



Doncaster Council

1st October 2020

To the Chair and Members of the

HEALTH & ADULT SOCIAL CARE OVERVIEW & SCRUTINY PANEL

HEALTH PROTECTION ASSURANCE ANNUAL REPORT FOR 2019/20

Relevant Cabinet Member(s)	Wards Affected	Key Decision
Councillor Nigel Ball Councillor Rachael Blake	All	Yes

EXECUTIVE SUMMARY

1. This is an updated covering report to which is appended the annual report on health protection assurance in Doncaster covering the financial year up to 2019/20 (Appendix A). Consideration of the annual report by this Panel on 19th March 2020 was delayed due to COVID-19 and lockdown.
2. There has continued to be sustained progress in ensuring that the health protection assurance system in Doncaster is robust, safe, effective, and meets the statutory duty placed on local government to protect the health of the people of Doncaster. This has been achieved through effective health protection governance structures and service plans.
3. This report focuses on the following key areas of health protection:
 - Immunisation and Screening programme
 - Air quality
 - Emergency preparedness resilience and response (EPRR): Flood and coronavirus (COVID-19)
4. Panel members are asked to give consideration to the updated information in this covering report as well as to the 19/20 annual report (Appendix A). This appended report gives recommendations to the Overview and Scrutiny Panel; it provides relevant background information; and outlines the progress made in the previous year.

EXEMPT INFORMATION

5. This report is not exempt

6. RECOMMENDATIONS

The Scrutiny Panel is asked give consideration to:

- The ongoing work with local partners in addressing immunisation update rates in Doncaster, in particular flu vaccinations and MMR;
- The progress made, and efforts to address the challenges in relation screening programmes;
- Ongoing work to tackle air quality in Doncaster;
- The joint work in response to the flooding in Doncaster in November 2019; and
- The ongoing response and recovery work related to the Coronavirus (COVID-19) pandemic.

WHAT DOES THIS MEAN FOR THE CITIZENS OF DONCASTER?

7. There is an effective system in place to protect the health of the people of Doncaster. Health Protection outcomes in general are very good. There are identified areas of challenges that are being addressed.
8. COVID-19 continues to have a significant impact on all aspects of life for the people of Doncaster. Since March 2020, we have seen a significant reduction in incident of the disease, hospital admissions and deaths from COVID-19. The citizens of Doncaster still needs to remain vigilant to measures aimed at controlling the spread of the virus in order to protect the health of all its citizens.

BACKGROUND

9. Please refer to Appendix A (attached) for background papers for members' attention and consideration listed in the 19/20 Health Protection Annual Report. This report was deferred in March 2020 due to the impacts of COVID.

(A) Emergency Preparedness, Resilience and Response: update

1. Coronavirus (COVID-19) since March 2020

10. On 31 December 2019, the World Health Organization (WHO) was informed of a cluster of cases of pneumonia of unknown cause detected in Wuhan City, Hubei Province, China.
11. On 9 January 2020 WHO announced that a new coronavirus had been detected in patient samples in Wuhan. This virus was referred to as Novel Coronavirus 2019-nCoV and is now named COVID-19.

National Approach:

