



## SHROPSHIRE HEALTH AND WELLBEING BOARD

### Report

<b>Meeting Date</b>	<b>18<sup>th</sup> April 2024</b>			
<b>Title of report</b>	<b>Health Protection Update</b>			
<b>This report is for</b> (You will have been advised which applies)	Discussion and agreement of recommendations	Approval of recommendations (With discussion by exception)	Information only (No recommendations)	<b>X</b>
<b>Reporting Officer &amp; email</b>	Dr Susan Lloyd, Consultant in Public Health			
<b>Which Joint Health &amp; Wellbeing Strategy priorities does this report address? Please tick all that apply</b>	Children & Young People		Joined up working	<b>X</b>
	Mental Health		Improving Population Health	<b>X</b>
	Healthy Weight & Physical Activity		Working with and building strong and vibrant communities	<b>X</b>
	Workforce		Reduce inequalities (see below)	<b>X</b>
<b>What inequalities does this report address?</b>	Health Inequalities specific to screening and vaccination.			

#### Report content

- 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 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.

- Recommendations (Not required for 'information only' reports)**

- Report**

#### Part One

- Overview of health protection data and summary of risks**

#### 1.1 - Immunisation Cover Shropshire

- Immunisations (Childhood)

There is a continued national and local push on Measles, Mumps and Rubella (MMR). There has been some fantastic work on contact with GPs regarding those with the lowest MMR uptake and what could be done to improve these figures. Opportunistic vaccinations to individuals who have not received 2 doses of MMR are being provided by school nursing teams and GPs with good success.

All age groups are being encouraged to ensure that they have received 2 doses of MMR. Communications have gone out through organisational staff newsletters and websites and through social media for the general public. Further information is provided below.

There is increased attention on Pertussis vaccination uptake following a national increase in cases.

A reminder for mums-to-be to get protected against whooping cough so that their young baby has protection from birth against this serious disease has gone out as well as information to

ask their midwife if they are unsure. UKHSA is also urging parents to check that their children are vaccinated against whooping cough, which is offered to all infants at 8, 12 and 16 weeks of age (as part of the 6-in-1 combination vaccine) with an additional dose included in the pre-school booster vaccine.

- Immunisations (Adolescent)

The HPV vaccine is changing to one dose for eligible adolescents. Those that have already received one dose (eligible academic year 2022 to 2023), will be considered vaccinated. The programme continues through the schools immunisation service [SAIS]

## 1.2 - Autumn/Winter FLU/COVID-19 Vaccination Campaign

- Flu uptake - we are at the national average for an ICB level.
- Covid vaccinations are slightly above the national average, possibly due to when the vaccines became available for flu, as flu delivery is different to Covid. Better uptake using a model providing variety of access to the vaccine.
- Spring programme – We are currently expecting this to be for the over 75s and those who are immuno-suppressed. Current contracts have been extended through to the end of August. There is no flu campaign, so no double vaccination offer in place.
- Further discussions needed regarding communication and engagement as lower uptake is not purely an issue of access. Joint working ongoing with review walk-in centre locations as part of improving equity.

## 1.3 - Screening uptake Shropshire

- **Breast Screening** – all services should have brought in text message reminders. There are currently issues with SaTH as they are having a large IT systems change and do not have capacity to include breast testing this year, so this may be 2025. There is ongoing work between service, local authority and other system partners.
- **Bowel Screening** – everything is in standard, there is a conversation of them becoming more self-sufficient, as it is a fragile service. Working with different colleagues and the system will be a focus moving forward.
- **Ophthalmology diabetic eye screening** – issue in progress with SaTH and have put some clinics on and stabilised the high-grade referrals, but low-grade referrals still breaching and at high rates. SaTH are increasingly talking with MPFT and NHS England have some system meetings - it is hoped the situation is now improving.

