Walsall Health Protection Annual Report

2022-23







Table of Contents

Acknowledgements	3
Foreword	3
Highlights of 2022 – 2023	3
Walsall Council Public Health: Health Protection Team	4
Ongoing impact and legacy of COVID -19	8
Infection prevention and control in the community	9
Antimicrobial Resistance and Stewardship AMR / AMS	12
Walsall Healthcare Trust - Infection Prevention and control	14
Immunisation	16
Tuberculosis and latent Tuberculosis screening	19
Emergency planning and response	20
Sexually Transmitted Infections, STIs	21
Population Screening Programmes	24
Environmental Health	27
Drugs and alcohol	29
Avian Influenza	31
Air Quality	32
Oral Health and Fluoridation	33
Communications and Engagement	34
Glossary	36
Table of Figures	37
Table of Tables	38

Acknowledgements

A huge thank you to all members of the Walsall Health Protection Forum and programme leads, all of whom have continued to support both essential health protection delivery as well as supporting the Walsall community through COVID-19 response.

Foreword

The Walsall Health Protection Forum brings together partners from across the Borough to report on health protection planning and outcomes. The Forum continues to monitor emerging issues so that they can be addressed; ensuring the health of Walsall residents continues to be protected.

This annual report details the functions and activities of Walsall's Health Protection Forum and wider support system. It aims to display the splendid work that is ongoing in the borough, and to provide assurance to the Health and Wellbeing Board that the health of Walsall residents is being protected. The report presents the current situation and analysis of health protection issues in Walsall during 2022/23 and identifies future actions.

The report provides an overview of the Health Protection priorities focusing on protecting the residents of Walsall including infectious diseases, environmental hazards, and other threats to health.

I am incredibly proud of the collaboration of the health protection system and local communities in protecting the health and wellbeing of the citizens of Walsall.

Highlights of 2022 – 2023

- Continuing to support the management of health protection risks in Walsall, including Streptococcal Infections, mpox, flu, COVID etc.
- Improvement in the management of complex cases of TB in Walsall
- Review of sexual health services and Pre-Exposure Prophylaxis (PrEP) provision in Walsall
- Work undertaken to improve immunisation uptake in children, particularly MMR
- Refresh of outbreak management plans for Walsall.

Walsall Council Public Health: Health Protection Team

Overview

The Public Health, The Health Protection Team are part of the Adult Social Care Directorate within Walsall Council.

Their role contributes to the delivery of the outcomes within the health protection strategy. The service is led by Public Health Consultant (Health Protection) and their role is to ensure strong and robust Health Protection system leadership with effective outbreak management processes to monitor disease, prevent harm and protect the health of the population of Walsall.

The team works in close partnership with a range of key partners such as the UK Health Security Agency, Environmental Health, Emergency Planning, NHS screening, vaccination and immunisation teams and the NHS England public health commissioning team.

Key Achievements

- Provided Health Protection assurance and leadership to the wider system.
- Developed new surveillance and reporting systems and processes to review trends in data, and monitor outbreaks.
- Immunisations improved the uptake of all immunisations, particularly MMR, and reduced inequalities in the uptake of immunisations.
- 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).
- Worked as a local system to reduce Sexually Transmitted Infections, and delays in the diagnosis of HIV.

- Ensure a **cohesive**, **proactive** and **responsive** infection prevention and control system that is able to respond to incidents and outbreaks in the borough.
- Tackling Antibiotic Resistance by leading partnership action to improve the appropriate use of antibiotics.
- **Tackling Tuberculosis (TB)** by improving awareness to increase screening and treatment, and specifically to reduce inequalities in under-served populations.
- Ensure robust emergency preparedness, response and resilience by developing and testing plans for public health emergencies and incidents and ensuring these are in line with local NHS and partner plans.
- Air pollution and health to develop an Air Quality Strategy and Alliance.

Case summary

The health protection team routinely respond to outbreaks and incidents. Below are two case summaries of the work the team have been involved with.

Case 1

Scabies outbreak in hotel

Background

In January 2023, Walsall Council health protection team (HPT) received notification from the ICB that there was a Scabies outbreak in a Walsall hotel. The investigation by the HPT revealed over two hundred individuals were infected, who could infect others they come into close contact with.

This was an important public health issue as the hotel residents (asylum seekers who had recently entered England) required mass treatment. Many of the residents were particularly vulnerable to complications of scabies, including other bacterial infections or the impact on their wellbeing.

The approach

Walsall HPT visited the site in collaboration with BCICB to conduct a detailed infection control risk assessment. Following this visit, HPT took responsibility for outbreak management and coordinating the outbreak response, including developing a multiagency action plan. This included: a step-by-step deep cleaning guide and a day-by-day guide to environmental cleaning and laundry throughout the treatment process organised by BCICB.

Collaboration

A multi stakeholder approach ensured activities within the borough were joined up. Through the Incident Management Team (IMT), Scabies treatment, Diphtheria vaccination and prophylaxis, TB treatment for symptomatic individuals were delivered. The IMT also facilitated GP access for all residents of the migrant hotel.

The challenges

Challenges included a multi-language barrier as there were over four native languages of those residents who required treatment. The Refugee and Migrant Centre (RMC) were contacted to complete teaching sessions for residents on how to apply the medication and cleaning their surroundings. To overcome the challenge of migrants not being registered with a GP, the ICB pharmacy team secured mass treatment.

The outcome/feedback & impact

All residents received treatment and staff were able to follow the guides provided to ensure a complete mass environmental cleaning. The hotel has had a second outbreak which has been managed efficiently due to previous guides/ resources for outbreak management.

The incident highlighted the complex healthcare needs of this population, the lack of GP registration limited access to health care services and the need for collaborative working amongst various agencies and organisations.

Case 2

Streptococcal Infections

Introduction:

Streptococcus pyogenes, commonly referred to as Strep A, is a bacterium responsible for a range of infections, from mild throat infections to severe invasive diseases. In this case study, we will explore the role of the Walsall Health Protection Team in managing a Strep A outbreak and mitigating its potential impact on the community. We saw a surge in Strep A cases during winter (Dec 2022) in various schools, day-care centres, and nurseries.

The approach: Collaboration and Communication

The Walsall HPT have an on-call phone and email for head teachers, managers etc. They would call to inform us of cases and call in regard to infection prevention and control measures. The duty officer would answer these calls with Infection Prevention and Control (IPC) advice.

In addition, to curb the spread of Strep A, the health protection team launched extensive educational campaigns. They disseminated information to schools, parents, and the wider community about Strep A transmission, symptoms, preventive measures, and the importance of prompt treatment. This effort empowered individuals to recognise the signs of infection and take necessary precautions.

The Walsall Health Protection Team worked closely with local healthcare providers, schools, and relevant stakeholders to facilitate open lines of communication, ensure timely reporting of cases, exchange vital information, and ensure effective implementation of control measures.

Outcome/feedback

Head teachers were grateful for IPC advice and for the Strep A letter provided as it was able to put parents at ease.

Lessons learned

Proactive communication with head teachers and parents about winter illnesses provides reassurance, allays anxiety, and supports effective management.

Ongoing impact and legacy of COVID -19

COVID-19 response in 2022/2023

Over the past year, the Walsall Health protection team (HPT) has continued to provide bespoke COVID-19 IPC guidance and has responded to 1650 enquiries through our public health on call service. We have continued to support schools, the care sector, and communities at large.

The COVID-19 on-call team responded to outbreak management from the omicron variant in spring 2022 and updated care home providers and the education sector in changes of national guidance. The on-call system remains available for any inquiries regarding COVID-19 concerns and infection control advice.

