

Health Protection Report 2022/23

Summary for the Health and Wellbeing Board

Health Protection

Southwark Public Health

Version 2.0

February 2024

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Oversight of the local health protection system is via the Health Protection Board, established in July 2022

INTRODUCTION

This report is a summary of the Health Protection Annual Report 2022/23 that was approved by the Health Protection Board at the meeting in December 2023. It provides an overview of health protection activities, incidents, challenges and achievements between April 2022 and March 2023.

The scale of potential health protection threats faced locally and globally is significant, ranging from emerging illnesses, to adverse weather, antimicrobial resistance and chemical hazards. The impact of climate change is likely to amplify many of these threats.

Oversight and assurance of the local health protection system is via the Health Protection Board, which was established in July 2022 and is chaired by the Director of Public Health.

Figure 1: Health Protection Board structures at March 2023

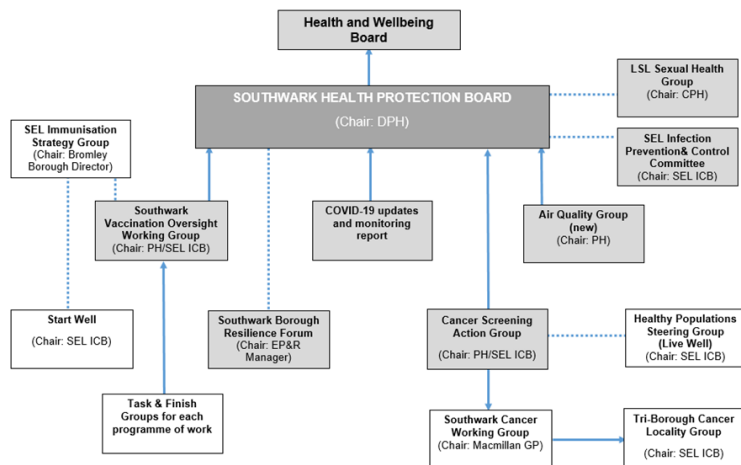


Table 1: Southwark Health Protection Board membership 2022/23:

Role	Organisation
Director of Public Health (Chair)	Southwark Council
Consultant Public Health – Health Protection	Southwark Council
Consultant Public Health – Healthy Adults	Southwark Council
Chief Operating Officer	SEL ICB
Quality Manager	SEL ICB
Head of Service Regulatory Services	Southwark Council
Head of Programmes for Health Protection	Southwark Council
Consultant in Public Health	SLHPT (UKHSA)
Infection Prevention & Control Lead	SEL ICB
Clinical and Care Professional Leads	SEL ICB
Head of Communications	Southwark Council
Emergency Planning & Resilience Manager	Southwark Council

An increase in mpox cases and the finding of polio virus in a London sewage plant both required local action

HEALTH PROTECTION INCIDENTS IN 2022/23

A number of health protection incidents occurred during 2022/23 that required on-going action across the local system throughout the period.

Mpox (May 2022):

- Elevated and increasing number of mpox cases were seen in the UK, with most cases notified in London. Mpox (formerly called monkeypox) is a rare infectious disease, usually associated with travel to west and central Africa.
- Guidance was issued for those who had symptoms to call NHS 111, or a sexual health clinic, and to stay at home and avoid close contact with other people, resulting in significant capacity challenges for the NHS, including Southwark sexual health clinics.
- Communications were cascaded and guidance / advice provided, and in July 2022 the vaccination programme was introduced for those at higher risk. Local Southwark processes were developed which were shared across London.