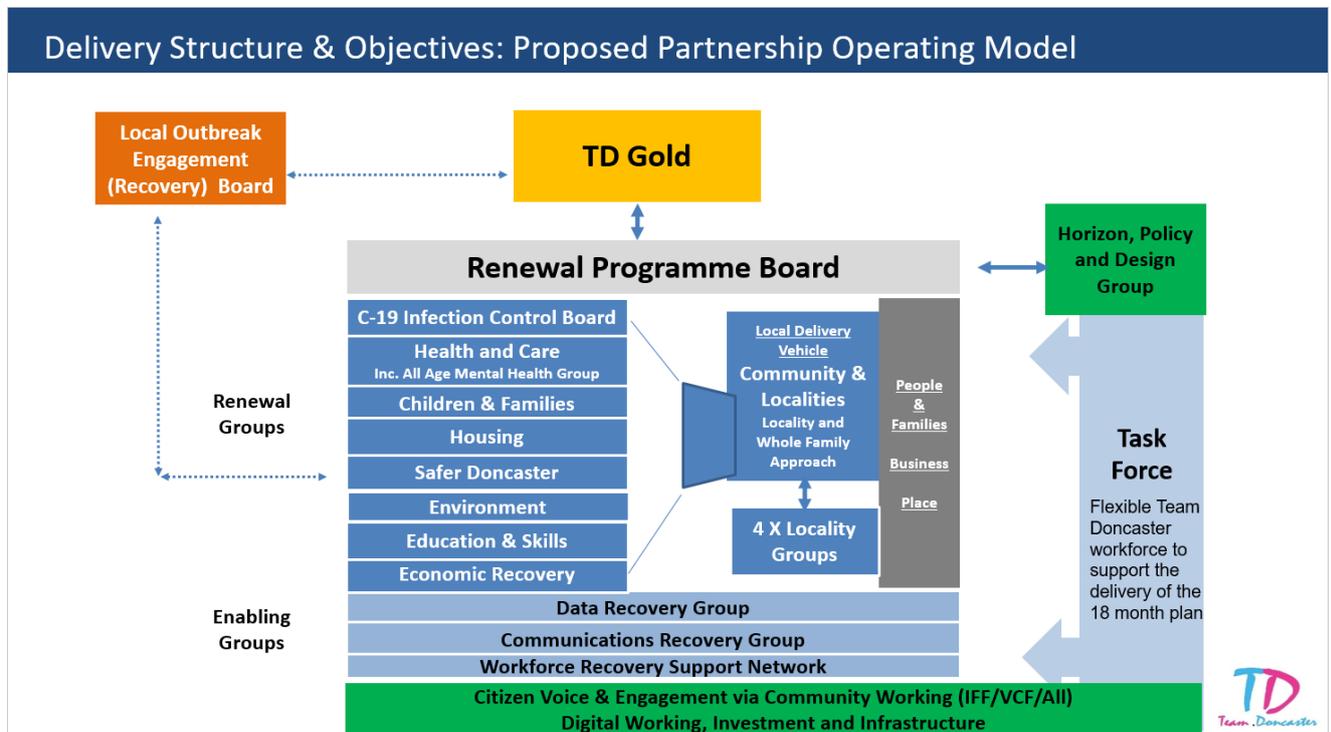
12. The public health approach has focused largely on protective measures of containment (for example through testing and contact tracing, and restrictions such as lockdown), social distancing, and hygiene. On 23 March 2020, the UK entered a period of 'lockdown', with stark reductions in movement, interaction, leisure, and travel.
13. These measures were central to the national response intended to 'flatten the curve' and ensure that demand for health care among people who were seriously ill with COVID-19 did not breach hospital capacity. By doing so, the actual number of cases requiring hospital care was lower than the scenarios modelled on the basis of few or no protective measures. This in turn helped to keep the number of deaths below worst-case scenario models and to slow the spread and impact of COVID-19.
14. Pillar 1 and Pillar 2 are different kinds of data taken from coronavirus testing. Each pillar comes with specific coverage goals.
 - Pillar 1: NHS testing accessible through local hospital for patients and staff;
 - Pillar 2: national testing system for the public such as the one at Doncaster Sheffield Airport
15. Pillar 1 testing is processed in Public Health England (PHE) labs and NHS hospital settings.
16. A national NHS Test and Trace programme has been established to work on the Pillar 2 test response, share test results, and trace close contact of those testing positive for COVID-19. This national programme focuses on simple incidents of infection e.g. individuals and households.
17. By tracing close contacts efficiently and effectively this programme should inform close contacts of people with COVID-19 to isolate even before they are infectious, and therefore break the chain of infection.

Regional Approach:

18. At the Yorkshire and the Humber level PHE supports local authorities across the region by offering appropriate advice and assistance in the management of COVID, including outbreaks in various settings. PHE area teams and local authorities jointly manage contact tracing in more complex settings including schools, care homes, and workplaces such as meat processing plants.
19. Sub-regionally, the South Yorkshire Local Resilience Forum has continued to hold regular strategic meetings with all multi-agency partners throughout the pandemic. This approach will continue and a number of sub-groups have been established to focus on specific areas of this work.

