Health and Wellbeing Board

20 September 2022

Health Protection Annual Report

For Assurance

1. Purpose

To provide the Health and Wellbeing Board with oversight of the work to protect the health of the population from infectious diseases, screening for cancers, monitor vaccination programmes, and respond to health emergencies.

This annual report details the situation with respect to key health protection issues, and the work being done to address them. This report covers the period from 1st April 2021 to 31st March 2022.

2. Recommendations

- 2.1 That the Health and Wellbeing Board note the annual report for health protection for 2021/22.
- 2.2. That the Board consider, as part of future business, any opportunities for collaboration on joint issues.

3. Report detail

- 3.1 The health protection work programme aims to ensure that every person, irrespective of their circumstances, is protected from infectious and non-infectious environmental health hazards and, where such hazards occur, to minimise their continued impact on the public's health.
- 3.2 This is done by preventing exposure to such hazards, taking timely actions to respond to threats and acting collectively to ensure the best use of human and financial resources
- 3.3 The annual health protection assurance report April 21 March 22 provides an overview of the status of health protection priorities and key achievements of 2021/22 for the following areas:
 - TB
 - Immunisation

- Population screening programmes
- Sexually transmitted infections
- Antimicrobial resistance
- Infection control programmes
- Health emergency Planning
- 3.4 The management and control of the ongoing COVID pandemic has been the overriding priority in 2021/22. This has meant that work on the prevention and control of other infectious hazards has been deprioritised in 2021/22. This report was due in January 2022, however during this period all resources were focused on managing the Covid-19 Local Outbreak Management Plan. The pandemic impacted on both the availability of the data needed to complete the report and, on capacity to produce the report.
- 3.5 Restrictions on population movement in 2021/22 have also impacted on the circulation of various infectious organisms in the community and disrupted typical patterns of infectious diseases seen in the community.
- 3.6 Some of the key health protection challenges during 2021/22 are as follows:
 - Childhood immunisation uptake rates have declined over 2021/22 due the pandemic.
 - Sexually transmitted infections: Rates of genital warts were significantly higher than the regional average (35 per 100,000) in Walsall (49 per 100,000). Rates of syphilis were also significantly higher than the regional average (6 per 100,000) in Walsall (10 per 100,000).
 - Tuberculosis (TB): Over the last 10 years, there has been a steady decline in the incidence rate (new cases per 100,000 population) but then a levelling off in more recent years at both the local and regional level. Walsall has higher rates of TB than the regional and national average
- 3.7 These are the health protection priorities that will be addressed in the coming year in our work plan:
 - Immunisations improve the uptake of all immunisations, particularly MMR, and reduce inequalities in the uptake of immunisations
 - Work as a local system to reduce Sexually Transmitted Infections, and delays in the diagnosis of HIV
 - TB reduce delays in the presentation and diagnosis of TB, and improve the management of complex cases of TB.
 - Infection Prevention and Control (IPC) strategic development to bring the many streams of work together as a system (HCAI/ AMR / Primary, community and secondary care)
 - Refresh pandemic preparedness plans for Walsall

- 3.8 Other areas of work will also be taken forward in 2022/23:
 - COVID-19 continue deliver the Local Outbreak Management Plan (LOMP) to prevent and contain COVID-19 including the vaccination programme.
 - Screening focus on inequalities, and work to catch-up with the programme delayed by the pandemic
 - Continue to carry out food safety inspections to support prevention of foodborne illness and work to catch up with the programme delayed by the pandemic
 - Air Quality- continue work to meet the latest air quality standards and address the inequalities experienced in air quality
 - Redesign sexual health services and improve access to sexual health services

4. Implications for Joint Working arrangements:

- 4.1 Making it Happen, Leadership, Partnership & Resources
- 4.2 To address health protection challenges across Walsall, it is vital to work as part of a wider strategic system, which takes into account the social and other determinants of mental wellbeing.
- 4.3 The Health Protection Forum provides strategic leadership and is accountable to the HWBB for delivering the Health Protection Strategy and work plan
- 4.4 The key partner organisations responsible for delivering health protection are the UKHSA, NHS England, the Black Country ICS, Walsall Healthcare Trust and Walsall Council PH.
- 4.5 A Memorandum of Understanding is being developed to define roles and responsibilities of these key organisations in the event of a health protection incident or outbreak.

5. Health and Wellbeing Priorities:

- 5.1 The work programme for Health Protection supports the following Council priority "people are supported to maintain and improve their health, wellbeing and quality of life".
- 5.2 The work programme for Health Protection supports the priorities of the Health and Wellbeing Strategy, specifically in relation to children and young people.
- 5.3 This work programme contributes to the reduction of health inequalities, particularly in the uptake of immunisation and screening, In addition, tuberculosis and sexually transmitted infections are more likely to impact vulnerable communities more severely.

Background papers

The overview detailed above relates to the Health Protection Annual Report for 2021/22 which is attached.

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