The HPT facilitated the identification of seldom-heard communities during the COVID-19 immunisation programme and worked closely with the ICB in rolling out roving clinics and pop-up vaccination clinics. These clinics are currently ongoing and covering eligible cohorts for spring boosters.

Contribution to COVID-19 Vaccination Programme

Saddlers Centre

With almost 246,000 COVID-19 vaccinations delivered, Walsall's Saddlers Vaccination Centre closed on 30 August 2022. Read more on the **Vaccination centre's final day** on the Walsall Healthcare NHS Trusts website.

Outreach engagement



Different outreach models have been used to ensure communities have good access to the COVID-19 vaccine. The ICB and Walsall HPT set up the Vaccination bus in collaboration, delivering over 1263 vaccines between December 2022 – May 2023.

Central Health, Public Health and NHS colleagues worked collaboratively to deliver vaccines in accessible local settings such as local Mosques, community centres and supermarkets to offer the vaccine to target communities including homeless people, refugees and asylum seekers.

Infection prevention and control (IPC) in the community

Achievements in 2022/2023

Nursing and Residential Care Homes

In the previous year, 2021/2022, due to the COVID-19 pandemic, care homes had undergone self-audits. In the year 2022/2023, we have undertaken in-person IPC annual verification audit, service improvement and assurance visits to all sixty-one care homes on the database.

Audits

- The Walsall care home audit tool has been updated to reflect the newest Infection Prevention Society IPC standards and cleaning guidelines. This tool has been shared with our Black Country LA colleagues, so we have a systemwide IPC audit tool.
- The HPT have a risk rating system in place and share reports and RAG ratings with relevant multidisciplinary teams such as the quality in care team, The ICB and Walsall Healthcare Trust.
- Supportive unannounced IPC visits are being conducted in the care homes with prolonged outbreaks or referred IPC concerns reported by trusted stakeholders.
- The Care Home App is currently being developed for use for care homes to carry out self-audits and view results and reports of verified IPC audits in real time.

Training and development

Care home workbooks and resources have been delivered to all Nursing and Residential homes as
part of their ongoing IPC training. This includes quarterly IPC Link worker study sessions which have
been delivered quarterly including: standard precautions, outbreak management, winter illnesses,
heatwave and hydration management, catheter acquired urinary tract infections (CAUTI)/urinary tract
infections (UTI's), implementation of cleaning standards.

Outbreaks and Incident response

- The HPT continue to support Nursing and Residential homes with outbreak management through the on-call system.
- The team responded to nineteen outbreaks of seasonal flu in residential care settings over the winter season.

Care homes (Oct 2022 to May 2023)

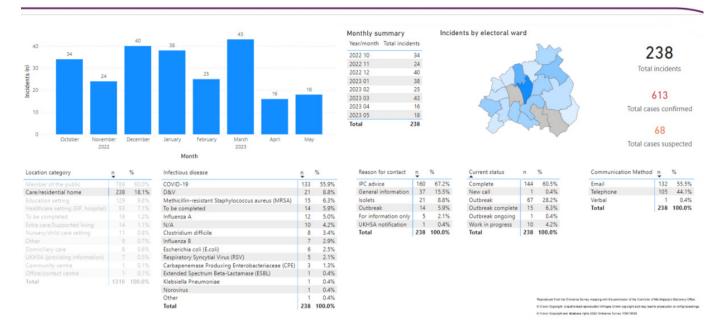


Figure 1. Incidents of infectious diseases in Care Homes

Domiciliary Care

- The IPC team continue to provide the domiciliary sector with IPC guidance through the provider meetings. Here we answer questions around COVID-19 guidance as well as any IPC questions and concerns.
- Domiciliary care providers are included in the IPC link worker training sessions delivered by the health protection teams.
- Bespoke IPC training materials are provided for the domiciliary care sector.

Education settings

The health protection team has built relationships with our education sector colleagues, head teachers and parents.

Bespoke infection control guidance and outbreak management measures have been offered to the schools through the on-call service.



Link worker training

Improving infection control practices in care homes through IPC link worker training

Background

Walsall council health protection team (HPT) provides technical support to sixty-two care homes across the Borough. The Walsall HPT aims to empower IPC link workers to increase their knowledge and awareness of standards of infection prevention and control, improve practice, share knowledge and skills gained, conduct risk assessment and prevent/manage outbreaks of infectious diseases in their respective care homes. Variation in infection prevention and control practices suggested that consideration be given to ensure that the settings are continuously supported to provide safe care.

The Approach

The team provides quarterly training sessions which cover a wide range of topics. Training needs are assessed frequently by the team, through concerns raised by our partners and other topics identified during the annual audits conducted by the team. Each setting is mandated to have at least one IPC link worker who attends the training sessions organised by the Walsall HPT.

During the pandemic, training sessions were held virtually in-person training resumed in the autumn of 2022.

Collaboration

The training sessions are jointly delivered with the Commissioning team, Quality in Care Team (QICT), and the ICB.

The Challenges

Only a third of the care home link workers attend the training sessions. This has been addressed with managers and it is emphasised as a part of the care home contract.

The Outcome/Feedback & Impact

- Improved confidence and greater understanding of standards of infection prevention and control and being able to challenge practice
- Useful sessions for link workers to network and share experience of IPC practice
- An improved care experience for residents (via feedback)
- Improved Infection prevention and control practice seen through audits
- Significant increase in the level of engagement and communication with link workers & care home managers
- Improved awareness and management of outbreaks

Lessons Learned/Tips For Future Plans

Link workers evaluate the training sessions, and we take on feedback to further improve the service.

Priorities for 2023/2024

- IPC quality improvement and assurance visits for 2023/2024 began on 10.03.2023 with intention to visit all care homes. Prioritisation has been based on the past year's RAG rating and priority is given to new care homes as well.
- Special schools to be visited this year as this was not completed in the previous year.
- To roll out the IPC audit app which will ensure efficiency of work for the team as well as the providers. Pilot is expected by September 2023.
- Continue the quarterly face-to-face link worker training sessions, there has been positive feedback and engagement.
- Domiciliary care audits will be rolled out this year.
- Following up on the AMR catheter work and survey conducted, to action the recommendations and get it embedded in practise by the care homes.
- HPT leads are assigned to particular localities and will have oversight of IPC practices in those localities.

Antimicrobial Resistance and Stewardship AMR / AMS

Overview

Antimicrobial resistance threatens the effective prevention and treatment of an ever-increasing range of infections caused by bacteria, parasites, viruses, and fungi. The government has an Antimicrobial Resistance Strategy and Antimicrobial Resistance is on the Department of Health and Social Care's risk register.

AMS within secondary care is addressed in the 2022/23 IPC annual report for Walsall Health Trust.

Walsall Place Medicines Optimisation team(within the Black Country ICB), are supporting all GP practices to reduce inappropriate prescribing of antibiotics, promote self-care and safety netting using TARGET resources with the aim of a reduction in the total volume of antibacterial items towards or below the NHSE target. Practices have identified an Antimicrobial Stewardship (AMS) Lead who is be responsible for driving change within the practice.

An AMS event was held to better understand the consequences of antimicrobial resistance, the role everyone has in contributing to and addressing AMR, how to use the TARGET toolkit to support prescribing, shorter duration of antibiotic treatment, and the use of delayed prescriptions.

Key Achievements in 2022/23

Anti-microbial stewardship: Improving Catheter Management in Residential and Nursing Homes in Walsall

Aim:

Reducing the need for antibiotics is crucial in addressing the global threat of antimicrobial resistance (AMR). Catheter-associated urinary tract infections (CAUTIs) are one of the most frequent device-related infections that, importantly, could be prevented and reduce the need for antibiotic use.

