

<b>REPORT TO:</b>	<b>HEALTH AND WELLBEING BOARD (CROYDON)</b> <b>13 December 2017</b>
<b>SUBJECT:</b>	<b>Health Protection update</b>
<b>BOARD SPONSOR:</b>	<b>Rachel Flowers, Director of Public Health</b>
<b>BOARD PRIORITY/POLICY CONTEXT:</b>	
<p>This report addresses the following local priorities set out in the Joint Health and Wellbeing Strategy:</p> <ul style="list-style-type: none"> <li>• Increased healthy life expectancy and reduced differences in life expectancy between communities</li> <li>• Local organisations will work together to address the factors that drive health problems amongst the poorest and most disadvantaged.</li> <li>• Everyone’s health will be protected from outbreaks of disease, injuries and major emergencies and remain resilient to harm.</li> <li>• Earlier diagnosis and intervention means that people will be less dependent on intensive services.</li> </ul>	
<b>FINANCIAL IMPACT:</b>	
No immediate financial implications.	

## **1. RECOMMENDATIONS**

1.1 The Health and Wellbeing Board is asked to note the contents of the report.

## **2. EXECUTIVE SUMMARY**

- 2.1** The Croydon Health Protection Forum (HPF) was established in July 2015 with the purpose of having a strategic overview of health protection matters with the aim to support the Director of Public Health in her statutory assurance role around the safety of the local population. In this role, the DPH seeks assurance that arrangements in place to protect the health of residents are robust and implemented appropriately to local health needs. The health protection issues discussed at the Forum include national screening programmes, adult and child immunisation programmes.
- 2.2** This report provides an update on HPF work since the last report to the board, developments around seasonal and pandemic influenza and progress against action plans around BCG (tuberculosis) and immunisations as well as HIV late diagnosis.

### **3. DETAIL**

**3.1** The Health Protection Forum meets quarterly bringing together various agencies including Croydon Council, Croydon Clinical Commissioning Group, Croydon University Hospital, NHS England, Public Health England and other agencies relevant to the particular theme under discussion. An update of the work of the HPF is below:

#### **3.2 Viral Hepatitis**

3.2.1 The March meeting focussed on blood borne viruses with a particular focus on viral Hepatitis.

3.2.2 The Antenatal and Neonatal Hepatitis B Subcommittee was convened in May where concerns around the following were discussed:

- the forthcoming change in the provider who delivers Hepatitis B vaccination and testing from 4 weeks of age onwards (changed from maternity/paediatric services to general practice in April 2017)
- the forthcoming change in co-ordination of child health data (changed from a Croydon Child Health Information System [CHIS] to a South West London CHIS)

3.2.3 Achievements of the subcommittee meeting included:

- Significant progress towards a comprehensive agreed map of local antenatal and neonatal pathways, roles and responsibilities for Hepatitis B services in the London Borough of Croydon, in the context of National Screening Committee Guidelines.
- Establishing a working network of key contacts in each of the organisations involved with viral hepatitis prevention, testing and treatment in the antenatal setting. This included new members of staff/contacts within the Child Health Information System.

#### **3.3 Air quality and health**

3.3.1 The June meeting focussed on Air Quality, bringing together local partner organisations with the aim to discuss how the local air quality strategy can be shaped and supported by all.

3.3.2 An Air Quality Action plan was updated for 2017-2022 and was put out for consultation from 26 June to 21 August 2017.

#### **3.4 Seasonal Influenza**

3.4.1 Croydon Council, through their Public Health department is working with local partners like the Croydon CCG and Croydon Health Services to minimize the health impact of seasonal flu in Croydon through strategic coordination of effective communication, robust monitoring, and prevention and treatment strategies.

3.4.2 There is work to ensure that provision for vaccinating frontline council staff is in place and that adequate communication is disseminated to staff.

3.4.3 The LBC seasonal flu plan/ strategy has been developed.

### **3.5 Pandemic Influenza**

3.5.1 Croydon Council- the Public Health and Resilience teams – has been developing a Croydon Council Pandemic Influenza plan.

3.5.2 The plan was out for consultation from 25 September to 3 November 2017.

### **3.6 BCG**

3.6.1 PHE have announced that there are sufficient BCG InterVax stocks to extend vaccination offer to all eligible groups – as listed in Annex A of the Vaccine Update Special edition.

3.6.2 NHS England (NHSE) is the responsible commissioner for the Section 7a neonatal BCG programme which covers the PHE priority groups A and B but it is not responsible for commissioning BCG vaccination services for group C. This commissioning responsibility falls onto CCGs.

3.6.3 As part of the assurance role of the Director of Public Health, the Public Health Department of Croydon Council is working with local partners to address the following issues:

- Implementation of universal vaccination of neonates
- Vaccination of children above the age of 1 who are in high risk groups and were not vaccinated during the shortage
- Pathways for BCG vaccination of looked after children

3.6.4 NHSE is looking to help local CCGs build a service for children in this group (priority group C).

3.6.5 Croydon Council's Public Health Department is also working with local partners to establish clear communication that will clarify the local position to parents and professionals alike.

### **3.7 MMR/DTaP vaccination**

3.7.1 Croydon Council, using their Public Health department, has supported NHS England commissioners and the CCG to review the GP call recall process through visits to 3 of the highest performing and 3 of the worst performing GP surgeries for MMR 2 at 5 years in Croydon. The aim of these visits was to develop a Croydon call recall protocol based on local and NHS England informed best practice.

- 3.7.2 Croydon Council is working with the CCG variations team and GP IT lead to develop support for practices to ensure they can use the EMIS system to automatically search, and explore possibilities for capturing patient email addresses to increase the options for communicating call recall messages with parents.
- 3.7.3 The Behavioural Insights Team is working with Public Health specialists within Croydon Council to explore behavioural economics tools that will lead to an improved uptake of vaccine in Croydon.

### **3.8 HIV late diagnosis**

- 3.8.1 A joint meeting between the Health Protection Forum and the Sexual Health and HIV partnership board was held in November to discuss late diagnosis of HIV.
- 3.8.2 An overview of the data on HIV prevalence, late diagnosis, testing and service provision in Croydon was presented to attendees.
- 3.8.3 Croydon University Hospital is working towards implementing HIV testing within the Emergency Department. This will allow for approximately 35-40,000 additional tests each year. Public Health specialists from Croydon Council will be working with partners to understand how other hospitals have implemented HIV testing in ED.
- 3.8.4 There were questions about how testing was managed within various services and therefore a resulting action to follow up with various providers to ensure that the NICE guidelines regarding testing are fully implemented in Croydon.

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**CONTACT OFFICER:** Ellen Schwartz, Consultant in Public Health,  
Croydon Council; [Ellen.Schwartz@croydon.gov.uk](mailto:Ellen.Schwartz@croydon.gov.uk)  
020 8726 6000 Ext. 61644

Anita Brako, Public Health Principal,  
Croydon Council; [Anita.Brako@croydon.gov.uk](mailto:Anita.Brako@croydon.gov.uk)  
020 8726 6000 Ext. 88705

**APPENDICES:** None