

**Title: Devon & Cornwall Health Protection  
Committee Annual Report 2021/22**

**Wards Affected: All**

**To: Health and Wellbeing Board**

**On: 17 March 2022**

**Contact: Julia Chisnell, Consultant in  
Public Health**

**Telephone: 07584 175711**

**Email: [Julia.Chisnell@torbay.gov.uk](mailto:Julia.Chisnell@torbay.gov.uk)**

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## **1. Purpose**

To present the annual assurance report of the Devon and Cornwall Health Protection Committee 2021/22 for information.

## **2. Recommendation**

Members are asked to note the annual assurance report.

## **3. Supporting Information**

### ***Background to the report***

Devon, Plymouth, Torbay and Cornwall Local Authority Public Health teams are partners in the Devon and Cornwall Health Protection Committee which provides assurance that health protection functions are being effectively discharged across the Peninsula.

The Committee prepares an annual assurance report for the constituent Health and Wellbeing Boards, detailing progress against statutory duties and strategic priorities during the previous year.

The report considers the following key domains of Health Protection:

- Communicable disease control and environmental hazards
- Immunisation and screening
- Health care associated infections and antimicrobial resistance
- Emergency planning and response.

The report sets out for each of these domains:

- Assurance arrangements

- Performance and activity during 2020/21
- Actions taken against health protection priorities identified for 2020/21
- Priorities for the current year.

The health protection agenda in 2020/21 was dominated by the COVID-19 pandemic. This report therefore focuses on the response to the pandemic, the impact on wider health protection activity, and work to recover screening and immunisation coverage for our population.

There is a delay between the reporting period and the preparation of the report due to the timetable for publication of annual screening and immunisation performance. Because of this time lag, this year's report contains some information in relation to activities undertaken during 2021/22, to provide a more timely picture of progress.

The format of the report also differs from previous years, with the highlighting of local challenges, innovation and good practice in relation to the pandemic response.

### ***Key points from the report for Torbay***

#### *Management of COVID-19 outbreaks*

The report includes numbers of outbreak by setting type dealt with by UKHSA. Numbers for education settings are comparatively low for Torbay because the Torbay Council Public Health and Education teams dealt with education outbreaks locally in partnership with Torbay early years providers and schools. Workplace settings were also managed locally. Care settings were managed in collaboration with UKHSA but with local teams taking a far more proactive and supportive role than previously. Rates of non-COVID infectious diseases reported to UKHSA were low during the pandemic.

#### *Local areas of innovation and good practice*

COVID-19 testing was coordinated peninsula wide, with Public Health teams managing targeted community testing and outbreak testing at local level. Strong partnership working enabled all areas to support and supplement the national testing programme with local arrangements to speed and increase access during outbreaks in higher risk settings.

COVID-19 and flu vaccination were coordinated under a Devonwide seasonal vaccination programme with local targeting of areas of low uptake and groups with a lack of 'vaccine confidence'.

The new Devonwide Infection Management System was central to the COVID-19 response, working locally as part of a Torbay multi-agency team supporting care homes throughout the pandemic. An especial innovation was the development of 'virtual infection prevention and control walkrounds' where the team walked round a care home via iPad, advising on cleaning, PPE, isolation and cohorting.

The Torbay care homes support team also worked with homes and other partners including Healthwatch, to promote innovative ways for friends and families to keep in touch during lockdown and outbreaks.

Local Outbreak Engagement Boards in all areas helped local authorities to keep in touch with key stakeholders, with Torbay also setting up a 'Torbay Community COVID Champions network' which was valuable in shaping communications, and sharing key messages with communities.

### *Screening & Immunisation programmes*

All programmes were affected by the pandemic, but all have made strenuous efforts to recover and all are due to be back on track by July 2022 if they have not already achieved this. Coverage figures are reported annually almost a year in arrears so will not fully reflect the recovery.

Lower uptake for Torbay compared with neighbouring authorities, or national standard or averages, is reported for:

- Shingles vaccination (the programme has been age-extended to enable more people to take up the offer)
- Flu vaccination in 65+
- Cervical screening (although gradually improving year on year)
- Childhood vaccination uptake remains overall fairly good but MMR (measles mumps and rubella) uptake remains a national and local priority in order to maintain safe levels
- School age vaccinations were significantly affected by COVID-19 but the commissioner and provider of the service have comprehensive plans in place to recover by the Summer of this year.

### *Healthcare associated infections*

This section covers infections which are acquired through contact with health services and also frequently difficult to treat: MRSA, MSSA, C.difficile and E.coli. Reducing the incidence of E.coli is a priority for Devon where case rates are particularly high. This work is part of the Anti-Microbial Resistance programme seeking to prevent and tackle those infections which are resistance to anti-virals, antibiotics, or antifungal treatments. Restarting this programme is a key priority for Devon and also Torbay as we move on from the acute phase of the pandemic and need to maintain the important learning around infection prevention and control. Handwashing and ventilation are messages for the long term, not just for COVID.

### *Health Protection Committee Priority areas*

Peninsula wide priorities for action in 2020/21 have been:

- 1 COVID-19 response including vaccination and targeting areas of inequality
- 2 Recovery of screening and immunisation delivery, coverage and uptake

- 3 Strengthening infection prevention and control throughout the community
- 4 Reducing healthcare associated infections and tackling antimicrobial resistance across
- 5 Developing health protection pathways for migrant and homeless communities
- 6 Maintaining a focus on the climate emergency.

Progress against these will be included in the next annual assurance report.

#### **4. Relationship to Joint Strategic Needs Assessment**

The health protection agenda is aligned to areas of inequality identified in the JSNA. All areas of action are designed to protect and support individuals and settings at greatest need or risk.

#### **5. Relationship to Joint Health and Wellbeing Strategy**

Health protection is inextricably linked to wider health and wellbeing. Actions to prevent and respond to infectious disease are a key part of delivering improvements in healthy life expectancy.

#### **6. Implications for future iterations of the Joint Strategic Needs Assessment and/or Joint Health and Wellbeing Strategy**

Following the pandemic, it is clear that health protection needs to be fully integrated into place based working at community level to help address the causes and determinants of ill health.

### **Appendices**

A copy of the assurance report