

Health Protection Assurance

Summary

1. The report describes the health protection responsibilities for local authorities which came into force on 1 April 2013, including local arrangements for delivery and assurance of the local response to the revised regulations.
2. Health and Wellbeing Boards are required to be informed and assured that the health protection arrangements properly meet the needs of the local population.

Background

3. Health protection is the domain of public health which seeks to prevent or reduce the harm caused by communicable diseases and to minimize the health impact from environmental hazards such as chemicals and radiation and adverse weather events.
4. This broad definition includes the following functions within its scope, together with the timely provision of information and advice, ongoing surveillance and alerts and tracking of existing and emerging threats to health:
 - National programmes for vaccination and immunisation
 - National programmes for screening, including those for antenatal and newborn; cancer (bowel, breast and cervical); diabetic eye screening and abdominal aortic aneurism screening
 - Management of environmental hazards including those relating to air pollution and food

- Health emergency preparedness and response, including management of incidents relating to communicable disease (e.g. TB, pandemic flu) and chemical, biological, radiological and nuclear hazards
 - Infection prevention and control in health and social care community settings
 - Other measures for the prevention, treatment and control of the management of communicable disease as appropriate and in response to specific incidents
5. The scope of health protection is wide ranging. The scale of work undertaken by local government to prevent and manage threats to health will be driven by the health risks in the Local Authority area.

System Responsibilities for Health Protection

6. The Secretary of State for Health has the overarching duty to protect the health of the population.
7. From 1 April 2013, the NHS reforms arising from the Health and Social Care Act 2012, transferred health protection responsibilities to the following organisations:
- Public Health England (PHE) brings together a wide range of public health functions and is responsible for delivering the specialist health protection response to incidents and outbreaks
 - NHS England (NHSE) is responsible for the commissioning and implementation of national screening and immunisation programmes across Yorkshire and Humber
 - NHS England is responsible for the co-ordination and support for the Local Health Resilience Partnership (LHRP), which along with preparedness, co-ordinates any NHS multi-agency response to an emergency. The local authority Director of Public Health is co-chair of the LHRP. City of York Council is represented by the Director of Public Health for North Yorkshire County Council who fulfils this role for both local authorities currently.
 - The Vale of York Clinical Commissioning Group is responsible for commissioning treatment services where this is required as part of a strategy to control communicable disease.

8. City of York Council, in addition to existing responsibilities for environmental health and emergency planning, is responsible for commissioning sexual health services and is an associate commissioner for community infection and prevention control service provision e.g. in Care Homes
9. The Council has a statutory duty under the Health and Social Care Act 2012 and associated regulations, to provide information and advice to relevant organisations and to the public and has an oversight function to ensure that all parties discharge their roles effectively for the protection of the local population. This duty is discharged through the Director of Public Health.
10. The City of York Council Director of Public Health is a member of the North Yorkshire Health Protection Board whose remit is to seek assurance regarding outcomes and arrangements relating to most aspects of health protection for residents in North Yorkshire and York.
11. The Director of Public Health is also a member of the Yorkshire and Humber Directors of Public Health, Health Protection Assurance Group. The membership of this group includes Public Health England and NHS England colleagues and provides oversight of the screening and immunisation programmes commissioned by NHSE as well as general assurance across the public health system.

Main/Key Issues to be Considered

12. Performance against health protection outcomes, including immunisation and screening, is reported through the Public Health Outcomes Framework. The Public Health Outcomes Framework (PHOF) is a national set of indicators, set by the Department of Health and used by local authorities, NHS and Public Health England to measure public health outcomes. It is regularly updated and is available at www.phoutcomes.info
13. Areas where York has good outcomes include:
 - Childhood immunisation uptake rates are all similar or better than the England average
 - Uptake of screening for breast and cervical cancer, diabetic eye screening and abdominal aortic aneurysm screening (AAA) is better than the England average

- Healthcare-associated infections can develop either as a result of healthcare interventions such as medical or surgical treatment or from being in contact with infection in a healthcare setting. This covers a range of infections with the most well known being caused by methicillin-resistant Staphylococcus Aureus (MRSA) and Clostridium difficile (C.diff). The rates of infection in the Vale of York CCG are low which is a positive position. There is good practice in relation to the joint post infection reviews being undertaken by the CCG and Infection Prevention and Control Team to identify any learning and where improvements can be made.
14. Those areas where there is scope for improvement with further work required include:
- Uptake of seasonal flu vaccination in eligible groups is significantly lower in York compared to the England average for individuals 'at risk' and in people aged over 65
 - Uptake of bowel cancer screening which is lower than the England average
 - The detection rate for Chlamydia in 15 to 24 year olds is below the national average but further examination of the data suggests that this is due to a lower incidence of the infection in York as opposed to a problem with the screening programme
 - Although overall numbers are low, York has a higher than national average infection rate for some sexually transmitted infections such as genital warts and genital herpes. We are particularly concerned about the late diagnosis of HIV with an average of eight years between infection and diagnosis. These late diagnoses represent missed opportunities for treatment and prevention and further work is being undertaken to improve this position and raise awareness of the importance of HIV testing.

Consultation

15. No consultation has taken place. The Health and Wellbeing Board is required to receive an assurance report. However the Vale of York CCG and Public Health England contributed to the production of the report.

Options

16. There are no options. The Health and Wellbeing Board is required to receive and note the assurance of health protection arrangements for the local population.

Analysis

17. This report forms part of the governance arrangements to provide the Health and Wellbeing Board with assurance that the health protection responsibilities are assured and good outcomes are maintained and poor performance is addressed.

Strategic/Operational Plans

18. The report directly relates to the Council Plan 2015-19 priorities:
 - 'A prosperous city for all'
 - 'A focus on frontline services'

Specialist Implications

19. There are no specialist implications from this report.

Risk Management

20. There are no risks from this report.

Recommendations

21. The Health and Wellbeing Board is asked to:
 - Receive the report and note the content
 - Note the intention to include a more detailed report on the Forward Plan for the Health and Adult Social Care Policy and Scrutiny Committee on those health protection outcomes requiring improvement and the actions being put in place to address these.
 - Approve the establishment of a local Health Protection Group to support a multi-agency approach to addressing health protection issues for the City of York to be led by the Director of Public Health.

Reason: To enable the Health and Wellbeing Board to be assured that there are effective health protection arrangements in York that meet the health needs of the local population.

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Report
Approved



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Specialist Implications Officer(s)

Not applicable

Wards Affected:

All

Annex

Glossary