

**HEALTH PROTECTION ANNUAL REPORT**

To: Health and Wellbeing Board

Date: 23<sup>rd</sup> June 2014

From: Dr Linda Sheridan, Consultant in Public Health Medicine, CCC

**1.0 PURPOSE**

1.1 The purpose of this report is to provide a first annual update to the Cambridgeshire Health and Wellbeing Board (HWB) on health protection in Cambridgeshire. Under the County Council Constitution, the Director of Public Health (DPH) has responsibility for preparing an annual health protection report to the Health and Wellbeing Board to cover a summary of relevant activity and the multi-agency health protection plans in place, establish how the various health protection responsibilities are discharged, and identify their relationship to the Joint Strategic Needs Assessment and Health and Wellbeing Strategy priorities.

**2.0 BACKGROUND**

2.1 The services that fall within Health Protection include :-

- Communicable disease and environmental hazards;
- Public health emergency planning
- Immunisation
- Screening
- Sexual health

2.2 Upon implementation of the Health and Social Care Act 2012, on 1 April 2013, the County Council, through the Director of Public Health (DPH), took on statutory responsibilities to advise on and promote local health protection plans across agencies, which complements the statutory responsibilities of Public Health England, NHS England, the Clinical Commissioning Group (CCG) and City and District Councils. Prior to that date, Cambridgeshire Primary Care Trust (PCT) had arrangements in place through various groups (both strategic and operational) to ensure these responsibilities were discharged and to allow for professional dialogue about new initiatives, local pressure points and so on.

2.3 The delivery of the health protection functions of the County Council must be publicly reported so that members can assure themselves that statutory

responsibilities are being fulfilled. Members of the public can also access this information for their own reassurance or research.

- 2.4 The HWB has statutory responsibilities and has developed a health and wellbeing strategy. Whilst much of this relates to health improvement, health protection is interwoven into the strategy's aims, particularly in relation to priority five.
- 2.5 It was agreed that the DPH would deliver an annual health protection report to the HWB to provide a summary of relevant activity. This report would cover the multi-agency health protection plans in place which establish how the various responsibilities are discharged.

### **3.0 KEY POINTS**

- 3.1 The Health Protection Officer Steering Group (HPSG) was established in April 2013, chaired by the DPH. The HPSG includes senior officer representation from the County Council, Public Health England, NHS England, the Clinical Commissioning Group (CCG) and a District Council Representative. It enables all agencies involved to share information and maintain an overview of health protection issues and priorities in the County, to demonstrate that their statutory responsibilities for health protection have been fulfilled and provide a means to seek assurance of this; and to have processes in place to address and escalate any issues that may arise.
- 3.2 An inter-agency Memorandum of Understanding (MOU) for Health Protection was agreed in April 2014, following discussion in the HPSG and consultation with partner organisations. The purpose of the MOU is to ensure that new agreements and protocols are in place that meets the needs of the organisations that are responsible for discharging health protection responsibilities after implementation of the Health and Social Care Act 2012.

Signatory organisations include:

- NHS England : East Anglia Area Team
  - Public Health England : Anglia & Essex Centre
  - Cambridgeshire & Peterborough Clinical Commissioning Group
  - Cambridgeshire County Council
  - District and City Councils (not all signatures yet received)
- 3.3 The Joint Communicable Disease Outbreak Management Plan constitutes a joint plan to manage an outbreak or significant incident of communicable disease/infection in Norfolk, Suffolk, Cambridgeshire and Peterborough. It

covers a range from a minor outbreak that will be managed within the PHE Health Protection Team to an outbreak which could lead to a major incident being declared that requires a full multi-agency response. The Plan, of which development was led by Public Health England with considerable input from the Cambridgeshire Public Health team and HPSG, provides a framework for partnership working across the new public health structures including the Public Health England Centre (PHEC) local health protection team (HPT), local authority public health directorates and local authority (LA) environmental health departments, Clinical Commissioning Groups (CCGs), NHS England (NHSE) and other relevant bodies. It has been adopted as a working draft for use across Cambridgeshire, Peterborough, Norfolk and Suffolk and the final version has now been circulated for comments before sign-off by all partner organisations.

- 3.4 Wider health system emergency planning is overseen through the Local Health Resilience Partnership (LHRP) which covers both Cambridgeshire and Peterborough, and includes the main NHS provider organisations and adult social care within its membership. The LHRP is co-chaired by the NHS England Area Team Director of Operations and the Cambridgeshire DPH.
- 3.5 The Health Protection annual report includes data on key preventative programmes such as immunisation and screening, that shows that Cambridgeshire could further improve uptake rates of some of these important interventions. Data is provided on communicable diseases reported in the county and on some communicable disease incidents that have occurred in the past year. Looking forward, the final section of the report includes future priorities for health protection – a number of new immunisation programmes and the national Collaborative Tuberculosis Strategy that has recently been consulted on.

#### **4.0 LINKS TO THE JOINT STRATEGIC NEEDS ASSESSMENT AND HEALTH AND WELLBEING STRATEGY**

- 4.1 The work outlined in the Health Protection Annual Report is focussed on maintaining the health and wellbeing of Cambridgeshire residents while working effectively and in new ways across the partner organisations involved. It therefore aligns closely with the aims of the wider Health and Wellbeing Strategy. HWB strategic priorities and focus areas supported by the work outlined in this report include:
- *Priority 1 – Ensure a positive start to life for children, young people and their families:* Work to support antenatal and neonatal screening and childhood immunisations.
  - *Priority 2 - Support older people to be independent safe and well:* Work to promote immunisation and other infectious diseases which can result in more serious illness for people with long term conditions, or age-related frailty, and to monitor and reduce healthcare acquired infections.
  - *Priority 3 – Encourage healthy lifestyles and behaviours in all actions and activities, while respecting people’s personal choices:* Preventive work to reduce the spread of infectious diseases.

- *Priority 6 – Work together effectively:* Work since April 2013 to put in place the Health Protection Officer Steering Group, Local Health Resilience Partnership, Health Protection Memorandum of Understanding, and Joint Communicable Disease Outbreak Management Plan. These are designed to ensure that relevant organisations, including those created in April 2013 through the Health and Social Care Act, work together efficiently and effectively at a local level on health protection and public health emergency planning and response.

## **5.0 RECOMMENDATION/DECISION REQUIRED**

The Health and Wellbeing Board is asked to receive the Cambridgeshire Health Protection Annual Report, and to comment on its content and its relevance to the wider Health and Wellbeing Strategy.