Polio (June 2022):

- Samples containing poliovirus (oral vaccine-derived) were discovered at a sewage plant in London, suggesting that poliovirus was spreading, most likely linked to oral polio vaccine received abroad.
- A mass vaccination campaign was launched to offer a booster to all children aged 1-9 years in London. In Southwark, primary care delivered the programme, with some outreach provided by GSTT.
- Local work to support the regional campaign included:
 - Analysis of data to ascertain neighbourhoods, ethnic groups and GP practices with lowest uptake.
 - Tailored (and translated) communications distributed widely.
 - Commissioning of two local VCS organisations to engage with communities.
 - Outreach vaccination clinics held in low uptake areas and for guests in Southwark asylum hotels.
- To date, no cases of paralytic polio have been reported in England¹.

1. <https://www.gov.uk/government/news/polio-vaccine-catch-up-campaign-for-london-as-sewage-surveillance-findings-suggest-reduced-transmission#:~:text=No%20paralytic%20polio%20cases%20have,and%20more%20recently%20in%20Israel>

An outbreak of diphtheria was managed alongside a significant increase in Group A Streptococcus infections

HEALTH PROTECTION INCIDENTS IN 2022/23

Diphtheria outbreak (November 2022):

- The UKHSA established a national enhanced incident to manage an outbreak of diphtheria associated with the Manston Immigration Centre. The recommendation was to provide antibiotics (within 10 days) and a single dose of a diphtheria containing vaccine for anyone who had left Manston or the Kent Intake Unit.
- A local working group was established and information and guidance was disseminated to initial accommodation centres (IACs), the health inclusion team (HIT) and the GP surgery linked with each IAC. Infection Prevention and Control (IPC) nurses visited each IAC and setting managers were contacted daily to identify any new arrivals who might have travelled through Kent, for follow up by HIT or primary care.
- Cases of diphtheria reduced to zero at the beginning of January 2023 and have remained low since¹.

Group A Strep (December 2022):

- Over the winter of 2022/23 there was a significant increase in cases of Group A Streptococcus (GAS) infections, including lower respiratory tract GAS, strep throat, scarlet fever and impetigo.
- There was a corresponding increase in cases of invasive Group A Strep (iGAS) particularly in children under 10 (iGAS is the most serious infection linked to GAS and can be fatal).
- A group was set up in Southwark to coordinate the response, promote cross-organisational working and to support primary care, and included stakeholders from SEL ICB, Public Health, PCNs and GPs. Communications were circulated widely, including information on symptoms, when to contact the NHS, the importance of self-isolation, good IPC and early treatment with antibiotics. Guidance and advice was provided to schools and nurseries when they reported cases or outbreaks.

1. <https://www.gov.uk/government/publications/diphtheria-cases-among-asylum-seekers-in-england-2022/diphtheria-cases-among-asylum-seekers-in-england-weekly-data-tables>

The government's living with COVID-19 strategy changed the way outbreaks were managed and the local response

COVID-19

The government's Living with COVID-19 Strategy came into effect on the 1 April 2022; the focus of this phase was on protecting those most at risk from serious illness and to manage the virus like other respiratory infections.

The main guidance changes were:

- No legal requirement to isolate if you tested positive, although the advice was to try to stay at home for five days (adults) or three days (children) if unwell or tested positive.
- Free asymptomatic & symptomatic testing ended for most individuals and settings; free testing services closed. Routine and outbreak testing remained for some high-risk settings, including care homes.
- Contact tracing stopped along with support payment schemes.
- Most surveillance mechanisms that enabled local teams to monitor the pandemic were stopped.

The Southwark Outbreak, Prevention and Control Executive was stood down and the new Health Protection Board was established along with a separate COVID-19 Oversight Group (COG). The functions of the COG included surveillance, monitoring, review of guidance changes, triggers, with a focus on high risk settings.

Southwark Public Health Acute Response Team continued to be notified of outbreaks of COVID-19 in vulnerable settings, and this function has remained in place to respond to enquiries, support settings with new guidance and to continue to monitor and respond to outbreak notifications in high risk settings.

34 outbreaks of COVID-19 (defined as two or more linked cases within 14 days) were notified to the Public Health team between April 22 - March 23; half were in care homes for older adults. Numbers of outbreaks was highest in June-July 2022, mirroring an increase in regional and national cases during this time.

