HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Health Protection Board
DATE:	20 th June 2023

SUBJECT: Health Protection Annual Assurance Report

1. PURPOSE

The purpose of this report is to provide the Health and Wellbeing Board with an update on health protection assurance arrangements in Blackburn with Darwen and health protection activities undertaken during 2022.

2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

The Health and Wellbeing Board members to:

- note the information within this report
- note that the report provides assurance that effective processes are in place to protect population health

3. BACKGROUND

Protecting the population's health is one of five mandated responsibilities given to local authorities as part of the Health and Social Care Act 2012. The Director of Public Health (DPH) for Blackburn with Darwen is responsible under legislation for the discharge of the local authority's public health functions.

The health protection element of these responsibilities is outlined below:

- The Secretary of State's public health protection functions
- Exercising the authority's functions in planning for, and responding to emergencies that present a risk to public health
- Other such public health function as the Secretary of State specifies in regulations
- Responsibility for the local authority's public health response as a responsible authority under the Licensing Act 2003, such as making representations on licensing applications
- A duty to ensure plans are in place to protection the population including through screening and immunisation

Health Protection is a key aspect of Public Health and Prevention aimed at protecting the public from harm. Health protection consists of three main broad areas: control of infectious diseases and screening; emergency preparedness, resilience and response (EPRR); and providing an environment that promotes health and wellbeing. In practice, it involves a range of activities across several partner agencies. It includes work to ensure the safety and quality of food, water, air and the natural and built environment. It covers the measures needed to prevent the spread of infectious diseases, preparing for and managing outbreaks and other incidents which threaten health. It includes immunisation to prevent diseases from developing and screening programmes to detect diseases early enough for better treatment outcomes.

Within Blackburn with Darwen, the remit for local authority's health protection duty is delivered by Public Health in conjunction with Public Protection and Civil Contingencies teams.

UK Health Security Agency's (UKHSA) health protection functions include protecting the public from infectious diseases, chemicals, radiation and environmental hazards and supporting emergency preparedness, resilience and response.

NHS England (NHSE) is responsible for commissioning and quality assuring population screening and immunisation programmes. The regional NHSE team covers Cheshire & Merseyside and Lancashire & South Cumbria.

4. RATIONALE

New health protection assurance arrangements were established in August 2020. The Blackburn with Darwen Health Protection Board is chaired by the Director of Public Health (DPH) and aims to enable the DPH to fulfil the statutory role in assuring the Council and the Health and Wellbeing Board that satisfactory arrangements are in place to protect the health of the local population.

The Health Protection Board is now well established, with regular attendance from key partners including; UK Health Security Agency, Primary Care, Infection Prevention and Control service, Lancashire and South Cumbria Integrated Care Board, local VCFS members (revised Terms of Reference for the Board which includes the Board's membership can be found in *Appendix 1*).

5. KEY ISSUES

The Health Protection highlight report has been attached as an appendix (*Appendix 2*) to this report. The report summarises the achievements against the key health protection priorities.

The Board has also overseen and delivered several wider health protection activities, including:

- Covid vaccinations and booster programmes, supporting the uptake of vaccinations in the borough and increasing engagement activities to increase uptake in the borough which was supported by the community champions' programme.
- Climate and Health needs assessment which has supported the Climate Emergency action plan.
- Regular updates on food borne infections in the borough as part of the quarterly IPC update
- Actions to reduce winter pressures on Council and partner services, including seasonal flu
- Discussion on local actions to reduce damp housing conditions in the borough

Priorities for the coming year include:

- Support increased uptake of the flu vaccination across all priority cohorts
- Continue to provide an enhanced Infection Prevention and Control support offer to complex settings in the borough
- Ensuring equitable coverage and uptake of screening and immunisations programmes
- Development of a sexual health strategy for Blackburn with Darwen

There is a range of on-going work across partners to protect the health of the local population and much progress has been made during 2022 to address key issues and deliver on action plans. Whilst challenges remain, the local Health Protection Board is well established and provides an effective mechanism for bringing partners together to work on health protection issues, share and review action plans, and provide challenge and support.

6. POLICY IMPLICATIONS

There are no direct policy implications arising from this report.

7. FINANCIAL IMPLICATIONS

Local Authority Public Health's health protection duties are financed by the annual public health grant.

8. LEGAL IMPLICATIONS

Protecting the population's health is one of five mandated responsibilities given to local authorities as part of the Health and Social Care Act 2012 and for this Council is reinforced by the terms of reference to the Health and Wellbeing Board in Section 11 of its Constitution. The Director of Public Health (DPH) for Blackburn with Darwen is responsible under legislation for the discharge of the local authority's public health functions.

9. RESOURCE IMPLICATIONS

Local Authority Public Health health protection duties are financed by the annual public health grant. Public Health commission the Lancashire Infection Prevention Control Team to provide IPC services in Blackburn with Darwen.