Urinary catheters are used extensively in care homes for a range of acute and chronic conditions. NHS guidelines clearly specify valid reasons for catheterisation, when other less invasive interventions have been exhausted.

To inform the development of Walsall's AMR and stewardship strategy, Public Health surveyed care homes to determine the understanding and implementation of these guidelines in care settings.

Methods:

Walsall Public Health designed a survey based on recommendations from the NHS and infection prevention society (IPS) pertaining to urinary catheter indications and care, and infection prevention and control guidelines, and to understand the quality of catheter care practices in care homes in Walsall. The survey was sent electronically to the managers of all 61 Care Quality Commission (CQC) care homes in Walsall between March and June 2022.

Results:

Our study found significant variation amongst care settings in the understanding of the valid reasons for catheterisation, training on catheter insertion, completion of appropriate documentation and access to equipment such as bladder scanners, which are essential to effective catheter insertion. The findings of this study have been used to formulate key priorities for local action including contract management, increasing access to resources, and training. We have also escalated the findings of the review to regional and national bodies.

Conclusion:

The recommendations of this audit have engendered contractual and operational changes locally, aimed at improving catheter management in care homes. This will reduce the incidence of infections requiring antibiotic treatment, and therefore is a key contribution to the local anti-microbial resistance and stewardship strategy.

Walsall Healthcare Trust - Infection Prevention and control

Overview

Infection prevention and control is a top priority for Walsall Healthcare NHS Trust. Keeping our patients safe from avoidable harm is everyone's responsibility. In this summary, we document we set out our programme for the year to keep our patients, staff and the public informed of our planned activity at Walsall Healthcare.

Each year the Infection Prevention & Control Team undertakes a review of the Trust's compliance with the Health & Social Care Act 2008 Code of Practice on the Prevention and Control of Infections (2022). The team's aim is to provide an infection prevention & control service that supports our clinical teams to deliver safe care.

Health Care Acquired Infections (HCAIs)

The table below details Walsall Healthcare Trusts' total number of reportable HCAIs, to UKHSA. The threshold for MRSA is always set at zero and at present MSSA does not have a threshold set by NHSE (2022-2023).

Key:

HOHA Hospital Onset Hospital Acquired

COHA Community Onset Hospital Acquired

COCA Community Onset Community Acquired

Table 1. Walsall Healthcare Trusts' total number of reportable HCAIs

Organism	НОНА	СОНА	COCA
C. difficile	41	16	23
MRSA	1	0	1
E. coli	31	28	101
Pseudomonas aeruginosa	2	4	10
Klebsiella	9	8	
MSSA			34

Key Achievements

The Trust has achieved the planned infection prevention and control activities outlined in the annual programme 2022/23 including planned audits, education sessions and undertook additional duties to support the Trust in response to the COVID-19 pandemic and other outbreaks.

- The Trust experienced one case of MRSA bacteraemia during 2022-23 against a target of zero.
- Mandatory surgical site surveillance was completed in elective orthopaedic hip and knee replacements for one quarter; no infections were identified.
- During 2022/23 the COVID-19 pandemic continued to challenge the IPC team and Trust wide services, posing additional demand in the prevention and control of infection within healthcare premises.
- Compared to 2021/22 endemic organism rates increased such as Norovirus, Influenza A and B, outbreaks and closures due to these impacted Trust wide services.
- The Trust is currently rated Green by NHS England and Improvement for Infection Prevention and Control. The Trust received very positive feedback for progress in standards of IPC which granted the green score from previous amber in 2021/2022.



Figure 2. Key priorities for WHT IPC

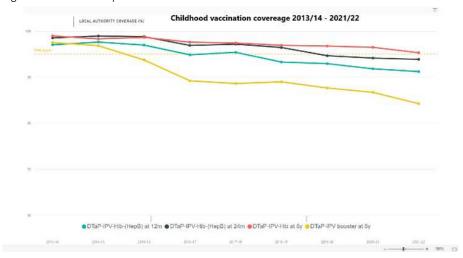
Immunisation

Overview

Childhood Immunisations

Vaccines are the most effective way to prevent infectious diseases and protect children and adults against ill health. Fig.1 shows a general decline in uptake of Diphtheria, Tetanus, Pertussis Vaccine (Dtap), Inactivated poliovirus vaccine (IPV), and Haemophilus influenzae type b (Hib) over the past decade.

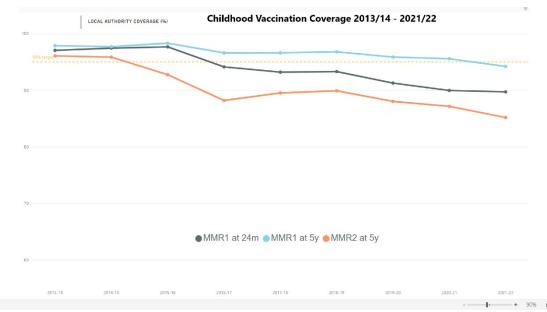
Figure 3. Trend in Dtap/IPV/Hib Vaccinations in Children in Walsall.



MMR

A similar trend of decline observed in the uptake of MMR vaccines that predates the pandemic and has not recovered post pandemic.

Figure 4. Trend in MMR Vaccination Uptake in Children in Walsall



Seasonal Influenza

During the influenza season, there was good uptake of the flu vaccine in the over sixty-fives and low uptake in pregnant women and under threes.

Figure 5. Summary of Flu vaccination in Target Groups in Walsall

	%Vaccine Uptake (2022/23 Season)				
	Over 65s Under 65 at clinical risk All Pregnant Women All 2 year olds All 3 year		All 3 year olds		
Walsall	75.6	43.2	28.6	33.5	38.5
England	79.4	48.6	34.7	41.7	44.5

School based Immunisations

Flu

The chart below shows reduced uptake of the flu vaccine in years 7 through 9 when compared with earlier years.

Figure 6. School Age Flu Vaccine Uptake

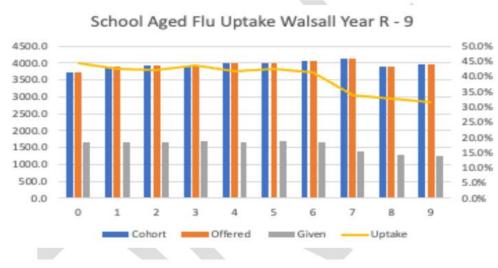
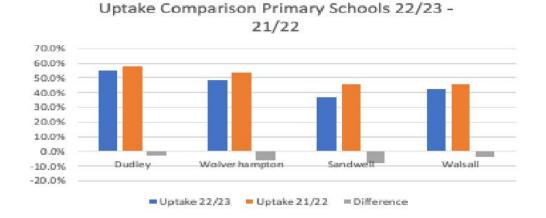
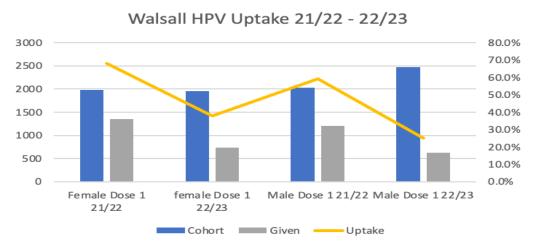


Figure 7. Comparison 21-22 and 22-23 Primary School Flu Vaccine Uptake.



HPV

Figure 8. HPV Vaccine Uptake.



Key Achievements

 The Walsall HPT is working with the Black Country ICB to develop an Immunisations framework and strategy to address health inequalities in immunisation uptake and improve overall immunisation uptake rates across the region.