Local approach:

20. The Tactical Coordination Group was stood down formally on 25th June 2020 and replaced with the COVID-19 Control Board to reflect the shift into recovery in some areas with the ongoing focus on managing cases, clusters and outbreaks of COVID-19. The structure of this partnership operating model is detailed below:



21. The Doncaster COVID-19 Control Board was therefore established to protect the health of the population of Doncaster by preventing, identifying and responding to Outbreaks of COVID-19.
22. The Doncaster COVID-19 Control Board membership is multi-disciplinary including national, local authority, NHS, and voluntary sector health and social care representatives, educational institutions, and the police.
23. The role of the Doncaster COVID-19 Oversight board is to:
1. Provide oversight, assurance and scrutiny of
 - a. Plans to prevent and manage outbreaks of COVID-19 in Doncaster,
 - b. Actions taken to prevent and manage outbreaks and their outcomes;
 2. Engage and communicate with residents and stakeholders; and
 3. Monitor levels of infection and assure the Doncaster people that the Control Plan has been developed and is being delivered appropriately.

24. Further detail on the role and membership of the COVID-19 oversight board and the COVID control board can be found in the COVID-19 outbreak control plan summary version: <https://www.doncaster.gov.uk/services/health-wellbeing/coronavirus-covid-19>.
25. The situation (including cases, clusters and outbreaks) continues to be monitored and the COVID Outbreak Control Plan and associated planning and response framework is reviewed and updated on a regular basis to reflect any changes in guidance and/or learning from incidents.
26. Local, regional, and national efforts to control the spread and health impacts of COVID-19 have helped to drive down infections, hospitalisations, and deaths in Doncaster since spring 2020. As of 1 April 2020, 206 COVID-related deaths has been recorded. As of 21 August 2020 this number was 278, demonstrating significantly fewer COVID-related deaths in the months between April and August than there were in March and August alone.
27. The local situation will continue to be monitored closely for any evidence of resurgence of COVID-19 and those groups managing outbreak control will continue to anticipate the need for and deliver any response as appropriate.

(B) Plans for 20/21 Health Protection Annual Report

28. It is intended that the forthcoming Health Protection Annual Report for 2020/21 will address:
 - COVID-19 health protection data and insight
 - Routine health protection reporting including performance on outcome indicators such as immunisation and screening, suicide, and tobacco control against benchmarks
 - Achievements and activities to improve health protection outcomes
 - Any health protection matters arising
 - Implications for citizens of Doncaster
 - Recommendations

OPTIONS CONSIDERED

29. **Option 1:** Support the recommendations proposed so as to continue with the work to protect the health of the people of Doncaster.

Option 2: Do nothing, which puts the health of the people of Doncaster at increased risk.

REASONS FOR RECOMMENDED OPTIONS

30. The reason for the recommended option is to continue with the work to protect the health of the people of Doncaster.

IMPACT ON THE COUNCIL'S KEY PRIORITIES

31.

	Outcomes	Implications
	<p>Doncaster Working: Our vision is for more people to be able to pursue their ambitions through work that gives them and Doncaster a brighter and prosperous future;</p> <ul style="list-style-type: none"> • Better access to good fulfilling work • Doncaster businesses are supported to flourish • Inward Investment 	<p>Health is a resource for life, and economic productivity. Healthy people contribute to the economy, and health protection functions aims to protect the health of the population, including those who are current and potential workforce.</p>
	<p>Doncaster Living: Our vision is for Doncaster's people to live in a borough that is vibrant and full of opportunity, where people enjoy spending time;</p> <ul style="list-style-type: none"> • The town centres are the beating heart of Doncaster • More people can live in a good quality, affordable home • Healthy and Vibrant Communities through Physical Activity and Sport • Everyone takes responsibility for keeping Doncaster Clean • Building on our cultural, artistic and sporting heritage 	<p>By addressing air quality, we are encouraging active travel therefore contributing to an increase in physical activity levels in the borough.</p>
	<p>Doncaster Learning: Our vision is for learning that prepares all children, young people and adults for a life that is fulfilling;</p> <ul style="list-style-type: none"> • Every child has life-changing learning experiences within and beyond school • Many more great teachers work in Doncaster Schools that are good or better • Learning in Doncaster prepares young people for the world of work 	<p>Good health contributes to better children's education and learning. The actions set out in this report help to protect and promote the health of children in Doncaster, thus enabling them to learn and thrive.</p>

