

# Proposed Health Protection Committee for the Health and Wellbeing Boards of Devon County Council, Plymouth City Council and Torbay Council and Health Protection Assurance Arrangements

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## 1. Introduction

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- 1.1 The Local Authorities of Devon County Council, Plymouth City Council and Torbay Council, through their Director of Public Health, require assurance that appropriate arrangements are in place to protect their public's health.
- 1.2 The scope of health protection includes: prevention and control of infectious diseases; immunisation and screening; health-care associated infections; emergency planning and response (including severe weather and environmental hazards).
- 1.3 Alongside the Local Authorities (unitary, upper tier and lower tier), several external organisations are involved in either commissioning or the delivery of health protection functions that fall within this scope. These include North East & West Devon Clinical Commissioning Group, South Devon and Torbay Clinical Commissioning Group, Public Health England and NHS England. To deliver or commission these functions effectively, robust partnership arrangements are required.
- 1.4 Local Authorities through their Director's of public health require assurance that their public's health is adequately protected. Therefore, formal assurance arrangements are required for the health protection system, that identify risks across the scope of health protection activity and provide adequate control with regard to risk-management.

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## 2. Health Protection Committee

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- 2.1 A Health Protection Committee accountable to the Health and Wellbeing Boards of Devon County Council, Plymouth City Council and Torbay Council is proposed. First and foremost, this Committee will provide an important control function with regards to the required assurance arrangements for the health protection system.
- 2.2 Terms of Reference for the Committee (Appendix 1) have been considered and agreed in principle by Local Authority Directors of Public Health, their Health Protection Lead Officers as well as representatives from Public Health England (including Consultant in Communicable Disease Control), NHS England Area Team and the Clinical Commissioning Groups.
- 2.3 A Health Protection Committee serving three Health and Wellbeing Boards allows health protection expertise from public health teams within each Local Authority to be pooled in order to share skill and maximise capacity. Furthermore, for partners whose health protection functions serve a larger geographic foot-print, this model

reduces the burden on them to attend multiple health protection meetings with similar terms of reference and to consider system-wide risk more efficiently and effectively.

- 2.4 In addition, a number of health protection groups are either in existence or in development which can support the Health Protection Committee to discharge its risk management functions and which cover the scope of health protection. These groups and their relationship to the Health Protection Committee and Health and Wellbeing Boards are illustrated in Appendix 2 and include:

- 2.4.1 Health Care Associated Infection Board;
- 2.4.2 Health Protection Advisory Group;
- 2.4.3 Devon, Cornwall and Isles of Scilly Screening and Immunisation Overview Group;
- 2.4.4 Local Health Resilience Partnership.

Through the Local Authority Health Protection Lead Officers, terms of reference for each of these groups will be reviewed to ensure they reflect the assurance arrangements outlined in this document.

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### 3. Performance Monitoring

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- 2.1 A set of performance indicators that cover the scope of health protection activity will be used to monitor performance at Local Authority level and benchmarked by regional and national performance.
- 2.2 Following the dispersal of public health activity across several organisations from April 1<sup>st</sup> 2013, access to information required for performance monitoring across the scope of health protection is not available to all partners. Therefore, lead organisations will be required to report on the activities for which they are responsible and for which they have access to the information required.
- 2.3 Local Authority Health Protection Lead Officers will review their partner organisation's performance reports prior to the Health Protection Committee convening. Where under-performance is identified, data will be analysed at the appropriate spatial level with partners in order to identify reasons for variation and the mitigating action / activity required. This will inform the performance report presented to the Health Protection Committee for members to be assured that reasons for under-performance have been identified and the required actions/activities are in place to improve performance.
- 2.4 Where areas of underperformance are identified which may pose a risk to the public's health, the lead organisation will ensure that the risk is entered onto its own organisational risk register. These risks will be reported to the Health Protection Committee which will seek assurance that mitigating actions and activities are sufficient to manage the identified risk.

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### 3. Risk Management

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#### **Risk Management**

- 3.1 In relation to health protection and assurance arrangements, risk management is the logical and systematic method of establishing the context, identifying, analysing, evaluating, treating, monitoring, and communicating risks associated with health protection activity, function or process. Risk management seeks to provide assurance that all actions and activities required to mitigate against risks and their control arrangements are in place.

#### **Risk Definition**

- 3.2 In the context of health protection and assurance arrangements, risk is defined as the likelihood that a hazard (anything with the potential to cause harm) will occur multiplied by the severity or impact it may have on either the public's health or to the organisations involved in protecting the public's health

#### **Risk Identification**

- 3.2 Each organisation commissioning or delivering activities within a health protection system is responsible for identifying risks that if not adequately mitigated against or controlled could have an adverse impact on the public's health, the organisation itself and/or partner organisations. Organisations will report significant risks (normally described as high/very high) to the Health Protection Sub Committee which will seek assurance that adequate mitigating action / activities are in place to manage the risk(s) identified.

