HEALTH AND WELLBEING BOARD		AGENDA ITEM No. 7 (a)	
		PUBLIC REF	PORT
Contact Officer(s): Dr Henrietta Ewart, Director of Public Health		<u></u>	Tel.

HEALTH PROTECTION, EMERGENCY PLANNING AND RESPONSE TO EMERGENCIES

RECOMMENDATIONS		
FROM: Dr Henrietta Ewart, Director of Public Health	Deadline date : N/A	
HWBB is asked to consider and agree the proposed arrangements		

1. ORIGIN OF REPORT

This report is submitted to the Board following a request by the Chair of the Health and Wellbeing Board.

2. PURPOSE AND REASON FOR REPORT

2.1 The purpose of this report is to inform the HWBB of the arrangements that ensure that the responsibilities of Peterborough City Council regarding Health Protection are discharged and reported and that there is an appropriate process to address any incidents or concerns relating to health protection.

3. MAIN BODY OF REPORT

- 3.1 The discharge of the Health Protection responsibilities of the PCC links with the following priorities of the Health & Wellbeing Strategy 2012-15:
 - Ensure that children and young people have the best opportunities in life to enable them to become healthy adults and make the best of their life chances.
 - Narrow the gap between those neighbourhoods and communities with the best and worst health outcomes.
 - Enable older people to stay independent and safe and to enjoy the best possible quality of life.
- 3.2 Health protection is one of three domains of public health. Health protection seeks to prevent or reduce harm caused by communicable diseases (including healthcare associated infections) and minimise the health impact from environmental hazards. The services that fall within Health Protection include:
 - Communicable disease and environmental hazards
 - Public health emergency planning
 - Immunisation
 - Screening
 - Sexual health

Following implementation of the Health and Social Care Act 2012 and consequent reorganisation of the health sector in April 2013, roles and responsibilities for health protection of the population are shared between a number of organisations. The national guidance on the role of the local authorities in health protection matters is provided in Appendix 1.

- 3.3 Peterborough City Council (PCC), through the Director of Public Health, has statutory responsibilities to advise on and promote local health protection plans across agencies, which complements the statutory responsibilities of Public Health England, NHS England, the Cambridgeshire and Peterborough Clinical Commissioning Group and Cambridgeshire County Council.
- 3.4 It is important that the HWBB understands its responsibilities with regards to health protection and that there is publicly available information that demonstrates they have been fulfilled. It is also important to have processes in place to address and escalate any issues that may arise.
- 3.5 It is proposed that the Director of Public Health makes an annual health protection report to the Health & Wellbeing Board (HWB) which would provide a summary of relevant activity. This report would cover the multi-agency health protection plans in place which establish how the various responsibilities are discharged and identify their relationship to the Joint Strategic Needs Assessment and Health and Wellbeing Strategy priorities. Any other reports would be provided by exception where a particular incident or concern had arisen. The HWB will not be asked to determine how these plans are developed, nor should it be asked formally to approve them (as they will be developed, on a multi-agency basis and organisations are not accountable to PCC or to the HWB).
- The Director of Public Health has set up the necessary operational multi-agency group (Peterborough Health Protection Committee), taking into account the reduced staff resources overall in the system and therefore ensuring that maximum efficiency is achieved.

 Member organisations include Peterborough City Council, Public Health England, NHS England, Cambridgeshire & Peterborough Clinical Commissioning Group, Cambridgeshire Community Services, and local acute trusts. The agreed Terms of Reference and membership of the Health Protection Committee are attached in Appendix 2. The Committee will report to the HWB via the Director of Public Health on any health protection matters that need to be brought to the attention of the HWB.
- 3.7 Public health emergency planning responsibility is shared between the Local Health Resilience Partnership (LHRP), which is co-chaired by the NHS England Area Team Director of Operations and the Cambridgeshire DPH and the Local Resilience Form (LRF). The Director of Public Health will report health protection emergency planning issues to the LHRP on a regular basis. In addition it will be essential to ensure that these plans are actively managed so they remain current, that interdependencies are clearly identified, that they are controlled and stored in a safe and shared environment.
- 3.8 It will be for the LRF and/or the LHRP to decide whether these plans should be tested through a multi-agency exercise as a main or contributory factor.
- 3.9 A draft Communicable Disease Outbreak Management Plan for Norfolk, Suffolk and Cambridgeshire has been approved subject to some minor alterations by Cambridgeshire & Peterborough LHRP. The Cambridgeshire and Peterborough LHRP adopted the working draft of this plan, and the Peterborough Health Protection Committee members have been consulted. The plan builds upon a previous plan for Norfolk, Suffolk and Cambridgeshire from 2011. The plan is attached in Appendix 3.
- 3.10 A Memorandum of Understanding (MOU) on Health Protection Governance has been developed to provide agreement between partner organisations (PCC, Public Health England, NHS England, Cambridgeshire & Peterborough Clinical Commissioning Group, and Cambridgeshire County Council) that are involved in health protection and surveillance and production of associated data (Appendix 4). The MOU defines the organisational responsibilities to provide information needed to assure the DPH that population health is protected and to enable the DPH to provide appropriate advice. The MOU has been approved by the Public Health DMT members. The MOU covers wider governance of health protection and includes agreement on funding interventions in any public health incident in line with national guidance.

3.11 This proposed structure supports the Director of Public Health in fulfilling their statutory duties and will enable the various public agencies to contribute to the planning, commissioning and monitoring of the required activity.

4. CONSULTATION

- 4.1 The Terms of Reference for Peterborough Health Protection Committee have been agreed by the CMT, and by the Peterborough Health Protection Committee members.
- 4.2 The Norfolk, Suffolk and Cambridgeshire draft Joint Communicable Disease Outbreak Management plan has been agreed by the LHRP and members of the Peterborough Health Protection Committee.
- 4.3 The MOU on Health Protection Governance has been agreed by members of the Public Health DMT at PCC and has been circulated for comments to the members of Peterborough Health Protection Committee.

5. ANTICIPATED OUTCOMES

- 5.1 The signing off of the MOU on Health Protection Governance by member organisations is pending.
- Members of the Peterborough Health Protection Committee will be responsible for ensuring that regular and ad hoc reports and updates are provided by partner organisations to the PHPC on their areas of responsibility. These regular reports will provide the information from which an annual report on health protection will be produced by the DPH for the Peterborough Health and Wellbeing Board.
- 5.3 Additionally it is expected that the Consultant in Public Health Medicine (CPHM) with responsibility for Health protection will be routinely included in the circulation of all relevant health protection, screening and emergency planning data and information, to enable that consultant to have oversight of health protection and to be able to identify any abnormal trends or issues.

6. REASONS FOR RECOMMENDATIONS

Health Protection is a statutory requirement as outlined in Appendix 1.

7. BAKCGROUND DOCUMENTS

Appendix 1. Department of Health, PHE, LGA. Health Protection in the Local Authorities

Appendix 2. Terms of Reference for Peterborough Health Protection Committee.

Appendix 3. Norfolk, Suffolk and Cambridgeshire Joint Communicable Disease Outbreak Management Plan

Appendix 4. Memorandum of Understanding on Health Protection Governance between PCC, PHE, C&P CCG, NHS England and Cambridgeshire County Council

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