Provisional data for London shows an increase in TB notifications during 2022/23

TUBERCULOSIS

Tuberculosis (TB) is a notifiable, infectious disease, caused by Mycobacterium tuberculosis bacteria. It usually affects the lungs (pulmonary TB), but can infect any part of the body. Two TB related conditions exist: latent TB infection and active TB disease.

- TB can be treated with antibiotics, and there is a vaccine available (BCG), offered to those most at risk.
- The most recent confirmed data available is up to 2021, although provisional data exists up to 2023:
 - In England in 2021, TB incidence was 7.8 per 100,000, which is below the WHO threshold for a low incidence country ($\leq 10/100,000$). TB incidence from 2011-21 decreased overall in England.
 - The main burden of disease remains concentrated in large urban areas (figure 2). The rate in Southwark in 2021 was 14.5 per 100,000 population.
 - Provisional data for London shows a 10% increase in TB notifications in the second quarter of 2023 (April to June) compared with the first quarter of 2022 (Figure 3).

Figure 2: Three-year average TB notification rates by London LA, 2019 to 2021²

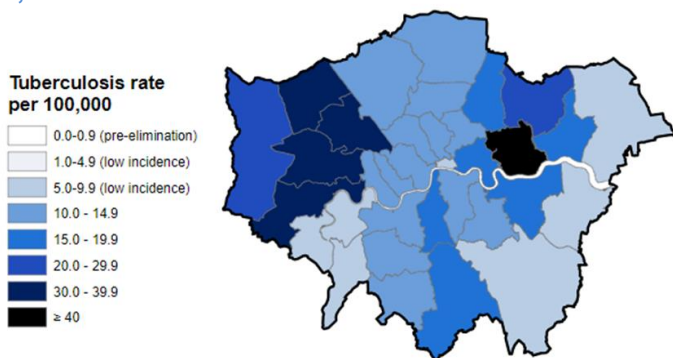
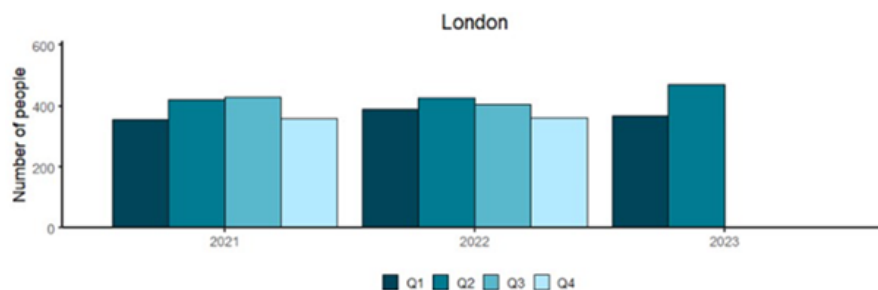


Figure 3: Number of TB notifications (provisional data), London 2021 to Q2 2023³



1. [Tuberculosis \(TB\): action plan for England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97121/tb-action-plan-for-england-2018-2025.pdf)
2. [TB incidence and epidemiology in England, 2021 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97121/tb-action-plan-for-england-2018-2025.pdf)
3. [National quarterly report of tuberculosis in England: Quarter 2, 2023 provisional data - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97121/tb-action-plan-for-england-2018-2025.pdf)

Local screening and case management for latent and active TB is in place for those seeking asylum

TUBERCULOSIS

Patterns of TB epidemiology in England in 2021 have similar geographic distribution, social and demographic factors to previous years:

- The majority of people with TB in England were born outside the UK.
- TB in England continued to disproportionately affect the most deprived populations, including groups at risk of exclusion and other health inequalities.
- TB continues to be more common in males than females.
- Certain characteristics were associated with an increased risk of TB, including imprisonment, drug and alcohol misuse, homelessness, mental health needs and asylum seeker status.