#### **Risk Mitigation**

- 3.3 As part of its report, the organisation will outline all actions / activities either currently in place or that are required to reduce (mitigate against) the risk identified (e.g. reducing the potential harm of the hazard / likelihood that it will occur).

#### **Risk Control**

- 3.4 The Health Protection Committee will seek assurance of the effectiveness of the mitigating actions / activities described. Health protection risks that cannot be adequately controlled through the Health Protection Committee will be escalated to the Health and Wellbeing Board (s).

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### 4. Internal Audit

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- 4.1 The role of Internal Audit is to understand the key risks of an organisation and to examine and evaluate the adequacy and effectiveness of the system of risk management and the entire control environment in operation. As an independent appraisal function, the primary objective of Internal Audit is to review, appraise and report upon the adequacy of the risk management framework and internal controls.

- 4.2 The Devon Audit Partnership provides Internal Audit for Devon County Council, Plymouth City Council and Torbay Council. Therefore, there is scope for the Partnership to test assurance arrangements for managing system-wide risks in relation to health protection and the role of the Health Protection Committee, subject to agreement from the three Local Authorities.

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## Proposed Terms of Reference for a Health Protection Committee of the Health and Wellbeing Boards of Devon County Council, Plymouth City Council and Torbay Council

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### 1. Aim, Scope & Objectives

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#### **Aim**

- 1.5 To provide assurance to the Health and Wellbeing Boards of Devon County Council, Plymouth City Council and Torbay Council that adequate arrangements are in place for the prevention, surveillance, planning and response required to protect the public's health.

#### **Scope**

- 1.6 The scope of health protection to be considered by the committee will include prevention and control of infectious diseases, immunisation and screening, health-care associated infections and emergency planning and response (including severe weather and environmental hazards).

#### **Objectives**

- 1.7 To provide strategic oversight of the health protection system operating across Devon, Plymouth and Torbay.
- 1.8 To oversee the development, monitoring and review of a memorandum of understanding that outlines the roles and responsibilities of the Public Health England Centre, NHS England Area Team, Clinical Commissioning Groups (North East and West Devon & South Devon & Torbay) and upper tier/lower tier / unitary authorities in relation to health protection.
- 1.9 To provide oversight of health protection intelligence reported to the committee and be appraised of risks, incidents or areas of underperformance.
- 1.10 To review and challenge the quality of health protection plans and arrangements to mitigate against any risks, incidents or areas of under-performance.
- 1.11 To share and escalate risks, incidents and under-performance to appropriate bodies (e.g. Health and Wellbeing Boards / Local Health Resilience Partnership, NHS England) when health protection plans and arrangements are insufficient to protect the public. The escalation route will depend on the risk or area of under-performance.

- 1.12 To agree an annual programme of work to further improve local health protection arrangements as informed by the respective Health and Wellbeing Strategies for Devon, Plymouth and Torbay and their Director of Public Health's Annual Report.
- 1.13 To review and challenge arrangements for the delivery of existing and new national screening and immunisation programmes or extensions to existing programmes.
- 1.14 To promote reduction in inequalities in health protection across Devon, Plymouth and Torbay.
- 1.15 To oversee and ratify an annual Health Protection Sub-Committee annual report.

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## 2. Membership

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Chair: Director of Public Health

Members: \*Chair – Health Protection Advisory Group (PHE CCDC/Health Protection Consultant)

\*Chair - Devon, Cornwall and Isles of Scilly Screening & Immunisation Oversight Group – Consultant in Public Health (*group under development*)

\*Chair – Local Health Resilience Partnership

\*Chair – Health Care Associated Infections Programme Board (*group under development*)

Consultants in Public Health / Health Protection Lead Officers– (Devon County Council, Plymouth City Council and Torbay Council)

Head of Public Health Commissioning (Area Team – NHS England)

Head of Emergency Planning Resilience & Response – (Area Team – NHS England)

Chief Nursing Officer – (North Easter and West Devon Clinical Commissioning Group)

Director of Quality Governance – (South Devon and Torbay Clinical Commissioning Group)

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### 3. Meetings & Conduct of Business