- Increase seasonal influenza and COVID-19 booster vaccine uptake in clinical risk groups and those who support them, including health and social care workers and carers.
- Increase vaccine uptake in pregnant women and clinical risk groups, as well as school-based immunisation uptake.
- Optimise uptake of MMR vaccination in areas of deprivation and under-represented groups including the traveller community and looked after children.
- Work with NHS partners and Primary Care Networks (PCNs) to identify good practice and opportunities to improve patient access. Support individual practices to focus on increasing year-onyear uptake and recognise this achievement.

Tuberculosis and latent Tuberculosis screening

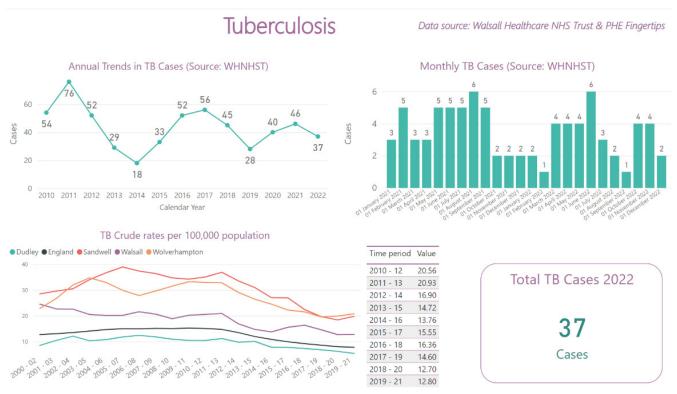
Overview

Tuberculosis (TB) is a bacterial infection spread through inhaling tiny droplets from the sneezes or coughs of an infected person. It mainly affects the lungs, but it can affect other parts of the body. For most people, the body's immune system kills the bacteria and there are no symptoms.

In some cases, the immune system cannot kill the bacteria but manages to prevent it spreading. The bacteria will remain; this is known as latent TB infection (LTBI). People with latent TB are not infectious to others. Treatment of latent TB is important to prevent it becoming an active infection that can spread to other people. If latent TB does become active, it can be treated with a course of antibiotics.

Latent TB screening is currently not taking place due to a lack of staff capacity in the NHS, which poses a significant risk to TB control efforts.

Figure 9. The incidence of Tuberculosis in Walsall



- In 2022 there were a total of thirty-seven active cases of TB in Walsall, ranging from 1-6 cases per month.
- There was a slight increase in the 3-year incidence rate in the latest period (2019-21), and the rate
 in Walsall is significantly higher than the national rate for England, but lower than our Black Country
 neighbours in Wolverhampton and Sandwell.

Key Achievements

- We have set up a Multidisciplinary Team (MDT) for complex cases of TB in Walsall
- We have developed a pathway for the management of people with dual diagnoses of substance misuse and TB

- Work to increase Latent TB screening rates. Latent TB screening has not been completed in Walsall since 2019 due to the limited capacity of the TB Team.
- Joint screening and treatment awareness raising alongside the Walsall Healthcare NHS Trust (WHT)
 TB team to coincide with World TB Day (24th March 2024).

Emergency planning and response

Overview

Walsall Council, through the Director of Public Health, has a statutory responsibility for the protection of the health of its population as outlined within the Health and Social Care Act 2012¹. This includes a duty to undertake emergency planning duties which include assessment, planning and advising in relation to emergencies or risks of emergencies outlined within Health Protection guidance:

"Unitary and upper tier local authorities have a new statutory duty to carry out certain aspects of the Secretary of State's duty to take steps to protect the health of the people from England from all hazards, ranging from relatively minor outbreaks and contaminations to full-scale emergencies, and to prevent as far as possible those threats arising in the first place."

The Health Protection Team within the Local Authority are Category 1 Responders and therefore are expected to have plans to manage outbreaks and incidents.

It is expected that all key health organisations work in partnership to ensure that there is an appropriate response to the swift identification, management and control of outbreaks and incidents. This is achieved through a Memorandum of Understanding between partner organisations.

Key Achievements

- A Winter Preparedness Exercise was carried out to test winter preparedness across the Walsall
 health economy. The scenario revolved around an outbreak of influenza-like symptoms in care
 homes and was based on our knowledge of both COVID-19 and Flu outbreaks in high-risk settings.
 The exercise report and action log were taken to the Health Protection Forum to provide assurance
 and governance around the completion of actions.
- Production of the Health Protection and Outbreak Management Plan which provides a co-ordinated framework to enable a Health Economy-wide response to ensure swift and efficient management of an incident or outbreak. The plan provides a set of guidelines and action cards which will ensure that outbreaks of communicable disease, or chemical incidents are effectively investigated, brought under control and legal evidence gathered. The plan also ensures that, where possible, measures are taken to prevent similar incidents in the future.

- Production of the Adverse Weather and Health Plan which will replace the existing Heatwave and Cold Weather plans. The plan is moving from incident response and moving to an ongoing programme of work that looks at long-term adaptation actions. The new impact-based alerts will provide information on the expected impact of weather conditions with the aim of protecting individuals and communities from the health effects of adverse weather and to build community resilience.
- Develop a comprehensive system-wide pandemic plan and work with partners within the health
 economy to ensure that we protect the public with an integrated local response plan that is resilient,
 proportionate, flexible and maintainable in responding to a pandemic incident. This will involve
 conducting a risk assessment to identify past and potential emergency scenarios and testing the
 plan with internal staff / external partners to ensure they are familiar with their role and can carry out
 assigned responsibilities.
- Conduct multi-agency stress-test / winter preparedness exercises to identify good practice, share new ideas and identify potential gaps or issues within the planned response.

Health and Social Care Act 2012 (legislation.gov.uk)

Sexually Transmitted Infections, STIs

Overview

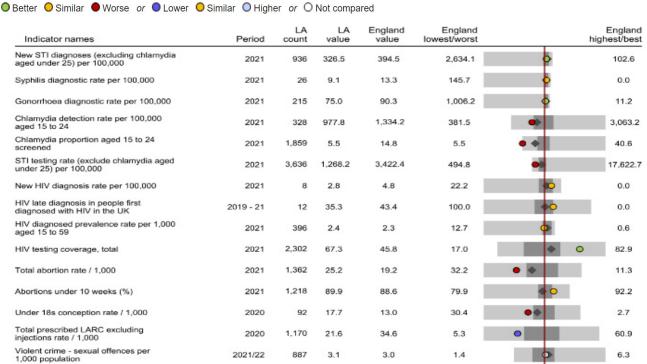
As a response to the COVID-19 pandemic, the Government implemented national and regional lockdowns and social and physical distancing measures. These measures affected sexual behaviour and health service provision, which is reflected in sexual and reproductive health indicator data. Interpreting data from 2020 onwards should consider these factors, especially when comparing with data from pre-pandemic years.

