

READING HEALTH AND WELLBEING BOARD

Date of Meeting	12 July 2024
Title	Public Health Protection Report
Purpose of the report	To note the report for information
Report author	Marisa Alexis
Job title	Public Health Principal
Organisation	Reading Borough Council
Recommendations	1. That the contents of this report are noted.

1. Executive Summary

This report is being brought to the board as an update on Health Protection activities in Reading. At the last Health and Wellbeing board, it was agreed that the Berkshire West Health Protection & Resilience Partnership board would be established and there would be regular reports from it to this board. Developing the governance structure took precedence and this was detailed in the report brought to this board in March 2023 on the Establishment of a Berkshire West Health Protection & Resilience Partnership Board (West Berkshire, Wokingham, Reading). However, the reporting arrangements are yet to be finalised. While these are being determined, the following is a report on Health Protection activities for Reading.

Health Protection is one of the principal domains of Public Health. It aims to prevent, assess, and mitigate risks and threats to human health at population level. These risks come from communicable diseases, cyber threats and exposure to environmental hazards such as chemicals and radiation. The effective delivery of local Health Protection services at local government level requires close partnership working between UK Health Security Agency, Integrated Care System, Voluntary services and other key stakeholders.

Core health protection functions are expected of local health systems. The purpose of this report is to provide members of the Health and Wellbeing Board with an update on Health Protection assurance and activities in Reading. This includes performance against key performance indicators at both system and local level. The priorities for Health Protection during 2023-24 were focussed on developing the Health Protection service in Reading.

In Reading, during the 2023/24 financial year, low rates of outbreaks and communicable disease incidents were reported in the community. However, several healthcare associated infections breached national thresholds. Uptake for seasonal and some routine childhood and adult vaccines were below national average. Screening for cervical cancer was also reported as an issue due to low uptake. The rates of sexually transmitted infections show an upward trend and Reading is the worst performing in the South East for late diagnoses. Air quality has improved in parts of Reading, however overall levels of harmful particulates remain high. Public Health improvement plans for healthcare associated infections, communicable disease management, routine vaccination uptake and air quality are in place.

2. Progress Against Strategic Priorities

Below is a headline summary of the strategic priorities for Health Protection in Reading set out in 2023.

Priorities	Status
Development of strategic relationships in the council and across the system to facilitate system working including strategising to improve population health outcomes.	COMPLETE
Re-establishment of the joint Berkshire West Heath Protection and Resilience Partnership Board with Wokingham and West Berkshire.	COMPLETE
Design and implementation of the Health Protection Assurance framework.	Awaiting board ratification
Development of communicable disease management processes	COMPLETE
Developing a Memorandum of Understanding for individuals with pulmonary Tuberculosis who have no recourse to public funds.	COMPLETE
Defining the Health Protection function and delivering a structured service for Reading	In progress

Table1: Health Protection strategic priorities 2023-24

3. Healthcare Associate Infections (HCAI)

The term HCAI covers a wide range of infections. The most well-known include those caused by methicillin-resistant Staphylococcus aureus (MRSA) and Clostridium difficile (C. difficile). HCAs pose a serious risk to patients, staff and visitors both in acute settings and primary care. They can exacerbate existing medical conditions, create long term disability and increase resistance to antibiotics and adversely affect quality of life.

To drive improvement of HCAI rates, annual thresholds are set by NHS England for individual healthcare provider trusts and systems (including primary care). Reportable HCAs that are monitored for breaches include MRSA, C. difficile, Gram- negative blood stream infections including Escherichia coli (E. coli), Klebsiella spp., Pseudomonas aeruginosa, and Methicillin sensitive staphylococcus aureus (MSSA). Infection Prevention and Control (IPC) strategies are vital to preventing HCAs.

3.1. Progress against the Buckinghamshire Oxfordshire and Berkshire West (BOB) Joint Forward Plan for IPC (Infection Prevention and Control)

The BOB system wide IPC strategy to deliver improvements focuses on reduction of the following HCAs: -

- Clostridioides difficile infections

- Gram-Negative Blood stream infection
- Achieving antibiotic prescribing targets
- Establishing partnership and collaborative working across the newly formed integrated care Partnership.

Table 2 show HCAI counts and 12-month rolling rates compared with national counts up to quarter 3 of 2023/24.