10. EQUALITY AND HEALTH IMPLICATIONS

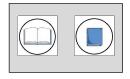
There are no implications in relation to the Public Sector Equality Duty in relation to this report.

Health Protection activities should consider existing health inequalities and work to mitigate them as vulnerable populations are at greater risk of health protection hazards. This can be due to environmental or behavioural risk factors and there may also be specific prevention needs which may not be met.

11. CONSULTATIONS

There is no requirement for consultation in relation to this report.

VERSION:	1.0
CONTACT OFFICER:	Laura Wharton, Consultant in Public Health
	Rabiya Gangreker, Public Health Development Manager
DATE:	11 th May 2023
BACKGROUND	None
PAPER:	



APPENDIX 1

Blackburn with Darwen Health Protection Board

Terms of Reference

Purpose:

To enable the Director of Public Health as part of their statutory responsibilities, to provide assurance to Blackburn with Darwen Borough Council and Health and Wellbeing Board, on behalf of the population of Blackburn with Darwen, that there are safe and effective arrangements and plans in place to protect the health of the population, across the life-course (Start Well, Live Well, Age Well).

To provide strategic leadership, governance and assurance for Blackburn with Darwen's Covid-19 Local Outbreak Management Plan, and to ensure local Elected Members have oversight of, and engagement in, delivery of the Plan.

To promote integration and partnership working on health protection between the Local Authority, NHS, UK Health Security Agency, NHS Trusts and other key local stakeholders and services.

The scope of matters to be considered by the Health Protection Board will include, but are not limited to;

- Covid-19
- Prevention and control of infectious diseases and infection, prevention and control (IPC)
- Population adult and children vaccination programmes
- Population screening programmes
- Healthcare associated infections (HCAIs)
- Tuberculosis (TB)
- Threats or risks to the health of our population within the 3 domains of Health Protection:
 - a. communicable disease control, including outbreak management;
 - **b.** environmental public health;
 - c. health emergency preparedness, resilience and response

Functions:

- 1. To provide strategic oversight of the health protection system in Blackburn with Darwen, and assure the Health and Wellbeing Board that there are safe and effective health protection arrangements and plans in place for the Borough, across the life-course.
- **2.** To continue to provide leadership, coordination and engagement for the local response to Covid-19.
- **3.** To provide a forum for professional discussion by local partners of health protection plans, risks and their mitigation and opportunities for joint action.
- **4.** To provide a forum for local partners to give formal assurance that effective health protection arrangements and plans are in place within their own organisation.
- **5.** To provide oversight of key health protection intelligence, including outcomes and information derived from incidents, complaints and investigations and surveillance of infectious diseases.
- **6.** To highlight risks and provide recommendations about the strategic management of these risks.

- 7. To share and escalate concerns and risks to commissioners and appropriate bodies when health protection plans and arrangements are inadequate to provide sufficient protection or public safety. The appropriate escalation route will depend on the concern or risk, e.g. Health and Wellbeing Board, Local Resilience Forum, Senior Management team of Blackburn with Darwen Borough Council, Lancashire and South Cumbria ICB, NHS England.
- **8.** To review the reports of significant incidents and outbreaks, consider recommendations for change as a result, and promote quality improvement of the health protection system through encouraging implementation of recommendations.
- **9.** To promote the reduction of inequalities in health protection across the Borough.
- **10.** To identify key health protection needs for collaborative work to feed into the Joint Strategic Needs Assessment process.

Proposed Governance Arrangements:

It is proposed that the Health Protection Board will report to Health and Wellbeing Board through the Director of Public Health. Where there is a need to escalate concerns/risks, this will be done through the Health and Wellbeing Board and relevant organisational arrangements i.e. Council, Lancashire and South Cumbria ICB, NHS England, as appropriate.

Chair and Membership:

The Director of Public Health will chair the group.

Core membership of the Health Protection Board is listed in Appendix A of these Terms of Reference. Additional members can be co-opted as and when required.

Administration of Meetings: Capacity will be identified within the Council to take minutes and distribute papers.

Frequency of meetings: The group will meet on a bi-monthly basis. The schedule of meetings will be agreed annually. In addition, extraordinary meetings may be called as and when needed.

Quorum: Representation from a range of organisations is needed in order to provide adequate assurance, and therefore for the meeting to go proceed. A decision to hold each meeting will be made based on the number of apologies received. Members will be notified, and an update report will be expected from those members unable to attend.

Communication of Health Protection Board recommendations: All members of the group will assume responsibility for communicating group recommendations to appropriate colleagues following each meeting.

Confidentiality: Members will maintain the level of confidentiality of items that are noted during the meetings.

