iv. routine immunisation and vaccination
 - v. sexual health
 - vi. environmental hazards.
 - vii planning for public health emergencies
- 1.4 It is important that there is publicly available information that demonstrates that statutory responsibilities for health protection have been fulfilled; to have the means to seek assurance of this; and to have processes in place to address and escalate any issues that may arise.
- 1.5 This year a joint report for Cambridgeshire and Peterborough has been produced, although data is presented separately for Cambridgeshire and Peterborough where available. The data presented in this report was current and accurate at the time of producing the report (January 2019).

2. MAIN ISSUES

- 2.1 This report provides an update on all key areas of health protection for Cambridgeshire including:
 - Communicable disease surveillance and reporting of infectious disease outbreaks.
 - Immunisations which show a steady state for some and a gradual increase in uptake of many childhood immunisations and of seasonal flu vaccination.
 - Screening in which cervical screening continues to have lower than 'acceptable' uptake in Cambridgeshire, corresponding with the national pattern.
 - Healthcare associated infections and the work to reduce anti-microbial resistance.
 - The Environmental Health role of city and district councils in protecting health including pollution control and air quality monitoring and advice.¹
 - The national TB strategy and local implementation of some key areas of the strategy, notably Latent TB Infection Screening (LTBI).

¹ This section of the report has been extended following feedback from the Cambridgeshire Health Committee in 2018.

- Sexual health including the reducing level of sexually transmitted infections diagnoses, greater than average rates of late HIV diagnosis and low rates of chlamydia detection. The teenage pregnancy rates in Cambridgeshire remain below the England average.
- Health emergency planning, the work completed in the past 12 months and the priorities for the coming year.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

Effective prevention of infectious disease outbreaks maintains workforce health and is therefore beneficial to the economy.

3.2 Helping people live healthy and independent lives

The report describes measures to protect people's health from infectious disease, environmental hazards and public health emergencies.

3.3 Supporting and protecting vulnerable people

Some vulnerable groups of people have increased susceptibility to infectious disease – for example pregnant women, people with long term conditions and elderly people are more vulnerable to the effects of influenza and are entitled to free vaccinations.

Source Documents	Location
None	