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- 3.1 The Chairperson of the Health Protection Committee will be a Director of Public Health from either Devon County Council, Plymouth City Council or Torbay Council. Directors of Public Health serving these councils will review this position annually.
- 3.2 The quorum of the meeting will comprise the Chairperson of the Health Protection Committee or their deputy, the Chairperson of each of the four groups listed in 2 above (\*) or their representative with delegated authority to make decisions on their behalf, at least one Local Authority Consultant in Public Health (Health Protection Lead Officer) and at least one of either the Chief Nursing Officer (North East and West Devon Clinical Commissioning Group or the Quality and Safety Lead (South Devon and Torbay Clinical Commissioning Group).
- 3.3 All meeting papers will be circulated at least seven days in advance of the meeting date.
- 3.4 The agenda (standing items listed in 3.6 below) and minutes will be formally recorded. Minutes listing all agreed actions will be circulated to members and those in attendance within 14 working days of the meeting.
- 3.5 Meetings will be held bi-monthly.
- 3.6 Standing agenda items will include the following:
  - 3.6.1 *Performance report;*
  - 3.6.2 *Risk register and action plan review;*
  - 3.6.3 *Serious incidents requiring investigation;*
  - 3.6.4 *Work-programme update;*
  - 3.6.5 *Policy / evidence/guideline updates (All);*
  - 3.6.6 *Any other business.*
- 3.7 A report of the meeting will be forwarded to members of the Health and Wellbeing Boards for Devon County Council, Plymouth City Council and Torbay Council and Local Health Resilience Partnership.
- 3.8 Terms of reference will be reviewed annually.

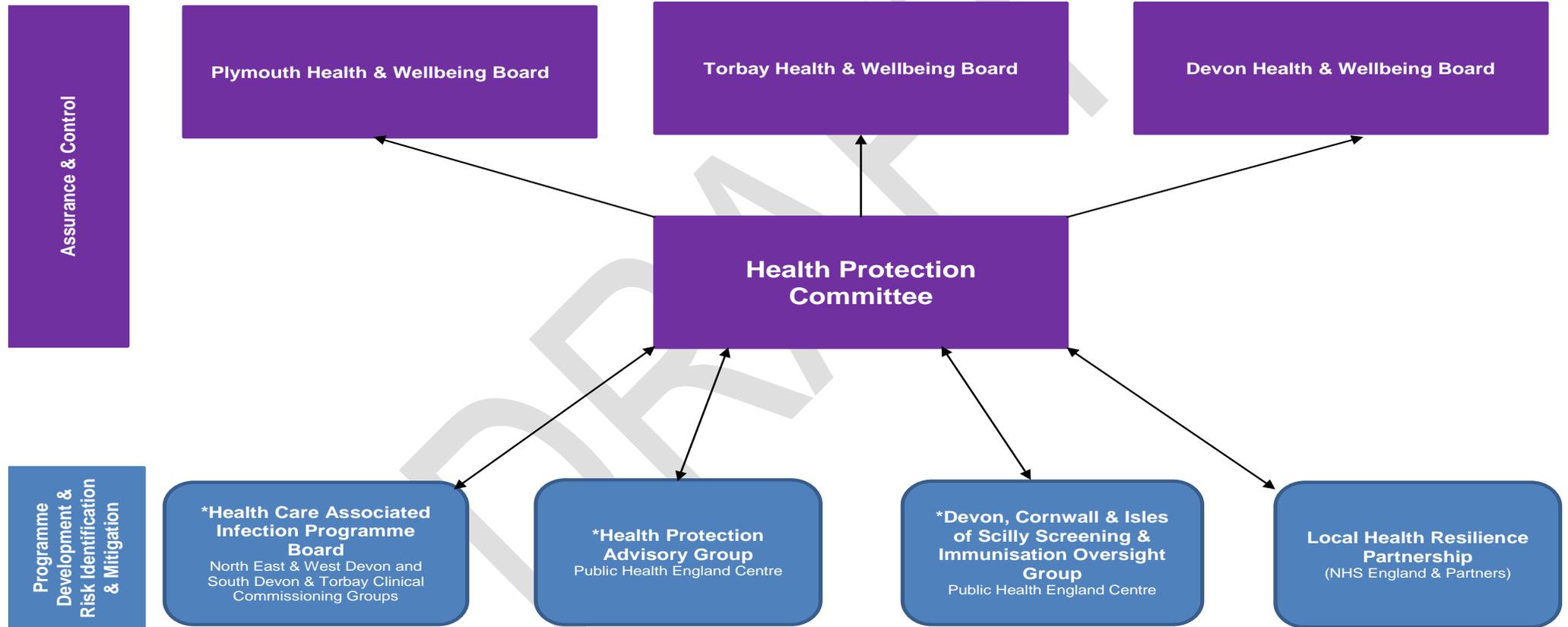
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### 4. Author

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Health Protection Committee reporting to the Devon, Plymouth and Torbay Health & Wellbeing Boards and its relationship to existing or planned health protection partnership forums



**\*Groups currently in development / Terms of Reference to be agreed.**