

SHROPSHIRE HEALTH AND WELLBEING BOARD Report					
Meeting Date	14 th July 2022				
Title of Paper	Health Protection Report				
Reporting Officer	Susan Lloyd, Consultant in Public Health				
Which Joint Health & Wellbeing	Children & Young People	Joined up working	Х		
Strategy priorities	Mental Health	Improving Population Health	Х		
does this paper address? Please	Healthy Weight & Physical Activity	Working with and building strong and vibrant communities			
tick all that apply	Workforce	Reduce inequalities (see below)	Х		

1. Executive Summary

This health protection report to the Health and Wellbeing Board provides an overview of the health protection status of the population of Shropshire. It addresses immunisation and screening. It also provides an overview of the status of communicable, waterborne, foodborne disease Part one is an overview of health protection data and a summary of new risks, part two is an overview of new health protection developments relevant to the system.

2. Recommendations

That the Board note the contents of this report

3. Report

Immunisation Cover Shropshire

Influenza- for the 2021/22 immunisation programme coverage is above the national average in all cohorts. The national flu immunisation programme 2022-23 was published in April.

Child immunisation- programme status is good with uptake greater than or on a par with England. While coverage is good there are areas of low coverage in Shropshire. This is particularly the case with MMR cover where areas with high indices of deprivation have lower cover. Targeted work in these pockets of lower uptake would support high uptake and greater protection.

Polio- there is a national push to ensure all children are fully vaccinated, with opportunistic vaccination being encouraged.

School age- vaccination programme status is lower than expected, this is knock on effect of the pandemic. Catch up with the 19/20 cohort continues during 22/23. The accurate data for school immunisation cover will be available as of August 2022.

Shingles- vaccination cover is lower than the 60% uptake target and the England average for 70-73and 80-year-olds. The 74-79-year-old age groups are above the England average and 60% target. GPs are being encouraged to vaccinate opportunistically. This also presents partners with an opportunity to promote Shingles vaccination. **Pertussis-** vaccination in pregnancy. The aim is 60% coverage. Shropshire is achieving in excess of this cover. SATH have started to deliver pertussis vaccination in maternity services. Covid vaccination continues to be offered to pregnant women, JCVI guidance is awaited by the system.

Covid- 80.6% of the population over age 5 have received at least one dose of the vaccine and 85.4% of eligible population have received first booster. Second boosters for 75 and overs continues and 81% of the eligible population have received this to date, one of the highest in the region.

Screening uptake Shropshire

Antenatal and newborn screening reporting is merged for Shropshire, Telford and Wrekin. The programme is delivered via SaTH. The service has faced some staffing challenges, but these are being addressed.

Cervical screening- the annual uptake shows an increasing trend of uptake. The uptake is higher in the older cohort than the younger cohort. NHSE colleagues are working with practice facilitators to increase uptake, additionally there are currently issue with the turnaround time at the lab. This is being resolved.

Bowel screening - there is no Covid backlog and the service have implemented age extension roll out. Uptake is at a good level, greater than 70% of those offered.

Breast screening - uptake remains a challenge. The current data has not been published. A catchup programme is in place and expected to be completed by September 2022. Recruitment to the service is underway and an additional mobile unit should be operational from July 2022.; NHSE continue to work with providers to resolve these issues.

Diabetic eye screening - was paused in March 2020 but there is no longer a Covid backlog and the service is recovered. Recruitment to the service has been undertaken.

Abdominal Aortic Aneurism (AAA) screening- all eligible individuals 2020/21 have been offered an appointment. The service has recovered with no Covid backlog. Recruitment of additional staff is underway.

Communicable disease

Mumps, Measles, Rubella overall cases of MMR remain low during this quarter Mumps remains low after a rise in 2020.

Chickenpox and Streptococcus A- nationally there has been a rise in chickenpox case numbers but these remain at expected seasonal levels, having been lower than normal during the pandemic. Cases of Invasive Streptococcus A (IGAS) have been below average levels for the last 4 seasons, but a usual seasonal increase has been noted. Severe IGAS presentations in children have not been seen so far this season although remains important for any presentations to be treated promptly with antibiotics.

Linked to child immunity there are international issues including viral Hepatitis,

Scarlet fever cases- there is a rise in reported cases but still not back to 2020 levels notably- in nurseries and primary schools with chickenpox cocirculating in some areas.

Norovirus- cases have risen in comparison to cases in 2020/21

Flu- rising, particularly in care homes, but not beyond expected levels although seeing increase later in the year

Covid- recorded cases are increasing in Shropshire, although changes to the testing programme have reduced the accuracy of reporting cases. There were 523 new cases reported for Shropshire during the 7-day period from 13th June to the 19th June, this compares to 290 cases in the previous reported 7 day period from 6th May to the 12th May. Outbreaks are still occurring in care homes and are being risk managed. The numbers of outbreaks have increased in the last two weeks, with 5 in

our care homes, but this has not adversely affected the number of beds available in system currently although this is being monitored.

Covid variants of interest continue to emerge, the situation is being monitored by WHO and includes UK partners.

Foodborne and waterborne disease

Campylobacter- numbers remain largest reported foodborne bacteria. This is expected and is normal.

Other foodborne and waterborne- case numbers remain low, with the exception of Salmonella. Salmonella cases have risen in the first quarter compared to 2020/21. Numbers of cases remain low.

Monkeypox

Up to 4th July 2022 there have been 1,285 confirmed cases in England. The majority of these 77% were in London residents. Any regional and local cases are managed by UKHSA with Local Authority support to cases and contacts. The local testing pathway for Monkeypox is via Sexual Health services.

Tuberculosis

To provide an effective universal and targeted health protection offer a Shropshire Health Protection Strategy is being written, jointly with Telford and Wrekin. The first draft is on target to be written by July 31st 2022 with a final draft September 2022.

What inequalities	Health inequalities specific to screening and vaccination.			
does this paper				
address?				
Risk assessment	The report identified risks to the population health groups if vaccination			
and opportunities	rates remain below target.			
appraisal				
Financial	There are no financial implications			
implications				
Climate Change	Not applicable			
Appraisal as				
applicable				
Where else has the	System Partnership Boards			
paper been	Voluntary Sector			
presented?	, Other	Health Protection Board		
List of Background Papers (This MUST be completed for all reports, but does not include				
items containing exempt or confidential information)				
Cabinet Member (Portfolio Holder) or your organisational lead e.g., Exec lead or Non-				
Exec/Clinical Lead (List of Council Portfolio holders can be found at this link:				
https://shropshire.gov.uk/committee-services/mgCommitteeDetails.aspx?ID=130)				
Cllr Simon Jones, Portfolio Holder for Adult Social Care and Public Health				
Appendices				
None				