Local screening and case management:

- As part of the core health offer for asylum seekers and refugees arriving in Southwark, screening is in place to test for both latent TB and active TB. All those aged 5-65 years with no symptoms of active TB are tested for latent TB and if they have symptoms of active TB, they are referred to the TB/chest clinic for further assessment.
- The South London Health Protection Team, part of the UKHSA, manages local cases of active TB. They follow up on all cases and their close contacts are traced and screened. For infectious cases, a risk assessment is conducted to determine whether wider screening is necessary.

In July 2021, the UKHSA and NHSE launched the TB action plan for England 2021 to 2026¹, which laid out commitments to achieve the WHO TB elimination targets.

1. [Tuberculosis \(TB\): action plan for England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/97822/tb-action-plan-for-england-2021-to-2026.pdf)
2. [TB incidence and epidemiology in England, 2021 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/statistics/tb-incidence-and-epidemiology-in-england-2021)

Food safety inspections carried out found 97% of food businesses were compliant with hygiene requirements

ENVIRONMENTAL HEALTH

Environmental Health (EH) Services contribute to a number of key health protection functions, such as food safety, infectious disease control, health and safety, private sector housing standards and environmental protection.

Food safety:

- To protect the public from illness that can be associated with food, there are legal requirements governing all stages of the production, preparation and sale of food.
- Environmental Health Officers enforce these requirements, primarily through a series of routine inspections of food businesses and responding to complaints about food and allegations of food poisoning or food borne illness.
- UK food law require all food businesses to be registered with the local authority and are given a risk classification ranging from Category A to E with Category A businesses being the highest risk and Category E lowest. Higher risk businesses are inspected more frequently.
- For the period 2022/23, the EH team carried out 885 food safety inspections, which included all high risk food businesses.
- 97% of all food businesses were deemed broadly compliant with food hygiene requirements. This exceeded the national target of 75% set by the Food Standards Agency. Well regulated and compliant food businesses means there is less likelihood of food poisoning from food purchased from these businesses.
- Nearly 200 complaints of food poisoning were received during 2022-23, with all the allegations relating to single cases. There were no outbreaks of food poisoning during the period.

Scarlet fever accounted for more than a third of statutory disease notifications in 2022/23

ENVIRONMENTAL HEALTH

Infectious disease control:

- UK legislation identifies specific infectious diseases, which must be notified to the authority, and officers in the Food Safety Team deliver this function in partnership with the UKHSA South London Health Protection Team.
- During the period 2022/23, there were 364 infectious disease notifications received and processed in Southwark. Scarlet Fever was the single highest infectious disease notified accounting for 38% of the total notifications.
- Notified infections are managed by the UKHSA Health Protection Team and will include actions to prevent spread of infections, limit its effect on the population and protect high risk contacts.
- The local EH team provide support for the follow up of gastro-intestinal infections.

Damp and mould:

- Excess moisture in a building can lead to damp and mould, exposure to which is harmful to health. Moulds produce tiny airborne substances called spores, which are irritants and sometimes can be toxic. They can cause an allergic reaction or even an asthma attack.
- The Council proactively inspect houses let in multiple occupation and single family properties that are high risk. They also hear about possible damp and mould concerns through routine inspections and/or complaints received. When hazards have been identified and the landlord fails to resolve the issue then EH Officers can serve an improvement notice on the Landlord.
- The majority of cases in 2022/23 were resolved quickly and informally, without the Council having to take formal action against the landlord or managing agent.

New governance arrangements were introduced to provide assurance and take action on vaccination programmes

VACCINATION PROGRAMMES

In 2022-23, all vaccination programmes continued to be commissioned by NHS England's London screening and immunisations team. The Director of Public Health has a statutory duty to assure local immunisation programmes and promote action to reduce health inequalities.