Reporting framework: The group will report to the Health & Wellbeing Board bi-annually, or by exception. The Health Protection report will describe achievements and challenges across the system and set out the key areas of work for all aspects of health protection.

Agenda: The following will be standing agenda items, which will be reviewed regularly

- Situational updates (DPH)
- Vaccination update (Lancashire and South Cumbria ICB)
- UKHSA Health Protection update (UKHSA representative)
- Infection Prevention and Control update (IPC Lead Nurse)

Review: Terms of reference will be reviewed on an annual basis.

APPENDIX A: CORE MEMBERSHIP OF THE BLACKBURN WITH DAREN HEALTH PROTECTION BOARD

Core membership of the Health Protection Board will be as listed below

Title	Organisation	Name		
Director of Public Health (Chair)	Blackburn with Darwen Borough Council (BwD BC)	Abdul Razaq		
Consultant in Public Health (Vice Chair)	BwD BC	Laura Wharton		
Public Health Development Manager,	BwD BC	Rabiya Gangreker		
Health Protection				
Consultant in Communicable Disease	UK Health Security Agency (UKHSA)	Samihah Moazam		
Control/Health Protection				
Chief Pharmacist	ELHT	Andrew White		
Lancashire and South Cumbria ICB	Lancashire and South Cumbria	Lisa Rogan		
Representative	Integrated Care Board			
Programme Operational Lead	Lancashire and South Cumbria	Jamie Sweet		
Lead Nurse Infection Prevention Control	Integrated Care Board Lancashire and South Cumbria	Vanessa Morris		
Lead Nurse infection Prevention Control	Integrated Care Board	vanessa Morris		
Primary Care Representative	TBC	Mohammed Umer		
		Qashuf Hussain		
Public Protection/Environmental Health	BwD BC	Denise Andrews		
Resilience and Emergency Planning	BwD BC	Jenna Russett-Knott		
Manager				
Lead Infection Prevention and Control	Lancashire County Council (also	TBC		
Nurse	covers BwD settings)			
ELHT Representative	ELHT	Alison Whitehead		
LSCFT Representative	LSCFT	Amanda Miskell		
Voluntary, Community and Faith Sector Representative	Age UK	Vicky Shepherd		
Voluntary, Community and Faith Sector	Youth Action	Amar Abbas		
Representative -	Challes	5 6		
Voluntary, Community and Faith Sector Representative	Shelter	Emma Garner		
Leader	BwDBC	Phil Riley		
Elected Member Representative	Executive Member for Public Health	Damian Talbot		
Elected Member Representative	and Wellbeing	Dailliali Taibot		
Elected Member Representative	Executive Member for Children,	Julie Gunn		
Florid March on Day 2011 11	Young People and Education	Manatafa Dassi		
Elected Member Representative	Executive Member for Adult Services and Prevention	Mustafa Desai		
Communications and Engagement	BwD BC	Claire Tulloch		
Senior officer representative for Adult	BwDBC	Mark Warren		
Services & Prevention	BwDBC	Joanna Cidala		
Senior officer representative for Children's Services & Education	DWUBC	Joanne Siddle		
Ciliaren 3 Jervices & Euucation				

APPENDIX 2

Health Protection Highlight Report

2022

Update for: Health Protection Board Period covered January to December 2022

Work area	Priority objectives	Progress during this period	Planned activities for 2023
Outbreak	Manage outbreaks of	Ongoing support provided to care homes, educational settings and other complex	Continue to work with UK
support	communicable disease,	settings to manage COVID19 outbreaks. Support was provided by COVID19	Health Security Agency
	including respiratory & new	outbreak practitioners, Quality Assurance colleagues and LCC's IPC team via our	(UKHSA) to monitor risks
	and emerging infections	service level agreement ¹ .	and respond to outbreaks
			in local settings
Infection	Maintain and progress with	Care home audits	IPC Team will be offering
prevention &	an IPC audit programme of		IPC audits to all Council-run
control (IPC) in	settings	20 care home IPC audits took place during 2022, the priority was to audit all care	and maintained nurseries
high-		homes rated as requires improvement by CQC, which was achieved.	and will continue with the
risk/complex			rolling programme of care
settings		Care homes are responsible for completing and monitoring the action plans following audits.	home IPC audits.
		IPC audits were also conducted in:	
		1 x day centre for older adults	
		1 x forest nursery	
		Hand hygiene awareness sessions	
		The IPC team delivered 27 hand hygiene awareness sessions to BwD primary	
		schools during 2022.	
Flu	Increase uptake of flu vaccinations amongst all priority groups and manage	The seasonal flu group facilitated by public health held monthly meetings. The meetings were attended by internal colleagues from Children's and Adults Services, as well as NHS England, the School Nursing team, the IPC	Task and finish groups to meet prior to the start of the next flu season to
	outbreaks effectively	team, the CCG's IPC representative, local pharmacy representative and commissioned partners such as Care Network, Healthwatch BwD and AgeUK.	address learning shared at the regional flu evaluation.

