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Board Meeting 24.10.18 Agenda Item: 10.1 Purpose: For Information

NHS Western Isles

Public Health and Health Strategy

Joint Health Protection Plan 2018 – 2021

Reviewers Name (Chairman/Individual)	Group/Committee/Job Title	Current Date
Ellena Macdonald	Risk Manager	
TK Shadakshari	Lead Chaplain and Strategic Diversity Lead	

Version/Draft	Date	Latest Changes Made by	Reason for Changes
V2/ D1	25. 09.18	Christina Morrison	Update
	-		

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1.0 Introduction

This Joint Health Protection Plan (JHPP) provides an overview of health protection (communicable disease and environmental health) priorities, provision and preparedness for NHS Western Isles (NHSWI) and Comhairle nan Eilean Siar (CNES) as required by the Public Health etc (Scotland) Act 2008¹. The JHPP has been prepared in collaboration with Comhairle nan Eilean Siar, and aims to:

- provide an overview of health protection priorities, provision and preparedness
- outline the joint arrangements which NHSWI and CNES have in place for the protection of public health
- improve the level of preparedness to respond effectively to a health protection incident and emergency
- highlight priorities identified for the period of the plan
- identify the resources which are required to meet the plan
- detail liaison arrangements between NHSWI, CNES and other agencies
- develop learning across all agencies
- provide a mechanism for review and recording of outcomes

Additionally the plan will be underpinned by the Community Planning Partnership (CPP) Local Outcomes Improvement Plan $(LOIP)^2$. The CPP has recognized that health goes beyond the traditional models and requires a collaborative approach to achieve a healthy and sustainable population. The LOIP identifies priority areas that the local community have voiced is important to their individual and population health. The JHPP can adopt and address outcomes within Priority 3 – quality of life.

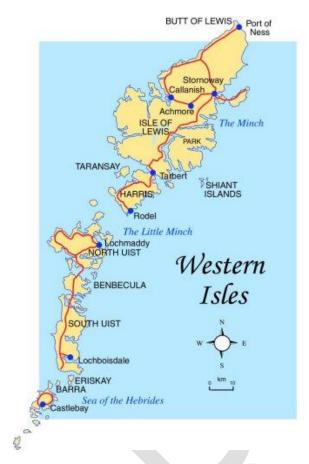
² See <u>http://www.ohcpp.org.uk/index.php?option=com_docman&task=cat_view&gid=168&Itemid=237</u>

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¹ See <u>http://www.legislation.gov.uk/asp/2008/5/pdfs/asp_20080005_en.pdf</u>

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2.0 Outer Hebrides Overview



The Outer Hebrides is an island chain located approximately 43 miles off the north west coast of Scotland which forms a 150 mile arch from north to south.

The Outer Hebrides accounts for almost 4% of Scotland's land area but only 0.5% of its population – the lowest population density (9 people per kilometre square) of all the local authorities in Scotland.

In 2015 the population of the Outer Hebrides was estimated at 27,070, a reduction of 2.2% from 2011 with reduction forecast to continue – for example to 25,284 (-6.6%) by 2028. By 2028 it is anticipated that 31.1% of island residents will be aged 65+ compared with a Scotland average of 22.8%.

The Scottish Index of Multiple Deprivation (SIMD) is the Scottish Government's official tool to identify geographic concentrations of multiple deprivations across Scotland. The two least affluent areas identified on this basis are Benbecula and North Uist, and Stornoway West. Successful actions in Locality Plans for these areas will be used, as appropriate, through the wider area.

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3.0 Health Protection Planning

3.1 Provision of Health Protection Services

The prevention, investigation and control of communicable diseases and environmental hazards require specialist skills which can be applied to a wide variety of potential incidents and scenarios. Skills such as risk assessment, risk management and communication are supported by the JHPP with a collaborative approach to planning and procedures aiming to successfully control risks to public health.

The health board and local authority have a duty to co-operate with each other and any relevant person that appears to have an interest in or a function relating to the protection of public health³. Effective working is in place locally, evidenced through the collaborative working of the Health Protection Team, Scottish Water and SEPA. Additionally, formulation of the JHPP enables standardised practice and a systematic approach to addressing public health priorities, and partnership learning.