	Outcomes	Implications
	<p>Doncaster Caring: Our vision is for a borough that cares together for its most vulnerable residents;</p> <ul style="list-style-type: none"> • Children have the best start in life • Vulnerable families and individuals have support from someone they trust • Older people can live well and independently in their own homes 	<p>Health protection is a means of keeping our population safe both from certain diseases that are preventable by vaccination (e.g. MMR) and from conditions that could be identified early by screening so that appropriate treatment can be given. Health protection is also about protecting the health of our people from risks and hazards related to major emergencies and incidents.</p> <p>There has been inequality in COVID-19 health impacts and people with certain health vulnerabilities were shielding until 1 August. This may be reinstated if cases rise again and support for these citizens may be required.</p> <p>The pandemic has led to the cancellation or delay of a range of medical activity including elective surgery, out patients, screening, and diagnostics. There have also been changes to primary care including dentistry. Health and care settings have altered their methods of delivery to manage COVID-19 risk, including fewer face-to-face visits. These changes could lead to later intervention and poorer outcomes for some patients who miss screening, routine vaccination, etc.</p> <p>There have been increases in mental health concerns.</p> <p>The impact of COVID-19 has been disproportionate across different groups and responses will need to account for and mitigate this wherever</p>

	Outcomes	Implications
		possible. This has been highlighted in the recent PHE report ' Disparities in the risk and outcomes of COVID-19 ', which highlighted disparity of impact in relation to e.g. age, ethnicity, sex, comorbidity, and occupation.
	<p>Connected Council:</p> <ul style="list-style-type: none"> • A modern, efficient and flexible workforce • Modern, accessible customer interactions • Operating within our resources and delivering value for money • A co-ordinated, whole person, whole life focus on the needs and aspirations of residents • Building community resilience and self-reliance by connecting community assets and strengths • Working with our partners and residents to provide effective leadership and governance 	Health Protection contributes to healthy families and their ability to thrive and realise their full potentials.

RISKS AND ASSUMPTIONS

32. The Health Protection Assurance system in Doncaster is a risk management system. The areas for development identified in this report will further strengthen Doncaster Council's ability to manage health protection risks. Risks are reviewed by Health Protection Assurance Group, and reported to Public Health Leadership Team on quarterly basis.

LEGAL IMPLICATIONS [NC: 06/03/2020]

33. The legal implications are set out in Appendix A

FINANCIAL IMPLICATIONS (Officer Initials: HR Date: 06/03/20)

34. The financial implications are set out in Appendix A

HUMAN RESOURCES IMPLICATION (Officer initials EL Date 06/03/20)

35. The HR implications are set out in Appendix A

TECHNOLOGY IMPLICATIONS (Officers initials PW Date 06/03/20)

36. The technology implications are set out in Appendix A

HEALTH IMPLICATIONS (Officer initials: VJ; Date: 14/09/2020)

37. Health Protection, which is one of the three pillars of public health, has significant implication of the health of the people of Doncaster. Ensuring local health protection system are in place and working closely to address health protection challenges is important, while continuously reviewing the prevailing risks and monitoring progress. Public Health Assurance Group provides the system for assurance, including monitoring health protection status in the borough.

COVID-19 continues to affect significantly the health of the people of Doncaster in terms of deaths, hospital admissions, and ill health as well as on health inequalities.

EQUALITY IMPLICATIONS

38. These are set out in Appendix A

CONSULTATION

39. This is set out in Appendix A

BACKGROUND PAPERS

Appendix 1 of Appendix A provides additional information on air quality status and activities in Doncaster.

GLOSSARY

CCG	Clinical Commissioning Group
COVID-19	Coronavirus
DBTHFT	Doncaster Bassetlaw Teaching Hospital NHS Foundation Trust
EPRR	Emergency Preparedness Resilience and Response
FIT	Faecal Immunochemical Test
JCVI	Joint Committee on Vaccination and Immunisation
LAIV	Live Attenuated Influenza Vaccine
LPC	Local Pharmaceutical Committee
MMR	Measles Mumps and Rubella
PCN	Primary Care Network
PGD	Patients Group Directives
PHE	Public Health England
SIT	Screening Immunisation Team
SY & B SIOG	South Yorkshire and Bassetlaw Screening and Immunisation Overview Group
WHO	World Health Organisation

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