



SHROPSHIRE HEALTH AND WELLBEING BOARD									
Report									
Meeting Date	19 th June 2025								
Title of report	Health Protection Update								
This report is for (You will have been advised which applies)	Discussion and agreement of recommendations	rec (W	Approval of recommendations (With discussion by exception)		Information only (No recommendations)				
Reporting Officer & email	Damilola Agbato, Public Health Principal Damilola.agbato@shropshire.gov.uk								
Which Joint Health & Wellbeing Strategy	Children & Young People		Joined up work	king	1	X			
priorities does this	Mental Health		Improving Population Health X						
report address? Please tick all that apply	Healthy Weight & Physical Activity		Working with and building strong and vibrant communities						
1	Workforce		Reduce inequalities (see below)			X			
What inequalities does this report address?	Health Inequalities specific to screening and vaccination.								

Report content - Please expand content under these headings or attach your report ensuring the three headings are included.

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 provides an overview of the status of communicable, waterborne, foodborne disease.

Part One- Overview of health protection data and a summary of new risks,

Part Two- Overview of new health protection developments relevant to the system.

Part Three- Overview of sexual health

2. Recommendations (Not required for 'information only' reports)

- a. Promote childhood vaccine uptake
- b. Promote uptake of seasonal vaccines
- c. Promote contraception and regular STI testing

3. Report

Part One

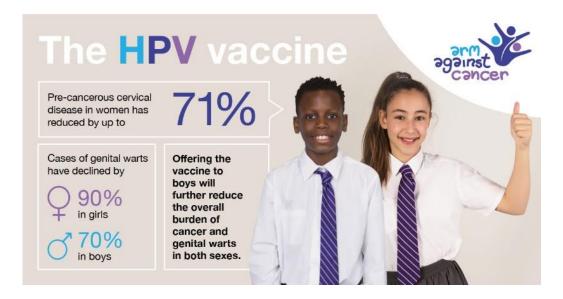
Overview of health protection data and summary of risks

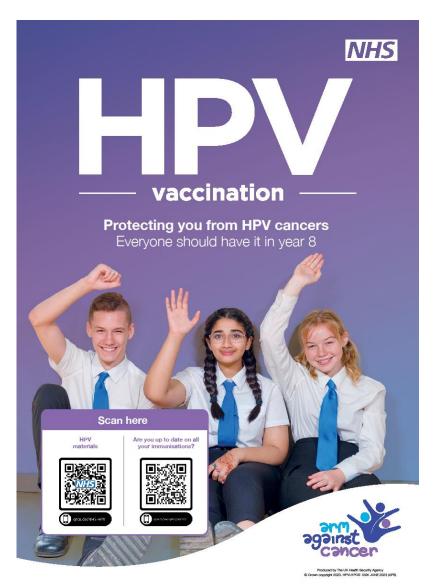
1.1 - Immunisation Coverage Shropshire

Immunisations (Childhood)

There is a continued national and local push to improve uptake of childhood vaccines. Shropshire, Telford & Wrekin were awarded a £100k grant for a project to increase the uptake of HPV and MMR among various communities through targeted education and outreach initiatives. The projects' goal is to increase health awareness and consent for vaccination within these communities. There has been some good work done to identify the schools with the lowest percentage uptake and targeted vaccine education has been delivered to pupils in Years 8 to 11. Vaccine education sessions are also planned for different community groups across Shropshire.

HPV vaccination coverage for 12 to 13year-olds is 79.1%. There is wide variation in uptake across the county. MMR vaccine first dose coverage is 93.5% at 24 months and 95.5% at 5years. There is some variation in uptake across the county. Childhood vaccination coverage statistics.





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

- 4. Flu uptake Shropshire has higher vaccination uptake percentages compared to the West Midlands and England averages across all age groups.
- 5. The RSV vaccine was introduced as part of the winter vaccination programme to protect vulnerable individuals including the elderly and pregnant women.
- 6. Covid vaccinations uptake for the STW ICB are slightly above the regional average. The spring programme is currently ongoing for eligible groups
- 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** SMS Text messaging: is now in place for breast screening appointment reminders, Final health equity audit received by NHSE. As of November 2024, the Breast Screening Round length is reported at 97.7%% and the service is performing against all programme standards with no reported concerns. Coverage is 74.3% (latest date June 2024).
- **Bowel Screening** Commenced age extension in March, Programme have confirmed that they have recruited new SSP Posts, they are currently going through a local induction programme. Bowel Screening Faster Diagnosis Standard (FDS) is reported as 51.8% within the 28-day standard as of November 2024.