Healthcare Associated Infections 12-month rolling rates by ICB compared with national - December 2023						
Source: HCAI Mandatory Surveillance Data						
Area	Organism					
	E Coli	Klebsiella spp	P. aeruginosa	MRSA	MSSA	C. difficile
	Value*	Value*	Value*	Value*	Value*	Value*
England	72.8	15.5	7.8	1.5	23.5	28.5
BOB	↓71.9	↓15.4	↑10.1	↓1.3	↓20.7	↓22.3
Buckinghamshire	↓70.2	↓15.1	↑10.4	↓0.7	↓19.1	↓18.9
Oxfordshire	↓72.7	↓15.0	↑10.1	↑1.6	↓19.7	↓23.5
Berkshire West	↑72.9	↓15.4	↑9.7	↑1.6	↑23.7	↓24.4

*Value per 100,000 population

Table 2: Source AMR local indicators - produced by the UKHSA - Data - OHID (phe.org.uk)

3.1.1 Clostridioides difficile infections

BOB is currently reporting below the national average rate of C. difficile cases. BOB sits at 22.3 cases per 100,000 and therefore below the national average of 28.5. However, data up to the end of the financial year shows that Berkshire West reported 119 cases, 1 case above the threshold of 118 cases.

To improve infection rates a C. difficile action plan was developed. It involves the piloting of a new data analysis tool and methods for monitoring antibiotic stewardship.

3.1.2 Gram-Negative Blood stream infection (GNBSI)

BOB has exceeded all GNBSI thresholds set by NHSE (NHS England) for 2023-2024), However, rates remain below the national average in each category with the exception of P. aeruginosa.

To improve infection rates a GNBSI action plan was developed. Key initiatives include system wide collaboration to implement the NHS England Catheter Passport prevent catheter associated urinary tract infections; Implementation of a hydration of programme for at risk individuals >65 years in the community; Introduction of primary care Aseptic Non-Touch Technique training with the aim to improve aseptic technique practice.

3.1.3 Achieving antibiotic prescribing targets

To achieve optimum antimicrobial stewardship, the One Health Anti-Microbial Stewardship group was established to agree system level priorities and facilitating opportunities for cross sector collaboration.

3.2. Infection Prevention and Control (IPC) interventions to manage and prevent HCAIs in primary care

The IPC team provided the following support to care homes including residential homes and supported living settings in Reading during 2023-24: -

- Specialist support during outbreaks of infection
- Onsite visit for IPC training and auditing
- Monthly infection prevention webinar
- Urinary catheter management and quality improvement support
- Publication of a monthly IPC Newsletter
- Telephone consultation, to provide real time IPC advice
- Post infection reviews of reportable HCAIs

4. Communicable Disease Control

Communicable diseases are illnesses caused by viruses or bacteria that people spread to one another through contact with contaminated surfaces, bodily fluids, blood products, insect bites, or through the air. Public Health plays a lead role in protecting the local population from infection through surveillance and monitoring, operational support, advice, education, training and research.

4.1. Measles

The recent resurgence of measles cases in Europe, resulted in significant measles outbreaks in England, mainly in London and the West Midlands. The number of cases reported in the South East have been consistently below the national average. With only 2% of cases reported when compared to the national figure. For the period January 2024- April 2024, 54 confirmed cases were reported in the South East with 3% of these cases confirmed in Reading. However, the risk of transmission in Reading was high due to low preventative vaccine uptake in at risk cohorts.

Local Action

A measles action plan was co-produced by the Health Protection Lead with Blue Lozenge to focus public health initiatives with the aim of improving uptake of the Measles, Mumps and Rubella (MMR) vaccine. This included messaging to schools and an innovative social media campaign, which would be included in future reports.

The Reading Community Health Champions received training on Measles including the risks to unvaccinated individuals to cascade in their communities.

Training on Measles was delivered by the Health Protection Lead to head teachers, it was designed to help them recognise and respond to measles to prevent onward transmission in education settings.

4.2. Whooping cough

There has been a recent rise in Whooping cough (Pertussis) infection across England. With cases in the South East rising by 83% when compared to rates of infection in 2023. For the time period January 2024- April 2024, 873 confirmed cases and 1244 possible cases were reported in the South East. The highest rate of infection was reported in most deprived population areas. Despite the high number of cases across the South East, Reading was among 3 boroughs who reported the lowest number of cases, less than 1% of the total. Whooping cough is a respiratory spread illness therefore the risk of transmission to residents from non-residents is high and we need to take preventative action.