During 2022-23, the Southwark Vaccination Oversight Group was established and reports into the Health Protection Board, the Director of Public Health and the Chief Operating Officer of Partnership Southwark. The group's role is to support the assurance function of the Director of Public Health, and to manage a programme of interventions to reduce inequalities in vaccination uptake locally.

Vaccination programme delivery in 2022-23:

- Routine childhood vaccinations including the 6 in 1¹ and MMR (measles, mumps and rubella) were delivered by general practice.
- The school age immunisations service is provided by Hounslow and Richmond Community Healthcare (HRCH), delivering school age vaccinations including HPV, Meningitis ACWY and the teenage booster.
- COVID-19 and flu vaccinations are delivered by general practice, community pharmacy, GSTT and maternity services, with HRCH delivering the school aged flu programme.
- The Health Inclusion Team offer routine and seasonal vaccinations in homeless settings and asylum seeker accommodation.
- During 2022-23, there was a shift away from a universal offer of COVID-19 vaccination to target those most at risk. Flu vaccination continued to be offered to an expanded cohort compared to before the COVID-19 pandemic, including 50-64 year olds.

1. The 6 in 1 vaccine protects against polio, diphtheria, tetanus, whooping cough and hepatitis B and Hib (a bacteria that can cause serious infections such as sepsis or meningitis).

2022-23 saw a decline in vaccine coverage, but significant local work was undertaken to tackle inequalities

VACCINATION PROGRAMMES

Seasonal vaccinations:

- COVID-19 autumn booster uptake in 2022-23 in Southwark was significantly below uptake of the primary course of COVID-19, with flu vaccination uptake also below 2021-22 levels, in line with regional and national trends.
- Significant inequalities in uptake remain, including around ethnicity, with Black ethnic groups least likely to take up the Autumn booster.
- Local work to tackle inequalities included a range of outreach events, wide communications push, attendance at cost of living roadshows and at warm spaces to offer vaccines, information & basic health checks, in-reach clinics in homeless hostels, and actions aimed at care staff.

Childhood vaccinations:

- Coverage of childhood immunisations in Southwark is above the London average, but has been declining since 2015/16. The pandemic accelerated the downward trend, likely due to increased misinformation and growing vaccine fatigue. Local research and primary care data show inequalities exist around ethnicity and deprivation.
- In 2022/23, we supported the London polio booster campaign for 1-9 year olds, and delivered multiple projects to tackle inequalities, including carrying out a health equity audit for childhood immunisations.
- School age immunisations also declined in part due to a regional move to an online only consent process.
- We supported the school age programme by working with schools and HRCH to ensure better coordination, and training community health ambassadors to promote the HPV vaccine.

Case numbers of syphilis and gonorrhoea have increased since 2021 and remain a high burden locally

SEXUAL HEALTH

Syphilis and gonorrhoea:

- Southwark has a high burden of syphilis and gonorrhoea diagnoses compared to England:
 - The rate of syphilis in Southwark in 2022 was 133 cases per 100,000 residents;
 - The rate of gonorrhoea in Southwark in 2022 was 1016 cases per 100,000 residents.
- Case numbers for both infections have increased since 2021, a trend consistent with the national picture.
- Gonorrhoea affects more men than women nationally, and almost half of all diagnoses are in gay, bisexual and other men who have sex with men (GBMSM). Rates of diagnosis are particularly high in people of Black Caribbean ethnicity or Mixed (Black Caribbean and White) ethnicity. Socio-economic factors and structural determinants of health are believed to be underlying ethnic differences in gonorrhoea rates¹. Syphilis also disproportionately affects GBMSM, with three quarters of new syphilis diagnoses nationally occurring within this community in 2019².
- Health impacts from untreated gonorrhoea include poor reproductive health, pain and infertility. Health impacts from untreated syphilis include significant problems within the brain, heart and nerves.

