DECISION-MAKER:		HEALTH & WELLBEING BOARD		
SUBJECT:		PUBLIC HEALTH: ARRANGEMENTS FOR HEALTH EMERGENCY PLANNING AND HEALTH PROTECTION		
DATE OF DECISION:		27 NOVEMBER 2013		
REPORT OF:		DIRECTOR OF PUBLIC HEALTH, SCC		
		CONTACT DETAILS		
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STATEMENT C		ENTIALITY		
None				

BRIEF SUMMARY

This report describes the arrangements for health emergency planning and health protection that became local authority responsibilities from 1st April 2013.

RECOMMENDATIONS:

- (i) That the Board recognise the critical role of the SCJHPF in providing assurance to the DPH and feeding into the Local Health Resilience Partnership (LHRP) thus fulfilling statutory requirements;
- (ii) That the Board recognise the link between the impact of successful health protection mechanisms, for example vaccinations /immunisation programmes, and ill health associated with higher levels of deprivation;
- (iii) That the Board adopts the World Health Organisation (WH0) 95% uptake target for vaccination which at that level will provide herd immunity to the remaining population.

REASONS FOR REPORT RECOMMENDATIONS

1. To provide the members of the Health & Wellbeing Board with an understanding of the health protection responsibilities for the city of Southampton

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

2,. None. It is considered important for the members of the Health & Wellbeing Board to be regularly updated on the progress of arrangements for health emergency planning and health protection.

DETAIL (Including consultation carried out)

- 3. Health protection involves protecting the public from infectious disease and other threats from health, which may include chemicals and poisons, radiation and environmental hazards. It includes measures of prevention such as immunisations and vaccinations (including childhood, flu, travel) and responding to outbreaks to prevent spread of disease within communities (including meningitis, tuberculosis, hepatitis and other blood borne viruses). It also involves reacting in a timely fashion to incidents which may include major incidents and ensuring that the Emergency Preparedness Resilience and Response of Health is maintained and where needed strengthened. Appendix 1 is a briefing to CIIr Kaur on Emergency Planning & Business Continuity.
- 4. Local leadership from the Director of Public Health (DPH) is crucial to delivery of the health protection function and partnership working both internally and externally to the local authority with NHS England, Public Health England, the Clinical Commissioning Group and local providers of services. National leadership is provided by Public Health England. The Wessex Centre for Public Health England is based at Whitely, near Southampton.
- 5. Under health protection legislation (Department of Health 2010), local authorities have powers to require, request or take action for the purposes of preventing, protecting against, controlling or providing a public health response to the incidence or spread of infection or contamination which this presents, or could present, significant harm to human health. This might in rare situations include enforcing the requirement for a child to remain off school if their attendance could present a significant harm to others and powers of entry to inspect premises.
- 6. The DPH should ensure that effective arrangements are in place to reduce the risk of outbreaks of infectious disease, to manage those outbreaks effectively and to learn from them when they occur. The Health & Social Care Act 2012 stipulates that the DPH has responsibility to:
 - Ensure plans are in place to protect the health of the geographical population from threats ranging from relatively minor outbreaks and health protection incidents to full scale emergencies;
 - Respond to local outbreaks and incidents;
 - Maintain Public Health surveillance of all aspects of the occurrence and spread of disease pertinent to effective control in order to inform and direct public health action.

Appendix 2 describes the health protection duty of local authorities.

The following paragraphs describe the mechanisms in place to discharge these responsibilities.

- 7. A Southampton local multi-agency forum, Southampton City Joint Health Protection Forum, (SCJHPF) links to the core health protection and emergency preparedness responsibilities of the Hampshire and Isle of Wight Local Health Resilience Partnership (LHRP) and the Southampton Health and Wellbeing Board. Whilst the group is there to provide assurance to the DPH that appropriate health protection planning mechanisms are in place for Southampton city residents and visitors, the forum will also act as an information exchange between public, voluntary services and private providers including Solent and Southampton University. The terms of reference for the Southampton City Joint Health Protection Forum are set out in Appendix 3.
- 8. Since the move of specialist public health from the NHS into the City Council a training needs assessment has been carried out within the Public Health team. This analysis has identified that required skills and knowledge in health protection and emergency planning require updating. The public health protection emergency planning manager is in discussion with Public Health England on what training programmes will be made available to staff within the next 12 months. Where appropriate, any training opportunities that would assist the generalist emergency planners will be made available to them.
- 9. Public Health England Wessex provides the DPH with monthly surveillance data on the occurrence and spread of disease within the local population. This information is cascaded and action taken as required, protecting public health. Appendix 4 is the memorandum of understanding with Public Health England.
- 10. Tackling of infectious disease threats will be an integral part of Health and Wellbeing Board's work in reducing health inequalities and improving the health of the population. This must include ensuring that immunisation programmes are effectively commissioned, cover a high proportion of the target population, are delivered safely and effectively and are having a measurable impact on the prevalence of these diseases
- 11. NHS England commissions screening and immunisation programmes. A draft Screening and Immunisation Governance and Assurance Framework has recently been issued by NHS England (Wessex). Local Authorities, through the DPH, will seek assurance from NHS England that programmes are commissioned and delivered safely, effectively and equitably for the

Wessex population. It has been proposed that the DPH will be a member of the partnership group, Chaired by the Head of Public Health Commissioning, NHS England (Wessex). The role of this group will be to identify and prioritise screening and immunisation need and link this into local Joint Strategic Needs Assessments.

RESOURCE IMPLICATIONS

Capital/Revenue

12. The cost of delivering these functions relates to officer time and is contained within the public health staff budget.

Property/Other

13. None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

14. The responsibilities for emergency planning and health protection are set out in the Health & Social Care Act 2012 and the Civil Contingencies Act 2004.

Other Legal Implications:

15. None.

POLICY FRAMEWORK IMPLICATIONS

16. None.

KEY DECISION? No

WARDS/COMMUNITIES AFFECTED:	All
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SUPPORTING DOCUMENTATION

Appendices

1.	Emergency Planning & Business Continuity Update - Briefing Paper to Cllr Kaur [EP Unit Southampton City Council: August 2013]	
2.	Protecting the health of local population: the new health protection duty of local authorities under the Local Authorities (Public Health Functions & Entry to Premises by Local Healthwatch Representatives) Regulations 2013 [DH,PHE,LGA:May 2013]	
3.	Terms of Reference of the Southampton City Joint Health Protection Forum v9a [Public Health Southampton City Council: Oct 2013]	
4.	Memorandum of Understanding: Public Health England Hants, Isle of Wight, Dorset Centre & Public Health Southampton City Council [PHE: August 2013]	

Documents In Members' Rooms

1.	None.	
Equality Impact Assessment		

Do the implications/subject of the report require an No

Equality Impact Assessment (EIA) to be carried out.	
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Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper Relevant Paragraph of the Access to Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if applicable)

1.	None.	
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