3.2 Risks and challenges

The diverse geography and logistical difficulties of the islands communities represents a significant challenge to a Health Protection response when responding to any incidents or outbreaks. The importance of joint working, planning and preparedness to overcome these risks and challenges especially in periods of adverse weather or where capacity is limited has been demonstrated on many occasions.

³ A 'relevant person' refers to a health board, special health board, local authority, the Common Services Agency or the Scottish Ministers.

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In outbreaks and situations such as adverse weather, the health protection team can access support from the Highlands and Islands Local Resilience Partnership (HILRP). However, due to the remote and rural nature the local and more immediate response will be from the collaborative group known as WIEPCG (Western Isles Emergency Planning Coordinating Group). The group has access to the vulnerable peoples risk register, which is updated daily and held by the CNES under the remit of Care for People.

Telecommunications are vital in the health protection response for both agencies. Lack of a working mobile or telephone network is a common problem in remote and rural areas. The response to a public health incident may be hindered in the event of a significant telecommunication failure.

Collection and analysis of samples is important in the management of disease outbreaks with limited local laboratory services and with the need for specialized analysis (e.g. typing of bacteria), most health protection specimens are delivered to specialist reference laboratories on the mainland, and delay in delivery and processing may occur resulting in longer gaps until results are known. Knowledge and arrangement of appropriate delivery is required to reduce waiting time. This may require longer periods of working under a 'probable' hypothesis rather than laboratory 'confirmed', affecting public health procedure in the affected population.

Surveillance and data collection relating to health protection incidents and outbreaks is carried out by both agencies. The Local Authority has both in-house and national systems, such as the Food Surveillance System, which record and monitor information on investigations and issues in relation to health protection. NHS Western Isles utilizes the national HP Zone health protection system provided by Health Protection Scotland. This system aims to provide a platform for standardised practice in health protection, whilst allowing for the recording and management of incidents, issues and situations - which can be both local and national.

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4. Roles and responsibility, and Capacity

4.1 NHS Western Isles

The Health Protection remit of NHS Boards is described in a letter from the Chief Medical Officer (2007)⁴ and in the Public Health etc. (Scotland) Act 2008⁵. NHS Western Isles delegates this responsibility to the Director of Public Health and work is carried out on a day to day basis by a health protection team which consists of health protection nurses specialists. The NHS Western Isles Health Protection Team can be contacted by phoning 01851 708033 during office hours and by phoning Western Isles Hospital switchboard 01851 704704 out of hours.

4.2 Comhairle nan Eilean Siar

The Health Protection remit for Comhairle nan Eilean Siar includes the regulation and control of environmental noise, air quality, contaminated land, food safety, health and safety, housing and the built environment, air quality, private water supplies, smoking ban legislation and age restricted product sales. The Council's Environmental Services is responsible for these issues and can be contacted by phoning 01851 822694 during office hours or 01851 701702 at night or the weekend.

A list of NHS WI HPT and CNES identified competent persons is provided in Appendix 1.

⁴ See <u>https://www.scot.nhs.uk/sehd/cmo/CMO(2007)02.pdf</u>

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4.3 Capacity

Both the Local Authority and the NHS Board deliver their services from bases in Stornoway and Benbecula covering the whole of the Western Isles. Whilst this provides a wide coverage of specialist skills and allows for resilience, it also may prove a challenge should there be a period of staff absence. Likewise, resilience may be an issue should multiple incidents occur in more than one area simultaneously.

The support of Western Isles Emergency Planning Coordinating Group (WIEPCG) is valued as this provides a multi-agency proportionate response to a public health situation. Staff from the wider department of Public Health may be utilised as required in a large scale incident, and access to other staff groups may be negotiated from other departments within the NHS Board. Administration is the commonest initial requirement in an incident and provision of such is laid out in the WIEPCG ToR⁶.

Out of hours first on call is provided 24/7 by the NHS WI HPT, with second on call arrangements being provided on an interisland basis (across Western Isles, Shetland and Orkney NHS Boards). Formal arrangements for mutual aid within the North of Scotland are reviewed and agreed by the North of Scotland Public Health Network (NoSPHN). Informal arrangements of mutual aid exist within the Local Authorities and act to support the provision of the service in remote and rural areas.

