

Agenda item 12

DERBYSHIRE HEALTH AND WELLBEING BOARD

12 May 2016

Report of the Interim Director of Public Health

HEALTH PROTECTION BOARD UPDATE

1. Purpose of the Report

To provide an overview of the key messages arising from the Derbyshire Health Protection Board, which met on the 14 March 2016.

2. Performance Update

The Health Protection Board (HPB) is a formal sub group of the Derbyshire County Health and Wellbeing Board and the Derby City Health and Wellbeing Board and is therefore required to provide regular updates on its work programme. Below is a summary of issues discussed at the last HPB meeting.

Screening

A detailed report on the performance of the Aortic Aneurysm (AAA) screening programme was provided by the Screening and Immunisation Lead. The AAA screening programme has met the minimum standard in all areas and the achievable standard in most. The Board proposed a review of screening clinics against coverage data to ensure adequate provision, and the consideration of practice profiles to support primary care involvement.

Infection Prevention and Control

A detailed report on healthcare associated infections was provided by North Derbyshire CCG (NDCCG). Reported cases of C.difficile had reduced over 2015/16, with the majority of cases being community acquired and not as a result of any lapse in care. The CCGs main providers, Chesterfield Royal Hospital and Derbyshire Community Health Services, have reported improvements in C.difficile management. Four cases of MRSA were reported during 2015/16 in NDCCG. Incidence of MSSA Bacteraemia and Ecoli Bacteraemia remained fairly consistent. Increase in Ecoli resistance nationally was noted.

Current work streams include review of Infection Prevention and Control Service specification with Chesterfield Royal Hospital Foundation Trust; a review of the Route Cause Analysis process for community Clostridium cases, and development of guidance for primary care.

Environmental Health

A verbal update from the Chief Regulators Group was provided to the Board, including an overview of current work to address air quality associated morbidity and mortality.

Local authority health protection

The Board received an overview report detailing the key work stream areas of the Health Protection Team within Public Health, which includes:

- Evaluating the council's flu programme for Improvement and Scrutiny Committee
- Planning for 2016 flu programme
- Collaborating with the Chief Regulators Group for work on air quality
- Co-ordinating a migrant health day for Southern Derbyshire CCG primary care, which will take place on 5 May 2016
- - Updating the Joint Strategic Needs Assessment (JSNA) for Derbyshire and Derby City to reflect health protection issues
- Developing a tattoo hygiene rating scheme to be launched later in the year
- Amending the Public Health contract to ensure an appropriate response to emerging health protection incidents
- Supporting Adult Care and Children's Services on review of infection control policies, including mapping of infection control training and continuing professional development across the health economy.

Inequalities

A protocol for Bowel Health Equity Audit has been submitted and work is expected to commence May 2016.

Incidents and outbreaks

Public Health England (PHE) provided a summary of incident and outbreaks, including a number of influenza outbreaks in care homes, but less than in previous years. An outbreak audit tool is currently in development and findings will be reported to the Board. There has also been an increased number of cases of Scarlet Fever locally, in line with national trends.

PHE presented the East Midlands Post Incident Constructive Outbreak Debrief Report, which considered the meningitis outbreak in Derbyshire in October 2015. Concern around clarity of the role of primary care in outbreak response was highlighted. A task and finish group of the Local Health Resilience Partnership will ensure strategic planning is reflected within operational delivery. The Board highlighted the importance of clarity around operational issues and the review being undertaken in a timely manner.

Strategic issues

PHE provided an organisational update. A recent national consultation exercise has been completed. It is unlikely that the current size of the East

Midlands Health Protection Team would change and consideration was being given to the extension of the service. An increase in calls regarding availability of Meningitis B vaccine was noted due to recent publicity regarding the vaccine. The current position of the Department of Health on the extension of the Meningitis B vaccine remains unchanged, due to lack of evidence around cost effectiveness of the programme in older age groups.

3. RECOMMENDATION

The Health and Wellbeing Board is asked to:

- Note this update report from the Health Protection Board.

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Derbyshire County Council