Local Action

A communications plan was developed to raise awareness across the borough targeting high risk groups who are susceptible to severe illness if infected. An article was published in the Reading resident's newsletter and an innovative social media messaging campaign was developed, to help drive the uptake of vaccines. This will be included in future reports.

4.3 Incidents and Outbreaks

Reports for Reading up to April 2024: -

- Cluster of influenza/ flu like illness cases in a care home.
- Outbreaks of Norovirus in care homes.

5. Vaccinations & Immunisation

Immunisation offers protection against some infectious diseases. Vaccines stimulate the body to produce antibodies that fight infection. A full dose of vaccination generally provides immunity similar to that provided by the natural infection, but without the risk of the disease or its complications.

To reduce the spread of infection and prevent outbreaks, achieving high levels of immunity against vaccine preventable diseases is vital. This can result in herd immunity, whereby the protection from immunisation programmes extends to individuals who cannot be vaccinated for a number of reasons.

5.1 Vaccine uptake in Reading

5.1.1 Seasonal vaccines

The Flu vaccination programme came to an end on 31st March, with data available to end of February as below. BOB compared well with uptake, performing second best in the South-East region.

At local authority level, Reading continues to trend below the national average and below our geographical neighbours. See table 3.

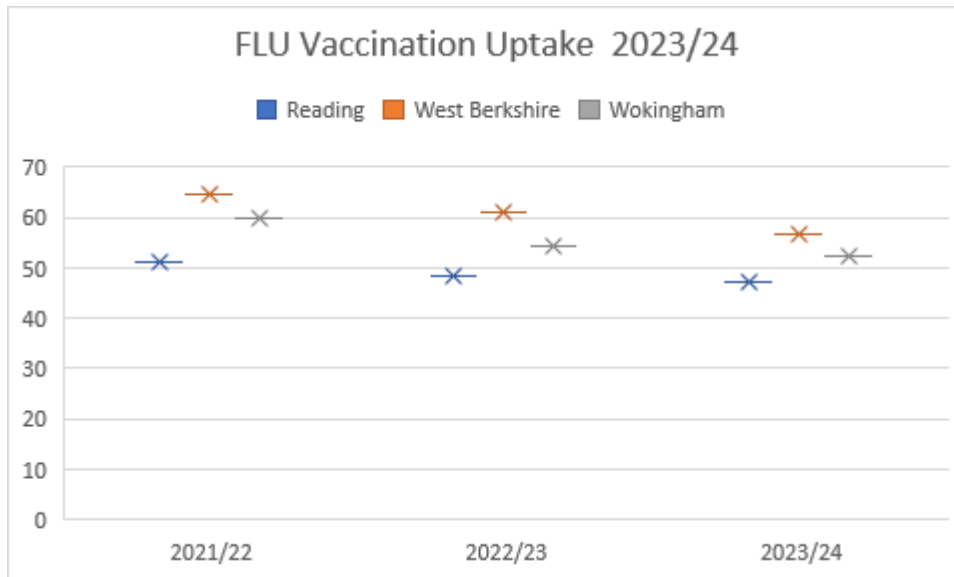


Table3: Seasonal flu vaccination uptake 2023-24 season average for all cohorts. Source: ImmForm. Through Berkshire West Public Health Informatics

Local Actions

Preparations for the 2024-25 flu vaccination programme has already commenced at a regional level. Local plans will focus on increasing uptake in underserved communities.

The Covid Spring Booster Campaign 2024 Covid vaccination programme is an 11-week programme from 15th April to 30th June with the initial week focusing on care homes only and full programme to commence 22nd April. Vaccinations will focus on:

- All aged over 75 years old
- Those living in care homes for older people.
- Those who are vulnerable due to immunosuppression.

5.1.2 Childhood vaccinations

During the 2022-23 financial year childhood population vaccination coverage for two doses of MMR was below required threshold and both national and regional averages. Complete data for 2023-24 has not been published but the data shows that the situation has worsened, to the point that Reading was cited as an area of concern in the South East for low MMR uptake.

Coverage for other routine school aged vaccines (Diphtheria, Tetanus, Pertussis) during 2022-23 aligned with the national average. Complete datasets for 2023-24 are not yet accessible, however early reports from UKHSA show a decreasing trend.