- Overall, the number of new sexually transmitted infections (STIs) diagnosed among residents of Walsall in 2021 was 1,266. The rate was 442 per 100,000 residents, lower than the rate of 551 per 100,000 in England, and similar to the average of 446 per 100,000 among its nearest neighbours.
- Walsall ranked 61st highest out of 150 upper tier local authorities (UTLAs) and unitary authorities (UAs) for new STI diagnoses excluding chlamydia in those aged under 25 in 2021, with a rate of 326 per 100,000 residents, better than the rate of 394 per 100,000 for England. However, testing rates do also affect this figure, and Walsall's testing rates are significantly lower than the national average.
- The chlamydia detection rate per 100,000 young people aged 15 to 24 years in Walsall was 978 in 2021, worse than the rate of 1,334 for England.
- The rank for gonorrhoea diagnoses (which can be used as an indicator of local burden of STIs in general) in Walsall was 55th highest (out of 150 UTLAs/UAs) in 2021. The rate per 100,000 was 75.0, better than the rate of 90.3 in England.
- Among specialist sexual health service (SHS) patients from Walsall who were eligible to be tested for HIV, the percentage tested in 2021 was 67.3%, better than the 45.8% in England.
- The number of new HIV diagnoses in Walsall was 8 in 2021. The prevalence of diagnosed HIV per 1,000 people aged 15 to 59 years in 2021 was 2.4, similar to the rate of 2.3 in England. The rank for HIV prevalence in Walsall was 50th highest (out of 150 UTLAs/UAs).
- In Walsall, in the three-year period between 2019 21, the percentage of HIV diagnoses made at a late stage of infection amongst those first diagnosed in the UK (all individuals with CD4 count ≤350 cells/ mm3 within 3 months of diagnosis) was 35.3%, similar to 43.4% in England.

Figure 10. Key sexual and reproductive health indicators in Walsall compared to the rest of England

The local result for each indicator is shown as a circle, against the range of results for England shown as a grey bar. The line at the centre of the chart shows the England average, the diamond shows the average for the West Midlands UKHSA Region.

Compared	to	Eng	land:
----------	----	-----	-------

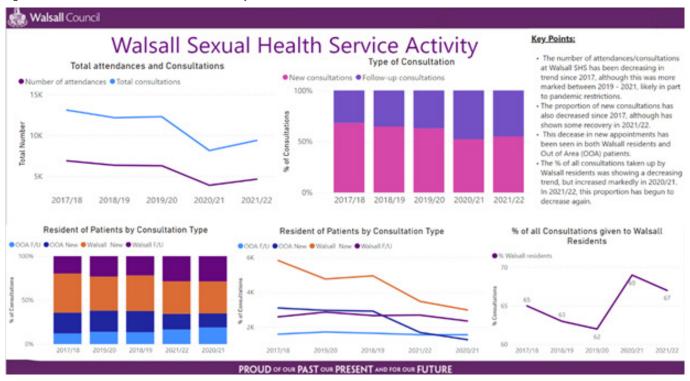


STI testing in sexual health services (SHS)

In 2021 the rate of STI testing (excluding chlamydia in under 25-year individuals) in SHS in Walsall was 1,268 per 100,000, a 15% increase compared to 2020. This is lower than the rate of 3,422 per 100,000 in England in 2021. The positivity rate in Walsall was 11.3% in 2021, higher than 6.1% in England. Positivity rates depend both on the number of diagnoses and the offer of testing: higher positivity rates compared with previous years can represent increased burden of infection, decreases in the number of tests, or both.

The methodology to calculate the STI positivity changed in September 2021 to better reflect testing within the population accessing SHS by area.

Figure 11. Walsall Sexual Health Service Activity



Burden and trend of new STIs

A total of 1,266 new STIs were diagnosed in residents of Walsall in 2021. It should be noted that if high rates of gonorrhoea and syphilis are observed in a population, this reflects high levels of risky sexual behaviour.

When interpreting trends, please note:

- The decrease in STI testing and diagnoses in 2020 due to the reconfiguration of sexual health services during the COVID-19 pandemic response, with testing rates largely recovering during 2021, but diagnoses overall remaining lower.
- Recent decreases in genital warts diagnoses are due to the protective effect of HPV vaccination, and are particularly evident in the younger age groups (25 and younger) who have been offered the vaccine since the national programme began

PrEP (pre-exposure prophylaxis)

• Between January 2021 to June 2022: a total of 174 individuals accessed Walsall Integrated Sexual Health services for the provision of PrEP. Of the total seventy-three were residents of Walsall and 101 out of area residents.

Mpox (monkeypox)

• There were 3,698 confirmed and highly probable cases in England, in the West Midlands there were 127 cases in total, of which less than 5 were residents of Walsall.

Key Achievements

- Audit of LARC services in primary care services. The findings of the audit underpin the development of a nurse practitioner workforce to increase access to LARC methods in primary care.
- An independent review into Walsall Public Health's current sexual and reproductive health
 commissioned services. The key finding access to services is limited for Walsall residents, as there
 is only one Sexual and Reproductive Health (SRH) clinic, opposite the Manor hospital and not easily
 accessible to all residents of Walsall.
- Identification of sites to increase accessibility and reduce inequalities in SRH within the borough of Walsall.
- The development of an SRH Alliance stakeholder group of representatives from all sectors within the borough. This group of associates will facilitate partnership working and develop integrated care pathways within services to reduce inequalities in sexual health/wellbeing in the population.
- Partnership work between Public Health and Walsall Integrated Sexual Health Service on the mpox vaccination roll-out for the eligible Walsall population. This included developing the process, governance and operational models and contributing to the operational framework and programme requirements.
- Systemwide work between Local Authority, NHS and UKHSA to implement and agree policies for engagement with communities and venues in the borough where the risk of STI transmission is higher, including on-sex premises.
- Audit of PrEP roll out in local integrated Sexual Health services.
- Two out of the four known sexual establishments were visited and audited last year, the other two are a priority this year.

- Identify reasons for increase in STIs in Walsall and implement a plan to address this increase
- Redesign of LARC delivery in primary care services
- Development of SRH sites within Walsall to address inequitable access to SRH services.
- PrEP audit implementation of recommendations
- Redesign of Integrated Sexual Health services, implementation of the findings of the independent review of the service provision.
- Continue to monitor mpox numbers, retaining the ability to stand up the vaccination programme if the risk of infection starts to rise significantly in the UK.

Population Screening Programmes

Overview

Figure 13 below shows the newborn and antenatal screening services are achieving national targets.

Figure 12. Newborn and Antenatal Screening Programmes

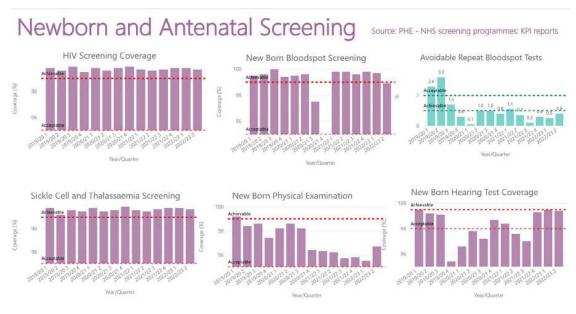


Figure 13. Performance of Adult Screening Programmes.

Non-Cancer Population Screening Programmes



Walsall specific data is currently not available for adult non-cancer screening programs.

- Across the Black country, Abdominal Aortic Aneurysm screening is below national targets and the England average for 2022-23.
- Diabetic Eye screening for Birmingham, Solihull and the Black country has declined during the pandemic and has not recovered to pre-pandemic levels. It remains well below national targets and the England average.

Figure 14. Prevalence of all cancers in Walsall by PCN.

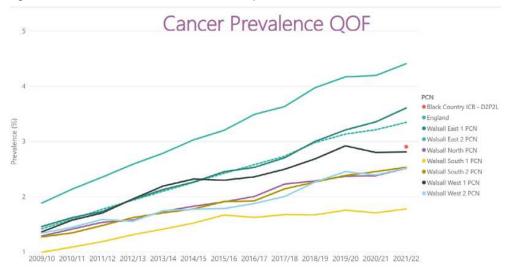


Figure 15. Uptake and Coverage of Breast Cancer Screening in Walsall PCNs.