⁶ WIEPCG Terms of Reference				
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5.0 Health Protection Priorities

5.1 National Priorities

National Health Protection priorities are determined by the Chief Medical Officer and the Scottish Health Protection Advisory Group with local priorities identified by the Health protection team.

National priorities are identified in response to the population's needs, which are ever evolving. The ongoing Public Health review may identify additional priorities to enhance current work streams or in response to new emerging diseases. Further work may be directed by Health Protection Scotland and the Scottish Health Protection Network.

National priorities that will be worked upon in future years include:

Pandemic Influenza preparedness	Vaccine preventable diseases
Healthcare associated infections	Environmental exposures and reducing
	risk to health
Antimicrobial resistance	Gastrointestinal and zoonotic infection
	reduction and control (e.g VTEC)
Implementation of Sexual Health and	Implementation of the Tuberculosis
Blood borne virus framework	framework
Improving food, water and environmental	Effective and efficient information
Improving food, water and environmental	Effective and efficient information
safety	systems
Improving communications to the public	Protecting vulnerable groups against
	avaaavraa hazardaya ta haalth
	exposures hazardous to health

Table 1 National Priorities

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5.2 Local Priorities

In addition to national priorities, local priorities have been identified through surveillance and monitoring of HP Zone and ECOSS reporting systems. Additionally, the LOIP informs on locally identified issues that health protection can contribute to through protective service remits. The plan recognises that work is undertaken on a daily basis relating to areas of responsibility and service delivery:

- Preventing the spread of communicable diseases in the local community
- Improvement in food safety
- Ensuring safe water supplies
- Health and safety in the work place
- Ensuring current plans are in place to respond to incidents and emergencies

Identified local priorities are progressed by respective agencies through incorporation into service plans. Partnership working allows for effective monitoring and surveillance of priorities with oversight carried out by the local Health Protection Team. Table 2 below details the local priorities for action in the Western Isles.

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Table 2 Local Priorities

Local priority	How priority is being addressed at local level 2017 - 2019	
The physical and mental health and wellbeing of the people throughout the Outer Hebrides is improved.	Work is being taken forward through a number of Public Health work streams including community empowerment, housing, transport, social isolation/loneliness, employment and green space initiatives. Other health areas for priority across our partnership approaches include work around Alcohol and Drugs, Mental Health Redesign, Assistive Technologies, and a continued focus around inequalities and access.	
Air Quality Plan	Annual Air Quality Update and Screening Assessments have not highlighted any specific air quality issues in the Outer Hebrides. Further information is available at http://www.cne-siar.gov.uk/envserv/airquality.asp	
Tobacco Control	Continued enforcement of the smoking ban. Preventative measures with regard to the sale of tobacco products to under 18s. We have also established a Western Isles Tobacco Control Alliance which is a multi-agency group. Implementation of smoke free NHS buildings and grounds.	
Private water supply sampling	Sampling of all type A (commercial) private water supplies is undertaken and on all other supplies where requested. Grants available to offset the costs of improving the quality of the water supply to an acceptable standard.	
Food standards / Food Hygiene Enforcement	Implementation of intervention strategy to target resources more effectively on food premises requiring improvement. This will help drive up overall food safety standards in the Outer Hebrides. Alternative interventions to target resources more effectively. Participation in national campaigns as directed by FSS. Investigation of food-borne illnesses.	
Contaminated land	Potentially contaminated land sites were identified and investigated throughout the Western Isles. Sites where pollutant linkages were identified underwent intrusive site investigation and remediation where required. Sites with contaminated land issues are now dealt with by using the planning process. Sites experiencing pollution incidents are dealt with using EPA 1990.	
Enforcement of health and safety legislation.	Implementation of planned workplace inspections. Investigation of workplace accidents. Complaint investigation and providing advice to a range of businesses and workers.	