Adolescent vaccine coverage for Human Papilloma Virus (HPV) was below the threshold for 2022-23. Meningococcal ACWY coverage was also found to be within the threshold for 2022-23. Complete datasets for 2023-24 are not yet accessible, however early reports show a linear trend.

Local action

As referred to above, a measles action plan was developed to increase awareness among the population to increase MMR vaccine uptake.

6. Screening

Screening is one of main methods used to identify apparently healthy individuals who are at increased risk of developing a particular condition. The aim of screening programmes is to offer early treatment or intervention to reduce the incidence and/or mortality of the health problem or condition within the population.

For further information on the national screening programmes and vaccines that are routinely offered to everyone in the UK free of charge on the NHS please visit the NHS website: [NHS screening](#).

6.1 Screening coverage in Reading

Reports of screening coverage for bowel cancer screening, antenatal and newborn screening, breast screening showed that performance was above the national average or targets met.

Thresholds for cervical screening are not being met in Reading. Coverage has been below the national target and continues on a downward trend.

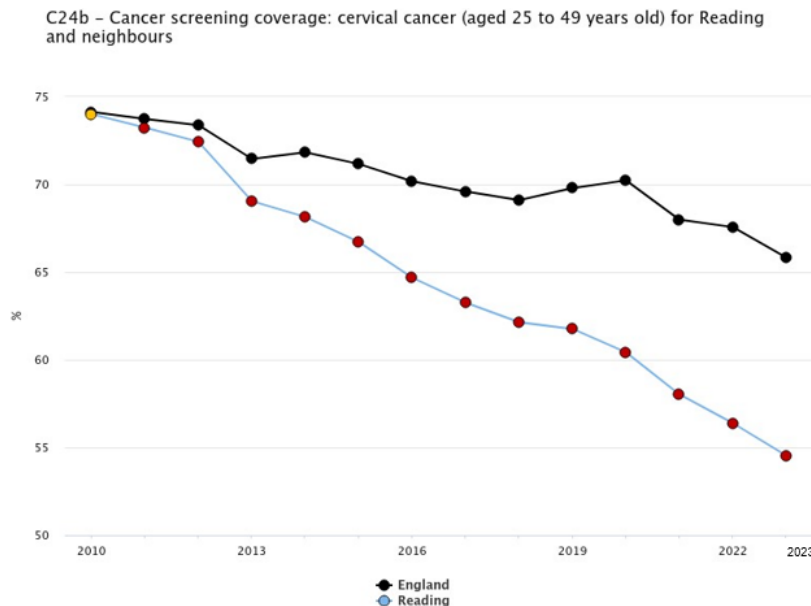


Figure 1: Cervical screening coverage in Reading. Data up to December 2023Source: Public Health Outcomes framework

6.2 Reducing health inequalities in screening & immunisation programmes

2023

- A Health Needs Assessment on vaccine preventable illness is being undertaken to determine the root of cause of low vaccine uptake in both adults and children in Reading.

- Healthwatch Reading are leading on a series of qualitative research studies to improve understanding around low uptake of cervical screening in south Asian women and other ethnically diverse communities.
- A BOB cervical screening task & finish group has recently had its first meeting, including membership stakeholders across the patch it aims to work with GP practices in Berkshire West to increase uptake in cervical screening.
- Although standards were met locally for breast screening, the programme is currently undergoing a national Health Equity Audit by NHS England, when complete this will inform an action plan.

7. Sexual Health

Sexual health is not equally distributed within the population of Reading. There is evidence to suggest strong links exist between deprivation and sexually transmitted infections (STIs), teenage contraception and abortions. The highest burden is borne by women, men who have sex with men (MSM), trans community, teenagers, young adults and black and minority ethnic groups. Some groups who at higher risk of poor sexual health, face stigma and discrimination, which can influence their ability to access services.

7.1 Sexual Health in Reading

The current rate of sexually transmitted infections (STI) is increasing in Reading. This is a continuing trend from 2022-23. New STI diagnoses remain above the threshold and national average. A key concern is that Reading has the highest late STI diagnoses rate in the South East. The main challenge for Reading is working with some asylum seekers and refugees due to language barriers.

7.1.1 Human Immunodeficiency Virus (HIV)

HIV positive people in Reading live with more long-term health issues because they are diagnosed late, they experience more mental health issues, and their quality of life is poorer than their HIV positive peers in other areas of Berkshire. Reading has the highest late diagnosis rate in the southeast.