Cancer Screening Programmes

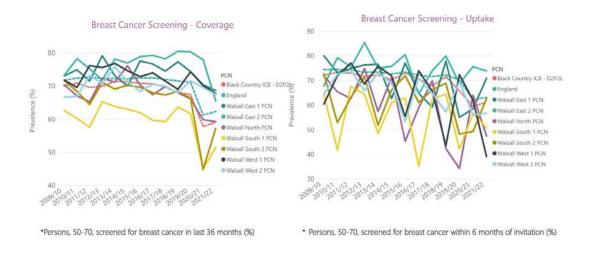


Figure 16. Uptake and Coverage of Cervical Cancer Screening in Walsall PCNs.

Cancer Screening Programmes

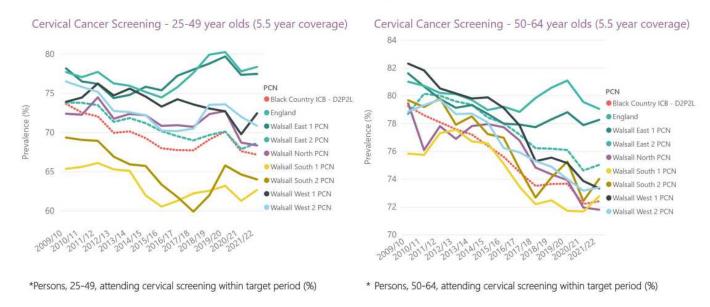
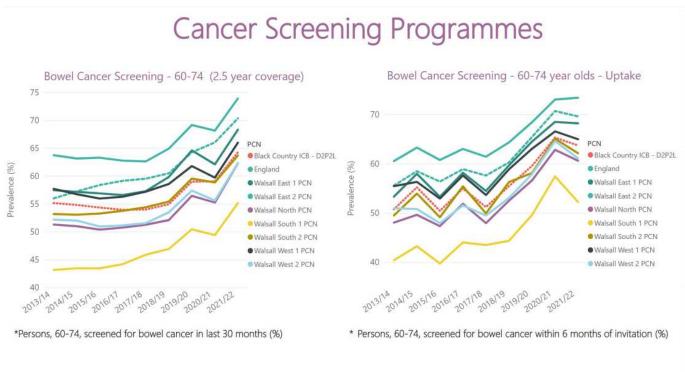


Figure 17. Uptake and Coverage of Bowel Cancer Screening in Walsall PCNs.



Key Priorities for 2023/2024

Addressing inequalities in the uptake of cancer screening in Walsall

Environmental Health

Key Achievements

- Responded to 159 complaints about unfit food.
- Responded to ninety-four complaints about the hygiene of food premises.
- Registered 301 new food businesses.
- Inspected 405 food businesses including rated and unrated businesses.
- Responded to 179 Infectious Disease notifications (Notifiable diseases; these are statutorily notified to the EH team by UK-Health Security Agency so that we can investigate the source and take action to prevent further spread).
- Targeted health and safety interventions undertaken at 229 businesses using national intelligence.
- Targeted health and safety interventions undertaken at 23 businesses using local intelligence.
- Responded to 127 notifications of accidents in the workplace (Accidents that result in >7-day absence from work is statutorily notified to the EH team for investigation).
- Registration of sixty-four businesses and persons carrying out specialist treatments (tattooing, ear
 and cosmetic piercing, semi-permanent skin colouring, electrolysis and acupuncture). In course of
 the registration process visits made for purposes of enhanced infection control, safe working practices, procedures and the suitability of the premises.

Figure 18. Health and Safety Activities of the Environmental Health Team

Health and Safety Activities 2022/23

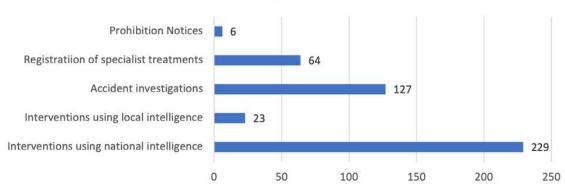
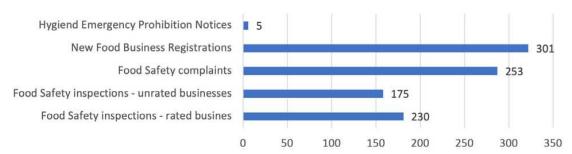


Figure 19. Food Safety Activities of the Environmental Health Team

Food Safety Activities 2022/23



Enforcement Actions

Action	Number	Description
Food Improvement Notices	3	Enforcement Notice
Emergency Prohibition Notices	5	Closure of food premises
Emergency Prohibition Orders	5	Court Order confirming closure of food premises
Simple Cautions	2	Formal caution as alternative to prosecution
Prosecutions	2	Conviction secured in Court
Health and Safety Prohibition Notice	6	Issued where serious risk to health and safety

In July 2022, the health and safety team were notified of a major lead exposure (poisoning), associated with an indoor firing range, involving over sixty persons, several of whom were hospitalised. Consequently, the team instigated a complex criminal investigation, which is still ongoing. Resources were also dedicated to securing the safe reopening of the site following the incident.

During 2022/23, the team worked towards meeting the Food Standard Agency's Recovery Plan, which prescribed a post-Covid inspection and intervention regime. The service met Recovery Plan deadlines regarding the inspection of all businesses rated A, B, C (less than broadly compliant), D (less than broadly compliant) and delivered a prioritised programme for the inspection of unrated businesses. The Recovery Plan also required the implementation of a programme to inspection of businesses rated C (broadly compliant) by the end of March 2023, which was not achieved.

The Team visited all sandwich manufacturers in the borough in 2022/23. Sandwiches are a high-risk foodstuff and have been associated with Listeria food poisoning outbreaks. Officers carried out inspections and focussed heavily on temperature control, stock rotation and 'use-by' dates. The team linked with the UK Health Security Agency to conduct microbiological testing of a range of sandwiches from each manufacturer. This was a useful awareness raising exercise and, fortunately, test results were satisfactory.

Walsall Council implemented the Food Hygiene Rating Scheme in 2011. The proportion of businesses ranked Broadly Compliant (scoring 3, 4 or 5) has generally increased year upon year. At the beginning of April 2023, 2130, businesses were recorded on the FHRS, 1655 were rated with the other 475 being classified as either exempt, excluded, sensitive or awaiting an inspection. Currently, 95.4% of rated Walsall Businesses are Broadly Compliant with 4.6% requiring varying levels of improvement. In 2013, only 75.2% of rated businesses were ranked Broadly Compliant.

Working jointly with the Police and a Vietnamese interpreter, Officers visited nail bars in Walsall. During the visits, Officers conducted health and safety inspections and provided guidance. The Police focused on the themes of modern slavery and human trafficking within the beauty industry. Environmental Health and the Police both identified matters which required further action.

In advance of the Commonwealth Games, Officers participated in a project involving Walsall hotels to raise awareness of significant risks that should be controlled including water management, window restrictors, asbestos management and fire safety.

Officers contacted licenced premises and sport venues in Walsall to advise them and provided guidance about health and safety arrangements required to hold bonfire and fireworks events.

Key priorities 2023/24

- Realign inspections with the Food Law Code of Practice (the Code) and to 'catch up' on backlogs of lower risk premises created by the pandemic
- Respond to complaints relating to hygiene or condition of food premises.
- Respond to requests for advice/enquiries.
- Maintain Food Hygiene Rating system
- Carry out a reactive microbiological food-sampling programme focusing on high-risk premises and manufacturers where failures or issues identified.
- Respond to all disease notifications using timescales developed by UK-Health Security Agency
- Identify and carry out appropriate interventions at high-risk premises in relation to health and safety.
- Respond to accident notifications.
- Raise awareness within commercial catering premises (enforcement where necessary) in relation to gas safety.
- Raise awareness within the hospitality sector (enforcement where necessary) in relation to electrical safety.