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Local priority	How priority is being addressed at local level 2017 - 2019	
Licensing of skin piercers and/or tattooists	Framework in place to licence all skin piercers and tattooists to ensure that they comply with statutory provisions in particular those relating to the cause/spread of infection.	
Control of use of sunbeds	Arrangements in place to inspect and regulate sun bed premises in order to ensure they are complying with the provisions of Section 8 of the Public Health (Scotland) Act 2008.	
Control of sale of fireworks.	Inspections undertaken to ensure compliance with the Explosives Regulations 2014	
Minimise risk to the public from Lyme disease	Assist with national and local ongoing research and reviews. Continue to raise the public awareness through educational sessions and research updates. Develop materials for use by both education and community groups. Review and develop website to include easily accessible information	
Sexual Health and BBV framework	Work continues to develop educational sessions addressed through education services and community groups. Employment of a mu agency approach to Sexual health and BBV framework; building on work from the Sexual health strategy 2007-2012 by taking a holis approach to sexual health and BBVs, and with continued provision of sexual health services via GPs with specialist interest. Development of more comprehensive specialist sexual health services is underway.	
Vaccine preventable diseases	Continued implementation of established routine immunisation programmes and introduction of new programmes as directed nationally programmes such as Men ACWY, HPV for MSM and hexavalent vaccines. Annual training fr staff involved in vaccination via PGD.	
Effective port health plans for communicable disease control	Review and develop port health plans, achieving a generic approach to control in compliance to international regulations. Joint partnership working to achieve the control of communicable diseases should they arise and exercise plans on a bi-annual basis.	
Pandemic flu plan	Review business continuity plans and assist with the development of the annual winter plan. Update and review Pandemic flu plan in response to any national or local changes.	

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Local priority	How priority is being addressed at local level 2017 - 2019	
Recovery Planning for Major incident	Review and further develop a generic recovery plan in line with WIEPCG multi-agency responses and the Resilience Group.	
Effective and proportionate arrangements in place to protect public health	Ongoing revision of joint health protection policies and procedures between identified agencies. Review of existing plans as a routine part of each incident that occurs. Undertake training and exercising of plans relating to water incidents. National and local representation at appropriate groups, such as gastro-intestinal zoonotics. Work to national standards in an incident/outbreak situation. Collaborate on joint training and chairing of incident/outbreak meetings. Implement recommendations from SHPN/ HPS and work in collaboration to achieve identified targets/goals. Investigate and take appropriate action in response to situations that may adversely impact the environment and/or to Public Health.	
Tuberculosis	Implementation of the SHPN TB Framework for Scotland, and working with TB MDTs in NHS Highland when required.	
Medical/Vet liaison	Working on concerns regarding zoonotic infections e.g. Lymes disease (see above) and hydatid disease, and other tick borne infections	

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6.0 Review of Joint Health Protection Plans

6.1 Review of Joint Health Protection Plan

The review of the previous JHPP recognised that health protection work was being carried out by multi agency groups, and there was an effective response in responding to the control of communicable disease outbreaks, however, achievement was unmeasured or unidentified. The multiagency HPT recommended that the previous JHPP was out of date and requested the new plan to be a workable document. Therefore this contemporary JHPP has provided an overview of current health protection planning requirements, identifying achievable health protection priorities at a national and local level.

6.2 Review of Health Protection Standard Operating Procedures, Protocols and Plans

NHS Western Isles and the CNES have numerous standard operating procedures (SOP) and policies which cover a wide range of health protection issues. They are reviewed and updated through the respective governance structures.

Governance structures for NHS Western Isles health protection SOPs are initial review by the HPT and then approval and accepted via the Public Health Governance Group.

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1 Appendix 1 Resources

1.1 NHS Western Isles

Job Title	Comment	
Director Public Health	Dr Maggie Watts* Person	*NHS Board Competent
Health Protection and Screening Nurse Specialist	Christina Morrison	
Health Protection and Screening Nurse Specialist	Isabell MacInnes	
Emergency Planning Officer	Tom Laverty	
Public Health Admin Manager	Janet MacKenzie	
Head of Public Health Intelligence	Martin Malcolm	

NB Additional NHS Board Competent Persons are available out of hours as part of the Interisland Public Health On Call Rota