1.4 - Communicable disease

- 8. **Flu** Influenza like illness and Covid-19 activity decreased across most indicators for the West Midlands.
- 9. **Covid** recorded cases are decreasing in Shropshire due to limited testing. Outbreaks are still occurring in care homes and are being risk managed.
- 10. **Tuberculosis** There has been a 13% increase in TB cases nationally.
- 11. **Mpox** Nationally there were 9 confirmed cases of Clade 1b Mpox between October 2024 and March 2025. All contacts were followed up by UKHSA and partner organisations. There have been no known cases of community transmission in the UK of Clade1b Mpox. Locally, the infectious disease rapid response group has agreed pathways for testing and results, PPE, Isolation, and management of children and vulnerable individuals. Planning is ongoing to assure a vaccination pathway and prison health response.
- 12. **Avian Flu –** There was an outbreak of H5N1 Avian Influenza at a farm in Shropshire. The UK Health Security Agency (UKHSA) and the Animal and Plant Health Agency (APHA) were promptly involved in managing the outbreak, including culling and safe disposal of the dead birds.
 - There has also been one case of avian influenza in the West Midlands that was later confirmed as H5.
- 13. **Foodborne and waterborne disease** Campylobacter numbers remain largest reported and most common foodborne bacteria. Numbers of cases of Campylobacter have reduced slightly. Food hygiene broad compliance continues to remain high at 97.7%
- 14. Other foodborne and waterborne case numbers have remained largely similar to previous years, with a slight decrease in 2024.
- 15. **Norovirus** Nationally cases are increasing, and we continue to see local outbreaks of suspected Norovirus both within care settings and the community.

16. Health Protection Developments relevant to the system

2.1 - Measles

An increase in the number Measles cases has been noted for the West Midlands region. To mitigate against the impact of Measles in Shropshire, **STW** partners (Shropshire, Telford & Wrekin Council, ICB) are working jointly to ensure a pathway is in place to rapidly respond to any cases, communications have also been sent out to schools targeting unvaccinated and under vaccinated individuals.

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 **Health Protection Quality Assurance** Board Agenda.

2.3 - Communications to the wider public

- 18. 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 and other holiday periods. Wider communication messages focus on the preparation for summer extreme weather events, vaccinations and the UKHSA tick awareness campaign 2025.
- 19. Communications to education setting to update information on Chickenpox and Measles.

Part Three

Sexual and reproductive health

- **3.1** Sexual and reproductive health services continue to be delivered to residents of Shropshire through:
 - Shropshire Integrated Sexual Health Services Open Clinic
 - Online Testing for people aged 16 and over.
 - GPs and Pharmacies: provide Chlamydia testing and treatment, Long-Acting Reversible Contraception (LARC), Emergency Hormonal Contraception (EHC), Chlamydia/Gonorrhoea testing, Chlamydia treatment, C-Card registration and issue of condoms.
 - School nurses, Colleges, and Women's Hubs.

3.2 Sexually Transmitted Infections (STIs):

- The rate of STI diagnosis for Shropshire is at or lower than the rates for England and the West Midlands.
- There has been a steep rise in Syphilis cases in the West Midlands, and a national rise in gonorrhoea cases, though these have not been reflected locally.
- In 2023, the rate of HIV testing among residents of Shropshire was lower than that of England overall. The prevalence of diagnosed HIV was 1.0 per 1,000 people aged 15 to 59, which was lower than the rate of 2.4 in England.
- The percentage of HIV diagnoses made at a late stage of infection amongst those first diagnosed in the UK was 50.0%, compared to 43.5% in England. We have an action to reduce late-stage HIV diagnosis by enhancing testing.

3.3 Teenage pregnancy and abortion

- In 2021, the under-18s conception rate per 1,000 females aged 15 to 17 years in Shropshire was 12.5, similar to the rate of 13.1 per 1,000 in England.
- The total abortion rate per 1,000 women aged 15 to 44 years in 2021 was 17.7 in Shropshire, lower than the England rate of 19.2 per 1,000. Of those women under 25 years who had an abortion in 2021 the proportion who had previously had an abortion was 29.6% similar to 29.7% in England.

3.4 Contraception

• The total rate of long-acting reversible contraception (LARC) (excluding injections) prescribed in primary care, specialist and non-specialist sexual health services (SHS) per 1,000 women aged 15 to 44 years living in Shropshire was 57.6 in 2023, higher than the rate of 43.5 per 1,000 women in England. The rate prescribed in primary care was 52.0 in Shropshire, higher than the rate of 25.6 in England. The rate prescribed in the other settings was 5.6 in Shropshire, lower than the rate of 18.0 in England.

Sexual health developments

• NHS England will commence the delivery of routine mpox and opportunistic gonorrhoea vaccination through sexual health services providers from 1st of August 2025.

There are no financial i	mnlications						
	mphications						
System Partnership							
Boards							
Voluntary Sector							
Other	Health Protection Quality Assurance Board (HPQA)						
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							
Cllr Bernie Bentick – Portfolio Holder for Health and Public Protection							
Rachel Robinson – Executive Director, Health, Wellbeing and Prevention							
Appendices							
	Boards Voluntary Sector Other This MUST be completed confidential information) older) or your organisation Holder for Health and Pul						