Drugs and alcohol

Overview

Figure 20. Walsall Drugs and Alcohol Service Activity.



Figure 21. Blood Borne Virus Screening and Vaccination Offer and Uptake in Walsall Drug and Alcohol Service.

Drugs and Alcohol - Blood Borne Virus Screening and Immunisation Hep B Screening Offer (new presentations) Hep C Screening Offer (new presentations) Jumber of eligible servic. 60 Year and Quarter Outcome of Hep Vaccine Offer (new presentations) Outcome of Hep C Screening Offer (new presentations) Accepted Hep C Test Opted out of Hep C Screening RO Quarter Hep C Number of service users Positive Tested Data source: The Beacon (CGL) Year and Quarter Year and Quarter

Key Achievements

The alcohol and drug treatment service provided by Change Grow Live have expanded their service over the course of 2022/23 through additional national OHID grant funding, with a target of increasing numbers of adults and young people in treatment by 20% over 3 years (2022/3 to 2024/5). Whilst numbers in treatment have been reducing for adults, this is on a background of the COVID-19 pandemic and fewer discharges from service during that period. There are a number of plans in place to meet these targets, which we expect to start delivering over the course of 2023/24. In terms of achievements, Walsall has one of the best "continuity of care" (i.e., engagement with treatment post prison release) proportions (over 50%) in the West Midlands, has significantly lower deaths in treatment rates than the national average and is close to meeting targets for numbers of young people in service.

Improving the blood-borne virus (BBV)testing, vaccination and treatment offer will be a key priority for 2023/24, as proportion of service users being offered screening and vaccination has reduced significantly over time. However, in May 2023 over 98% of CGL service users were offered a Hep C test, over 80% had a Hep C test date and nearly 40% (up from 27%) had a test date in the last 12 months, with nearly 80% of those who were Hep C positive being on treatment. Hepatitis B vaccination uptake figures, however, remain low. These figures may differ from those presented here due to the timing of the testing offer (i.e., may not be at presentation). However, CGL are changing their new presentation pathways to include support from apprentices to ensure a comprehensive BBV offer is made at presentation.

Key Priorities for 2023/2024

- Increase numbers of adults and young people in treatment services
- Increase Hep B and Hep C screening and vaccination (ongoing).
- Establish drug related deaths panel to review both in service and out of service deaths.
- Increase access to sexual health services for alcohol and drug treatment service clients.
- Support wider community safety agenda with reference to problematic drinking
- Agree a local dual diagnosis pathway.

Recommendations

CGL will focus this year on their BBV offer, particularly for new presentations, and are remodelling their service to achieve this.

Meeting treatment targets will also be a focus of activity – particularly establishing firm referral routes to CGL from partners and having a focus on outreach/community-based work.

DO NOT: Give any timescales of when dead birds may be

Avian Influenza

Overview

Avian Influenza, also known as bird flu, is a type of influenza that spreads among birds. The UK has recently been affected by outbreaks and incidents of the H5N1 strain of avian influenza in birds across the country.

As a result, the Animal and Plant Health Agency (APHA) and the UK's Chief Veterinary Officer issued alerts to bird owners across the country to keep birds indoors and away from wild birds to limit the spread.

The risk to the wider public from avian flu continues to be very low; some strains of bird flu can pass from birds to people but this is extremely rare. In cases where it is spread to humans it is by close contact with an infected bird including touching infected birds/droppings or killing/preparing infected poultry for cooking.

Plans are in place to manage any suspected cases of bird flu in the UK. Walsall has an established multi agency plan for managing incidents of bird flu approved by the Health Protection Board in the form of a Standard Operating Procedure (SOP).

Walsall situation

In October 2022 Walsall Health Protection Team (HPT) responded to two incidents regarding deceased birds at a popular sailing club in Walsall, and a lake in the Aldridge area. The incidents were managed collaboratively with internal and external partners including DEFRA, UKHSA, Walsall Clean and Green, and the RSPCA. Four members of the public were given prophylactic antivirals for handling deceased birds without appropriate PPE. A pathway was developed for responding to reports of dead birds in the borough.

Figure 22. Avian Influenza response process

Frontline call handers: Reports of a dead bid in the borough

KEY POINT: Overall message of calm reassurance - low risk to people, we're taking care to protect you and wildlife etc

If the public come across a sick bird the advice is to leave it where it is, do not touch it and contact the RSPCA on 0300 1234 999 Are you reporting a dead bird in Walsall? Yes Did you touch the dead bird including their droppings, eggs or bedding? Yes No Advice, • The Department for the Environment, Food and Rural The Department for the Environment, Food and Rural Affairs (Defra) and the Animal and Plant Health Agency Affairs (Defra) and the Animal and Plant Health Agency (APHA) has now confirmed there is avian influenza A (APHA) has now confirmed there is avian influenza A (H5N1) in the wild bird population in Walsall. (H5N1) in the wild bird population in Walsall. • There is a very low risk to a person's health if they have • It is important to leave the bird where it is. touched a dead bird. • Do not touch or pick up the dead bird(s). • The UK Health Security Agency would like to speak to anyone who has just touched a bird to see how you are • Our Clean and Green team can arrange for the dead bird feeling and to monitor the situation. to be collected in a safe and secure way. Refer: Ask the person to notify the UK Health Security Refer: 01922 65 33 44 for safe removal and disposal.

collected.

Does the bird need removing?

Public Health on-call Action: Please record name and contact details and send to westmidwest@phe.gov.uk

Agency's West Midlands Health Protection Team on

0344 225 3560

Air Quality

Overview

Poor air quality is a significant public health issue. There are notable short-term effects associated with poor air quality, for example on the respiratory system, and more serious impacts due to long-term exposure including permanent reductions in lung function. Air pollution has been linked to asthma, chronic bronchitis, heart and circulatory disease, and cancer.

There is a close, quantitative relationship between exposure to high concentrations of small particulates (PM10 and PM2.5) and increased mortality or morbidity, both daily and over time. Conversely, when concentrations of small and fine particulates are reduced, related mortality will also go down – presuming other factors remain the same. This allows policymakers to project the population health improvements that could be expected if particulate air pollution is reduced.

There is good evidence that nitrogen dioxide and particles in air are harmful to health. Nitrogen dioxide inflames the lining of the lung and reduces immunity to lung infections such as bronchitis. Studies also suggest that the health effects are more pronounced in people with asthma compared to healthy individuals and epidemiological studies have shown that symptoms of bronchitis in asthmatic children increase in association with long-term exposure to NO2.

Figure 23. Particulate Air Pollution Attributable Mortality and Walsall MBC ADMS Urban Nitrogen Dioxide Air Quality Model 2021



Mortality attributable to Air pollution is significantly worse in Walsall when compared to the England and West midlands average. It has increased from 5.5% in 2018 to about 6.1% in 2021.

- Development of an Air Quality Strategy for Walsall
- Development of an Air Quality Alliance

Oral Health and Fluoridation

Overview

Evidence supports water fluoridation as an effective public health measure that can benefit both adult and children's oral health, reduce oral health inequalities and offer a significant return on investment¹. Reviews of studies conducted around the world confirm that water fluoridation is an effective and safe public health measure.

In Walsall, along with the rest of the West Midlands, fluoride is added to public drinking water, in line with safe limits, to improve oral health. Water fluoridation is one of a range of interventions available to improve oral health, and the only one that does not require behaviour change by individuals.