¹ Since 2016, BwD has held a service level agreement with LCC's Infection Prevention Control service whereby they deliver the local authority infection prevention responsibilities on the Council's behalf. This is includes (but not limited to) all reactive work associated with managing and preventing outbreaks of infectious diseases, conducting IPC audits of our care settings including day centres, delivering hand hygiene sessions in primary schools and facilitating IPC forums which all care settings are able to attend.

Work area	Priority objectives	Progress during this period	Planned activities for 2023
		 Raised awareness of the importance of winter vaccinations, by pushing comms messages out via our partners. Colleagues from Children's Services supported Darwen PCN who went into nurseries to vaccinate 2 and 3 year olds. Supported engagement activity regarding vaccine hesitancy via our community champion, and we also deployed them to support the flu programme in educational settings and in the wider community. Darwen PCN carried out a pilot where staff went into nurseries not attached to schools and offered flu vaccinations to 2 and 3 year olds. 	Bwd Seasonal Flu group will meet during the 22/23 flu season to promote uptake and circulate comms messages as wide as possible.
		 During flu season 2021/22: There was an increased vaccine uptake in those aged 50+, but we did not meet the targets set. It should be noted that this was reflected across the ICS. Vaccine uptake among pregnant women was down across the ICS, and was lower than the previous year BwD CCG has a historically low flu vaccine uptake in 2 and 3 year olds. In 2020/21 BwD had the 4th lowest uptake nationally. In 2021/22, the uptake reduced across the ICS. 41.2% of primary school aged children and 18.8% of secondary school aged children in BwD received a flu vaccination We also saw a low uptake of the flu vaccine in our at-risk cohorts under the age of 49 	
Healthcare Acquired Infections (HCAI) & Anti-Microbial Resistance (AMR)	Provide support to prevent and reduce risks associated with HCAI and AMR	The service level agreement with LCC's Infection Prevention and Control team ensures that the authority fulfils its duties in this capacity. The IPC team deliver regular forums. The forums are held across Lancashire. During 2022, 3 IPC forums were held in BwD. Urinary Tract Infections - 09/11/22 Cleaning standards - 10/08/22 Fundamentals of IPC - 16/11/22 They also delivered a Quality Improvement course (4 sessions) with attendees from BwD. In terms of the reported HCAIs, in 2022, in BwD there were:	To continue to deliver regular IPC forums and promote attendance. To continue to work in collaboration with the Integrated Care Board to reduce risk and prevent HCAIs.

Work area	Priority objectives	Progress during this period					Planned activities for 2023			
			Q4	Q1	Q2	Q3	Total	Trigger		
		MRSA	0	1	1	0	2	0		
		CDI	6	13	5	11	35	35		
		MSSA	10	14	6	14	44	N/A		
		E.coli	25	30	27	23	105	114		
		Klebsiella	12	9	4	4	29	36		
		Pseudomonas Aeruginosa	0	0	6	0	6	4		
Immunisations	Increase uptake and reduce inequalities in uptake across all immunisation programmes	Psedomonsas Aeruginosa. IPC col reviews to share lessons learned a reduce the risk of these infections. HCAI monthly meetings continue and hospital trusts, to discuss ong prevent and reduce infections. UKHSA data shows that, although uptake has been slowly decreasin indicates that BwD has significant immunisations. School aged immunisations are contheir local delivery partner Intraheal alongside Intrahealth to deliver keepsteeps.	Across the ICS, we have seen breaches of the thresholds for MRSA and Psedomonsas Aeruginosa. IPC colleagues continue to support the post-infection reviews to share lessons learned and to raise awareness of how to prevent and reduce the risk of these infections in our care settings. HCAI monthly meetings continue with IPC colleagues and ICB IPC, pharmacy reps and hospital trusts, to discuss ongoing infections and share lessons learned to prevent and reduce infections. UKHSA data shows that, although coverage remains high, children's vaccine uptake has been slowly decreasing since 2012-13 nationally. Locally, data indicates that BwD has significantly worse uptake for several childhood				Continue to work collaboratively with local and regional partners (including NHSE, the ICB and GPs) to support the increase in immunisation uptake across the borough.			

During 2022, the Board also considered:

- Covid vaccinations and booster programmes, supporting the uptake of vaccinations in the borough and increasing engagement activities to increase uptake in the borough which was supported by the community champions' programme.
- Climate and Health needs assessment which has supported the Climate Emergency action plan.
- Regular updates on food borne infections in the borough as part of the quarterly IPC update
- Actions to reduce winter pressures on Council and partner services
- Discussion on local actions to reduce damp housing conditions in the borough