An early diagnosis of HIV leads to better long term health outcomes and makes living with HIV manageable. Late diagnosis is far more likely to result in multiple co-morbidities and a poorer quality of life. 53.8% of those diagnosed with HIV in Reading are diagnosed late, compared to a regional average of 43.3%.

Local Actions

- HIV Awareness and Testing Campaigns

The aims of this campaign were to reduce late diagnosis amongst heterosexual men and heterosexual and bisexual women; to increase repeat testing in men who have sex with men; to raise awareness in underrepresented cohorts.

- Monkey pox vaccination programme

Supporting service providers and high-risk population groups around awareness and vaccination.

- Sexual Health Relationship Education memorandum of understanding

Collaboration with Brighter Futures for children to engage with high-risk young people to provide long term support. The aims are to reduce STI transmission among young people and educate vulnerable young people on risky sexual behaviours.

- Sexual Health Access audit and results showed that all providers are performing well against key performance indicators for testing and contraception.

Priorities for the Reading Health and Wellbeing Programme 2024-25

- Focus on National Chlamydia Screening Programme (NCSP) to reduce the health harm caused by untreated chlamydia infection.
- Reducing late HIV diagnosis rates in Reading.
- Improve access to sexual health service and increase the referral pathways to reach the most vulnerable members of the community.

8. Environmental Hazards

8.1 Air Quality

Poor air quality is the largest environmental risk to public health in the UK. Air pollution can cause, complicate, or exacerbate many adverse health conditions. It usually manifests in respiratory or cardiac symptoms and can lead to chronic health issues. Recent studies show that poor air quality can affect every organ in the body and even cause damage to cognitive performance. Exposure to poor air quality is directly related to diseases such as cancer, asthma, strokes, heart disease, diabetes, obesity and dementia. Air pollution can affect people from different ethnicities, ages, and social groups. It is likely to have greater impacts on those who experience high amounts of exposure and those who have greater susceptibility. The most vulnerable are those with pre-existing health conditions, children, or the elderly.

8.1.1 Air Quality in Reading

The local situation continues to improve even after discounting the influence of the pandemic on air quality trends. The greatest rate of improvement has occurred at monitoring sites within Reading's town centre (Air Quality Action Plan, 2024).

8.1.2 Areas of Concern

Within Reading, there is currently one location identified as being in exceedance of any of the legal UK Air Quality Objectives-Caversham Road.

Particulate pollution – although this does not exceed any objectives, small particulates (PM2.5) evidence shows this to be the most harmful to health, with no known lower threshold. Levels of particulates have not been decreasing in Reading in recent years.

8.1.3 Local Improvement Initiatives

A Reading local plan was developed that will play a key role in how the town evolves, with core objectives for sustainable growth. The Local Plan seeks to deliver new homes and employment space in Reading, alongside critical infrastructure to accommodate forecast housing demands and job creation, and to ensure the town remains an attractive place to work, live and study.

An expression of interest for funding to carry out a project to expand particulate matter monitoring to better understand levels, the local impact on health and cost to NHS.

9. Emergency Planning

The Berkshire wide Health Emergency Planning Group was re-instated in 2023 and Reading Public Health team is an active member. The terms of reference for this group are in development. This group feeds into the Thames Valley Local Health Resilience Partnership. The HEPG responsibilities include: -

- Facilitating the production of local sector-wide health plans to respond to emergencies and contribute to multi agency emergency planning.
- Provide support in assessing and assuring the ability of the health sector to respond in partnership to emergencies at a local level.

The following Berkshire West plans are on a schedule for review: -

- Heat health plan
- Pandemic plan
- Flood plan
- Reading specific adverse weather plan update

10. Next Steps to be carried for the Public Health Team

- Continue collaborative working with the BOB ICB around infection prevention and control and health resilience projects.
- Increase assurance for screening programmes and work with partners to improve delivery, coverage, and uptake, focusing on population groups at greater risk of poor outcomes or who face more disadvantage in accessing services.
- Continue collaborative working with commissioners, providers, community champions and communications team to raise awareness of Health Protection risks and locally amplify national communications.

- Focus efforts to prevent and reduce health inequalities, in particular health protection pathways for migrant and homeless communities
- Undertake a vaccine preventable diseases Health Needs Assessment to understand behaviours around vaccine hesitancy to focus initiatives for improvement.
- Collaborate with the Reading Borough Council Emergency Planning colleagues to update adverse weather plans.