1.2 Comhairle nan Eilean Siar

Job Title	Comment	
Environmental Health Manager	Colm Fraser*	*CnES Competent Person
Environmental Health Officer	Christine M Morrison*	*CnES Competent Person
Environmental Health Officer	Ruth Smith*	*CnES Competent Person
Environmental Health Officer	Morag McNeill*	*CnES Competent Person
Trainee Environmental Health Officer	Lisa Johnson (Based in Uist)	
Animal Health Officer	Kenny Macleod	
Relief Environmental Health Officer	Alasdair MacEachen*	*CnES Competent Person

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1.3 Health Protection Team

Job Title	Comment
Director of Public Health	Dr Maggie Watts
Health Protection and Screening Nurse Specialist	Christina Morrison
Health Protection and Screening Nurse Specialist	Isabell MacInnes
Head of Infection & Prevention Control, Decontamination & Cleaning Services	Janice MacKay
Head of Public Health Intelligence	Martin Malcolm
Public Health Admin Manager	Janet MacKenzie
Biomedical Scientist (Microbiology)	Western Isles Hospital Laboratory
Environmental Health Officer	Christine M Morrison *CnES Competent Person
CPHM & NHS Competent Person interim support	MOU with North of Scotland Group (2017)

1.4 IT and communication technology to facilitate health protection work

Technological resource		NHS	CnES
Desktop and laptop computers			
iPads			
Printers (black and white and colour)			
Photocopiers			
Fax machines			
Office and mobile telephones			
Single page scanner			
Document feed scanner			
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Mobile telephony with internet access	
Audio-teleconferencing equipment	
Video-conferencing equipment	
On call folder of health protection resources	
MS Office (Word, Excel, PowerPoint, Access)	
Secure email across and between partners	
Audio-recording equipment	
SIDSS (Scottish Infectious Disease Surveillance System)	
Local computer networks and to the world wide web	
NHS Western Isles intranet	
Comhairle nan Eilean Siar intranet	
ECOSS (Electronic Communication of Surveillance in Scotland) SCI Store (to access laboratory results) SCI Gateway (Notifications)	
SHPIR (Scottish Health Protection Information Resource) TRAVAX (travel advice), Toxbase (toxicology database)	
SEISS (Scottish Environmental Incident Surveillance System) HP Zone	
Access to NHS Western Isles IT team which, if required, can set up a health protection operations room.	
Ability to convert a meeting room into a call centre to support a helpline with six lines being able to take calls from a single helpline number.	
Support from and access to members of organisation communications teams	
Access to resources provided by NHS24	
UNIFORM system to record details of all food businesses along with enforcement actions.	

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Department: Public Health and Health Strategy	Title: Joint Health Protection Plan	NHS Eileanan Siar	
Refer to Other Documents:	Supersedes:	Western Isles	
	Joint Health Protection Plan 2010-12		
Warning -Uncontrolled When Printed			
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1.5 Organisational arrangements in place to facilitate collaborative working between NHS Western Isles, Comhairle nan Eilean Siar and other health protection agencies

Group	Comment	Freq uenc y
Health Protection Team	NHS, CnES, other invited as relevant e.g. veterinary	Quarterly
Infection Control Committee	NHS, (COO, Hospital Departments, Infection Control Team, Pharmacy, Microbiology)	
Public Health Water Liaison	NHS (HPT), CnES (EH), Scottish Water	Quarterly
Drinking Water Quality Regulator	NHS, CnES, DWQ Regulator	Annual
Emergency Public Health Incident Group (EPHIG)	NHS, CnES, Police, SAS, HIFRS, Scottish Water, Scottish & Southern	6 weekly
Western Isles Emergency Planning and Co-ordinating Group	Multi agency emergency planning and response Police, Fire, NHS, CnES, MCA, SEPA, Utilities and commercial, HIAL, Voluntary agencies, other	

Public health incidents are reviewed locally and lessons learnt shared through the regular meetings above. Additionally, where required, specific post incident or exercise hot and cold debrief meetings are held, supported by HILRP as appropriate, with reports shared and cascaded between and within agencies appropriately.

Date Approved:	Review Date: (max 2 yrs)	Version:	Author:
	20 August 2021	Draft: V2 D1	Christina Morrison
Content Approval By & Date: Insert Group/Committee & Date		Page 18 of 18	Owner: (Director) Dr Maggie Watts
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