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**HEALTH PROTECTION ANNUAL REPORT**

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**SUMMARY REPORT**

**Purpose of the Report**

1. To consider the Annual Health Protection Report published by the North East Health Protection Team (HPT), Public Health England, entitled 'Protecting the population of the North East from communicable disease and other hazards'. (2017/18)

**Recommendations**

2. It is recommended that the Board:
  - (a) Notes the contents of the North East Health Protection Team (HPT), Public Health England, entitled 'Protecting the population of the North East from communicable disease and other hazards'.
  - (b) Recognises that health protection risks affect some individuals and communities disproportionately resulting in poorer health.

**Reasons**

3. The recommendations are supported by the following reasons:
  - (a) To inform the Board on the work of HPT, Public Health England to deliver safe and effective health protection services.
  - (b) The report provides evidence to the Director of Public Health in support of their assurance role.

**Suzanne Joyner**  
**Director of Children and Adults Services**

**Background Papers**

Report of the North East HTP, Public Health England, entitled 'Protecting the population of the North East from communicable disease and other hazards' 2017/18.

Author: Paul Davison, PHE/Miriam Davidson, DBC

S17 Crime and Disorder	There are no implications arising from this report.
Health and Well Being	The report has recommendations to improve the health and wellbeing of the whole population by protecting health.
Carbon Impact	There are no implications arising from this report.
Diversity	There are no implications arising from this report.
Wards Affected	All
Groups Affected	Health protection risks affect some individuals and communities disproportionately resulting in poorer health.
Budget and Policy Framework	There are no implications arising from this report.
Key Decision	No
Urgent Decision	No
One Darlington: Perfectly Placed	Health protection covers all themes of One Darlington: Perfectly Placed
Efficiency	There are no implications arising from this report.
Impact on Looked After Children and Care Leavers	There are no issues contained within the report that will have implications on Looked After Children or Care Leavers.

## MAIN REPORT

### Information and Analysis

4. The North East Health Protection Team (HPT) has produced its eighth annual report, entitled 'Protecting the population of the North East from communicable disease and other hazards'. The report summarises the activity of the various health protection functions of Public Health England.
5. Successful health protection requires strong working relationships at the North East and local level.
6. There are four elements to the work of Public Health England (PHE) in protecting the health of the population i.e. prevention, surveillance, control and communication.

## **Prevention**

7. Immunisation remains one of the most effective public health interventions for protecting individuals and the community from serious diseases. NHS England is responsible for commissioning local immunisation programmes and accountable for ensuring local providers of services meet agreed population uptake and coverage levels.
  - (a) Screening and Immunisation Teams (SITs) employed by Public Health England centres and embedded in NHS England provide local leadership and support to providers in delivering improvements in quality and changes in the programmes. The SITs are also responsible for ensuring that accurate and timely data is available for monitoring vaccine uptake and coverage.
  - (b) Public Health England centres lead the response to disease outbreaks of vaccine-preventable disease and provide expert support and advice to the SITs.
  - (c) Local Authorities are responsible for providing independent scrutiny and challenging the arrangements of NHS England, PHE and providers.

## **Surveillance**

8. Effective surveillance systems are essential to identify trends in, and outbreaks of, communicable diseases and to monitor the outcome of control actions. The HPT uses information from a wide variety of sources including local authorities. Appendix 1 in the Main Report provides a summary of the main communicable disease cases reported in 2017.
9. Health Protection Surveillance schemes include Healthcare Associated Infection (HCAI), Sexually Transmitted Infections (STIs) and the surveillance of Invasive Pneumococcal Disease (PID).

## **Control**

10. Control relates to actions taken to minimise risk of the spread of disease and the actions taken to close an outbreak. Early reporting; early diagnosis and prompt treatment are essential. For some diseases the initial reporting is through local authority environmental health services.
11. Outbreaks of infectious diseases are relatively common and community-based outbreaks are managed through an agreed local operational response by the HPT, local authorities and the NHS. Considerable effort is also put into the prevention of outbreaks through the inspection role of environmental health officers, NHS and PHE roles in relation to immunisation and infection control and the monitoring actions of other bodies such as water companies.
12. The most common outbreaks are of vomiting / diarrhoea in care homes and outbreaks of food poisoning possibly associated with restaurants or catered events.

13. Public health action is taken to control the outbreak by any combination of controlling the source of the organism (e.g. better hygiene in a food premises), ceasing exposure (e.g. withdrawing a food from sale, hygiene and cleanliness in care homes), breaking the chain transmission (e.g. by treatment of cases, isolation of cases in hospital) and reducing vulnerability (e.g. by immunisation or antibiotic prophylaxis).

### **Emergency preparedness, resilience and response (EPRR)**

14. PHE North East has a system in place for emergency preparedness. Multi-agency Local Resilience Forums (LRFs) operate at strategic and sub-group levels. In addition PHE is actively involved in the work of the NE Local Health Resilience Partnership (LHRP) and the Health and Social Care Resilience Groups.
15. The PHE Centre maintains internal plans for response to a range of incidents. These are linked to national plans and supporting materials. The most likely incidents to have a public health impact and require a significant multi-agency response are a large fire, chemical release or major outbreak of a communicable disease.
16. The responsibility for the Science and Technical Advice Cell (STAC) plan, activation and management rests with PHE. The STAC Plan is in place and Directors of Public Health provide the STAC chair role through an on-call rota. Annual updates and exercises are available for Directors of Public Health.

### **Communication**

17. The PHE North East communication team works closely with local authorities and NHS bodies via the Public Health communication network. The PHE communications team continues to support the communications around the management of outbreaks and incidents.
18. It has also supported local and national outbreaks of measles, norovirus and scarlet fever and prepared communication plans to address concerns and raise awareness. The team has also played an active role in helping to disseminate public health messages during emergency situations and has worked closely with its communication colleagues in local resilience forums to respond to incidents such as fires and floods.