

DERBYSHIRE HEALTH AND WELLBEING BOARD**Report of the 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 29th January 2019. The Board is a formal sub group of the Derbyshire County Health and Wellbeing Board and the Derby City Health and Wellbeing Board.

2. Performance Update**2.1 Emergency Preparedness, Resilience and Response (EPRR)**

- (a) A meeting of the Health Emergency Planning Operation Group (HEPOG) had been held on 21st January. It was noted that the group may cease meeting on a regular basis and would convene for particular topics or issues.
- (b) The frequency of LHRP meetings is also being reviewed.
- (c) Feedback given about the commissioning of antiviral influenza response service.
- (d) The Health Protection Response Group and a meeting would be convened in the spring.
- (e) Discussion around influenza immunisation uptake
- (f) Agreement had been reached that partner organisations did not need category one security clearance to attend meetings of the Strategic Co-ordination Group.
- (g) Lengthy discussion on the issues for health as a consequence of a no deal Brexit.
- (h) LRF Tactical Group had discussed and approved the excess deaths plan and is to be presented to LRG for sign off.

2.2 Screening and Immunisation Programmes

- (a) Seasonal influenza programme - DCHSFT had ensured that a high number of children had been vaccinated as part of the seasonal flu programme. It was highlighted that non-validated data to date showed an increase for 5% for the County
- (b) Seasonal influenza vaccination programme - Non-validated data demonstrated that Derbyshire compared very well nationally and had similar uptake to last year
- (c) This was mainly attributable to the successful partnership working between Public Health England, Derbyshire CCGs and the Local Authorities.
- (d) UK measles and rubella elimination strategy - The Screening and Immunisation Team had presented a draft action plan at the Joint Immunisation Programme Board
- (e) Cervical Cancer Screening Programme (NHSCSP) - The backlog had continued to reduce together with the sample turn round times (TAT).

(b) Derbyshire Diabetic Eye Screening Program Overview

- The service invited all eligible patients for screening annually and had good failsafe systems in place.
- In 2018/19 the target for routine digital screening (KPI DE1 'achievable target' being 85%.
- The programme was closely monitored and a Quality Assurance visit had been made in May 2017. All the outstanding recommendations had been signed off.
- The programme had worked towards the implementation of the GP2DRS (General Practitioner to Diabetic Retinopathy Screening) extraction software. It was noted that this would be a gradual process.
- Extended Interval Screening would be introduced for diabetic eye screening sometime in the near future.
- The programme ensured that health inequalities were taken into account across Derbyshire.
- The programme was safe, efficient and well managed.

(C) BCG Vaccination Commissioning Update

- The Board was informed that there had been limited progress with the establishment of a commissioned BCG service for school age children.
- BCG was a key area for action in the TB Strategy and there was a sub-group of the National Delivery Board which fed into the national group.
- The sub-group had discussed vaccine supply and the latest proposals for screening for Severe Combined Immunodeficiency (SCID).
- The need to map BCG delivery across the country had also been discussed and this would include the school-aged group.

(C) Shingles Working Group

- Shingles working group had met on 6th December. CC reported that data had been taken to the clinical governance leads meetings. The group continues to work on the joint action plan

(D) Immunisations

- A meeting with the Derbyshire County Council children's services lead to discuss concerns around home educated children and equality of access to immunisation services.

2.3 Infection Prevention and Control (IP&C)

- MRSA bacteraemia - Five community onset cases reported and no lapse in care noted to date.
- No MRSA bacteraemia apportioned to University Hospitals of Derby and Burton Foundation Trust (UHDBFT) or Chesterfield Royal Hospital Foundation Trust (CRHFT).
- An overall reduction in clostridium difficile infection (CDI) cases in 2018/2019 to date.
- MSSA blood streams Infections remain at comparable rates to 2017/2018 at the end of quarter 2.
- E. coli blood stream infection had increased in numbers in quarter 3.

- Information about the Derbyshire CCG IPC study day to be held on 6th March and details of this had been sent to practice nurse across Southern Derbyshire and Erewash.
- A Derbyshire County Council trainee, employed by CRHFT, had offered to support the e-coli work to review the audits previously undertaken, with specific reference to community cases in order to identify themes.
- Some of the monies allocated to adult social care departments to assist with winter pressures had been used to support IPC work, to address the impact of outbreaks on capacity.
- A meeting had been held with CCG, who was leading on the care homes support work for the CCG, to highlight the need for prevention to be included in the service design.

The need to continue to evidence the benefit of IPC to demonstrate its role in reducing pressures faced by health and social care services. Public Health was looking to ensure inclusion of IPC within the STP prevention strategy.

2.4 Environmental Health

- (a) An update was provided to the group around the proposed Health and Wellbeing Board Air Quality Strategy.

2.5 Inequalities

- (a) Derbyshire Bowel Health Equity Audit
Is now part of the Cancer STP workstream. A flier had been produced for County to provide information about the health equity audit for frontline workers.

(b) Cervical Screening Data Analysis/Health Equity Audit

The regional Section 7a group had recommended that a health equity audit be carried out on a regional basis for Cervical Screening.

(C) Vulnerable TB Pathway

Presentation on TB patients with housing issues and/or no recourse to public funds and referred to the circulated papers on the TB housing/No recourse to public funds (NRPf) pathway and a housing case review.

(D) TB Strategy Update

- Work at a national and TB Control Board level would continue to focus on what had been done well and spend less time on those aspects which had not gone so well. There had been an issue associated with attendance and engagement with the TB Control Board and this was to be addressed.
- There will be an educational event in July 2019 at which the Chief Executive of TB Alert would give a presentation on the new resources which had been developed for USPs in association with Public Health England and NHS England.

(E) Hepatitis C

- The two hepatitis C working groups for North and South Derbyshire continued to work within the operating and delivery networks in Sheffield and Nottingham continued.
- In North Derbyshire there was now no outreach service and the impact of this on numbers, particularly within the substance misuse service, was currently being monitored.
- Some peer educators had now been recruited in North Derbyshire and they were providing support and highlighting the positive impact of treatment.
- Derbyshire pilot on dry blood spot testing via pharmacies to ensure that those people not in substance misuse services but accessing needle exchange had access to testing.
- There had been a very low uptake so it was now intended to re-launch and re-model the service so that the clients were incentivised to attend testing.

2.6 Emerging and Recent incidents

- The TB nurses would be undertaking workplace screening in relation to a person who did not reside in the East Midlands but worked in the area.

3. Recommendation

The Health and Wellbeing Board are asked to note this update report from the Health Protection Board.

**Dean Wallace
Director of Public Health
Derbyshire County Council**