On 28 April 2022, The Health and Care Bill: Water fluoridation received Royal Assent², allowing central government to directly take responsibility for fluoridation schemes.

Key Achievements

Joint working with NHSE for improvement of Oral Health within the borough.

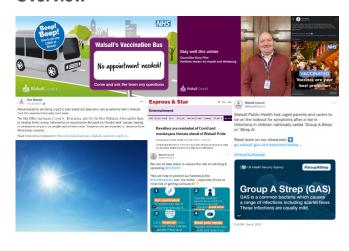
- As part of the agreed governance arrangements, public health officers will continue to review
 performance data on the dosing plants and target levels of fluoride for the borough. Concerns will be
 escalated to the Office for Health Improvement and Disparities (OHID) and the regional Consultant in
 Dental Public Health.
- Public Health will continue to attend meetings hosted by OHID and water companies operating
 fluoridation schemes in the borough to review the performance of individual fluoridation plants and
 the scheme.

Water fluoridation health monitoring report 2022 (publishing.service.gov.uk)

Health and Care Act 2022 - Parliamentary Bills - UK Parliament

Communications and Engagement

Overview



Communications and engagement have played a key role in communicating health protection messages to residents, staff, partner organisations and communities throughout 2022/23.

Public health data and insight, including segmentation of the audience by age and demographic continues to be used to inform the development of campaigns and to target communication and engagement effectively.

Immunisation was identified as a priority campaign for the Council in 2022/23, focusing on seasonal vaccinations (flu and COVID-19 boosters), the staff flu vaccination programme, as well as general awareness on other immunisation programmes including MenACWY and MMR.

Communications also reflected emerging issues such as Group A Strep, mpox and staying well during adverse weather. Proactive messaging was in place to communicate safety messages to residents, including how to prevent or reduce the spread of disease, and guide towards services and treatment if required.

Providing communications and engagement advice to colleagues in Health Protection and working with partner organisations through a 'One Walsall' approach has also helped develop and support messages for social media, the press, toolkits and internal communications.

Key Achievements

- Between April 2022 and March 2023, 15 press releases on health protection matters were published. Releases focused on topics such as staying well during the summer, COVID-19 and flu vaccinations and Group A Strep. Where we have published press releases, information was also shared with Council staff.
- Gaining extra traction with a wider audience as many of the press releases have featured in local media outlets including the Express and Star (online and print), Birmingham Live, regional radio and other media outlets.
- Using Mosaic and audience insights, paid advertising was also implemented in December 2022 on Facebook to target residents where uptake of the COVID-19 vaccination was low.
- Walsall Council and Healthy Walsall's social media channels have been used to share awareness messages, using both local and national assets from UKHSA and NHS organisations.
- Localised campaign assets have been created to better resonate messaging with our audiences
 and use trusted figures such as the Director of Public Health and the Portfolio Holder for Wellbeing,
 Leisure and Public Spaces to share Public Health messages.

Table 2. Social media analytics for immunisations and health protection messaging across Council channels (between 1 April 2022 and 31 March 2023):

219.5k	11.6k	9.49k
Impressions	Engagements	Clicks

Definitions

- Impressions the number of times a post has appeared on a feed.
- Engagements the number of times the post has been engaged with through likes, comments and shares.
- Clicks the number of times a link has been clicked on any post.

Between October 2022 and March 2023, we saw increased communications activity across several health protection topics, including autumn and winter vaccinations.

Engagement

We also engaged proactively with communications leads working in partner organisations to collaborate on content and agree messaging. For example, this was evident through the autumn and winter vaccination programmes to ensure messaging was aligned.

We also engaged with community groups and schools by tailoring content to include in toolkits and encouraging their support with sharing messaging.

Key priorities for 2023/24

- Continue raising awareness of health protection matters with the public, communities and stakeholders and to tailor messaging to their needs.
- Continue working closely with colleagues across Public Health and the NHS to promote key vaccination programmes (COVID-19, flu, MMR etc.).
- Plan and deliver the children and young people's health campaign, which will include a focus on childhood immunisations.

Recommendations

Based on our communications and engagement activity over 2022/23, including the immunisations campaign priority, it is recommended to:

- Consider different ways of communication and tailor messaging to reach and engage with target audiences.
- Build on partnerships with communication colleagues to plan and deliver Walsall-wide campaigns.
- Strengthen links between communications and business insights to ensure data and insight continues to inform public health communications and other campaigns.

Glossary

AAA	Abdominal aortic aneurysm
AMR	Anti-microbial resistance
APHA	Animal and Plant Health Agency
COVID-19	Coronavirus infection
DEFRA	Department for the Environment, Food and Rural Affairs
DESP	Diabetic eye screening programme
DNA	Did not attend
GP	General Practice
HCAI	Healthcare acquired infections
HIV	Human immunodeficiency virus
ICS	Integrated care system
IPC	Infection prevention and control
LOMP	Local Outbreak Management Plan
MDT	Multi-Disciplinary Team
MMR	Measles, mumps and rubella
MSM	Men who have sex with men
PCN	Primary care network
PPE	Personal protective equipment
RSPCA	Royal Society for the Prevention of Cruelty to Animals
STI	Sexually transmitted infections
ТВ	Tuberculosis
UKHSA	UK Health Security Agency
WHT	Walsall Healthcare Trust

Table of Figures

		Page
Figure 1	Incidents of infectious diseases in Care Homes	9
Figure 2	Key priorities for WHT IPC	14
Figure 3	Trend in Dtap/IPV/Hib Vaccinations in Children in Walsall.	15
Figure 4	Trend in MMR Vaccination Uptake in Children in Walsall	15
Figure 5	Summary of Flu vaccination in Target Groups in Walsall	16
Figure 6	School Age Flu Vaccine Uptake	16
Figure 7	Comparison 21-22 and 22-23 Primary School Flu Vaccine Uptake.	17
Figure 8	HPV Vaccine Uptake	18
Figure 9	The incidence of Tuberculosis in Walsall	19
Figure 10	Key sexual and reproductive health indicators in Walsall compared to the rest of England	21
Figure 11	Walsall Sexual Health Service Activity	22
Figure 12	Newborn and Antenatal Screening Programmes	24
Figure 13	Performance of Adult Screening Programmes.	24
Figure 14	Prevalence of all cancers in Walsall by PCN.	25
Figure 15	Uptake and Coverage of Breast Cancer Screening in Walsall PCNs.	25
Figure 16	Uptake and Coverage of Cervical Cancer Screening in Walsall PCNs.	26
Figure 17	Uptake and Coverage of Bowel Cancer Screening in Walsall PCNs.	26
Figure 18	Health and Safety Activities of the Environmental Health Team	27
Figure 19	Food Safety Activities of the Environmental Health Team	27
Figure 20	Walsall Drugs and Alcohol Service Activity.	30
Figure 21	Blood Borne Virus Screening and Vaccination Offer and Uptake in Walsall Drug and Alcohol Service.	30
Figure 22	Avian Influenza response process	32
Figure 23	Particulate Air Pollution Attributable Mortality and Walsall MBC ADMS Urban Nitrogen Dioxide Air Quality Model 2021	33

Table of Tables

		Page
Table 1	Walsall Healthcare Trusts' total number of reportable HCAIs	13
Table 2	Social media analytics for immunisations and health protection messaging across Council channels (between 1 April 2022 and 31 March 2023)	36

Walsall Health Protection
Public Health
Zone 2F. Civic Centre
Darwall Street
Walsall
WS1 1DG