## 1.4 - Communicable disease

- **Flu** – Influenza activity decreased across most indicators. The flu vaccination programme closes on 31 March 2024.
- **Covid** - recorded cases are decreasing in Shropshire due to limited testing. Outbreaks are still occurring in care homes and are being risk managed.
- **Tuberculosis** - tuberculosis is the focus for review in-line with the Shropshire Health Protection Strategy 2023 further detail is provided below. Recent surveillance was completed with a mobile TB screening unit which attended the migrant population. Follow up will be as part of the task and finish group.
- **Monkeypox** - cases nationally remain very low, but we are not complacent. There are currently no local implications.
- **Group A Streptococcus** - (GAS) is a bacterium which can colonise the throat and skin. Since the last report as is usual for this time of year, we are beginning to see increased reports of Scarlet fever in school settings.
- **Avian Flu - 2023/24** - The latest update confirms the continued low level of infected premises and wild bird detections in the UK, the reduction in the assessed level of risk in wild birds to medium, and also provides some commentary on what is happening in Europe which may in turn impact the UK although as the period of mass migrations is pretty much over now. There are no current cases in the Shropshire area. There have been no further reports of AI in non-avian mammalian species in the UK.

- An Avian Influenza pathway for swabbing and prophylaxis for outbreaks has been approved by the ICB. The gap due to testing of symptomatic individuals has been added and has been escalated.
- **Foodborne and waterborne disease** – Campylobacter - numbers remain largest reported and most common foodborne bacteria. Numbers of cases of Campylobacter have risen.
- **Other foodborne and waterborne** - case numbers have decreased slightly. Since the start of 2024, 0 cases of E Coli 0157 have been reported. We have had a cluster of Legionella cases, but no links made.
- **Norovirus** - Nationally cases are increasing, and we continue to see local outbreaks of suspected Norovirus both within care settings and the community.

## Part Two

- **Health Protection Developments relevant to the system**

### 2.1 – Measles

To mitigate against the impact of Measles in Shropshire, **STW** partners (Shropshire, Telford & Wrekin Council, ICB) are working jointly with **UKHSA** to ensure a pathway is in place to protect vulnerable individuals who are unvaccinated or under vaccinated, a vaccine catch up programme is also in place. Staff who have not been vaccinated are also being followed up on and offered.

### 2.2 -Tuberculosis

Discussions are ongoing to address the provision of TB services in Shropshire, Telford and Wrekin (**STW**) including a focus on migrant population. A network meeting STW, will be followed by a separate meeting to discuss TB service specification. Ongoing monitoring and review is now a standing item on the **HPQA** Board Agenda.

### 2.3 - Whooping Cough (Pertussis)

A consistent whole system approach with appropriate communications have been prepared. Actions are being followed up across the wider system and local communications have already been circulated to increase uptake of maternal and childhood immunisations. Uptake of the whooping cough vaccine has fallen in recent years, as have all maternal vaccinations. It is essential that pregnant women get vaccinated and ensure that infants receive their vaccinations at 8, 12 and 16 weeks of age. We continue to work with our system partners to support communications.

### 2.4 - Communications to the wider public

A press release, relating to visits involving animal contact has been sent to raise awareness of good hygiene with many attractions opening over the Easter period.

<b>Risk assessment and opportunities appraisal</b> (NB This will include the following: Risk Management, Human Rights, Equalities, Community, Environmental consequences and other Consultation)	N/A
<b>Financial implications</b> (Any financial implications of note)	<b>There are no financial implications</b>
<b>Climate Change Appraisal as applicable</b>	N/A

<b>Where else has the paper been presented?</b>	System Partnership Boards	
	Voluntary Sector	
	Other	<b>Health Protection Quality Assurance Board (HPQA)</b>
<b>List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)</b>		
<b>Cabinet Member (Portfolio Holder)</b> Portfolio holders can be found <a href="#">here</a> or your organisational lead e.g., Exec lead or Non-Exec/Clinical Lead		
<b>Cllr Cecilia Motley</b> – <i>Portfolio Holder for Adult Social Care, Public Health &amp; Communities</i> <b>Rachel Robinson</b> – <i>Executive Director, Health, Wellbeing and Prevention</i>		
<b>Appendices</b> (Please include as appropriate)		