Chlamydia:

- Chlamydia is one of the most commonly diagnosed sexually transmitted infections in the UK and in Southwark. Detection in Southwark has fallen recently, which may be associated with reduced testing in communities where the infection is most prevalent:
 - In 2022, there were 2,997 diagnoses per 100,000 female residents aged 15 to 24.
 - The detection rate was 4,636 in 2018.
 - Southwark is still among the top 20 best performing authorities nationally for this measure.
- Health impacts from untreated chlamydia include poor reproductive health, pain and infertility.

1. HIV Prevention England, 2023, Gonorrhoea Briefing paper.

2. PHE, 2019. Addressing the increase in Syphilis in England: PHE Action Plan.

Southwark has the second highest rate of HIV in England, although *new diagnoses* are significantly decreasing

SEXUAL HEALTH

Human immunodeficiency virus (HIV):

- Southwark has high rates of HIV compared to England with 11 people per 1,000 living with diagnosed HIV in 2022: the second highest rate in the country. This position is improving.
- Co-ordinated work in Southwark, across London and nationally saw a 53% decrease in new HIV diagnoses in Southwark between 2016 and 2022, with diagnoses down from 55 to 26 diagnoses per 100,000. Southwark has the fifth highest rate of new HIV diagnoses in the country. National data from 2022 shows that HIV diagnoses have continued to fall in GBMSM groups, but have risen in heterosexual adults, particularly in women and people from ethnic minority groups, and this pattern is likely to be similar in Southwark.
- Testing promotes early diagnosis and in Southwark, HIV testing coverage compared to other areas in England is high, with 65% of eligible Southwark residents receiving tests in 2022, compared with 48% for England. Late diagnosis is the most significant predictor of HIV-related morbidity and short-term mortality.

Local action:

- Southwark works with neighbouring boroughs Lewisham and Lambeth, and the South East London ICB under the joint sexual and reproductive health strategy to improve sexual and reproductive health in the borough and tackle inequalities.
- In 2022/23 GP champions were recruited in Southwark, work was undertaken to include HIV testing as part of NHS health checks and a communication and marketing campaign was conducted to reach communities that are at increased risk of HIV transmission.

Southwark cancer screening coverage remains below national operational standards

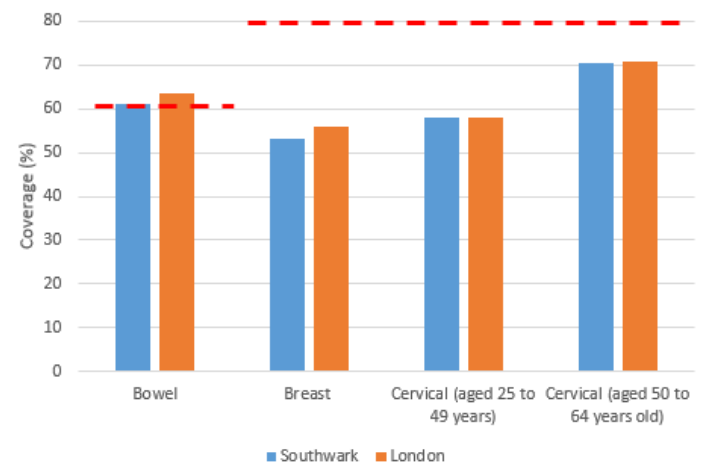
SCREENING PROGRAMMES

In 2022-23, all cancer screening programmes continued to be commissioned by NHS England's London screening and immunisations team. The Director of Public Health has a statutory duty to assure local screening programmes and promote action to reduce health inequalities.

During 2022-23, the Southwark Cancer Screening Action Group was established to drive forward actions for cancer screening to improve coverage and tackle inequalities. The group reports into the Health Protection Board, the Director of Public Health and the Chief Operating Officer of the ICB and has strong links with NHSE and the SEL Cancer Alliance.

- Current coverage is low for breast and cervical screening programmes; although bowel screening meets the national operational target (figure 5).
- Coverage is lower for those with learning disabilities, severe mental illness, those who are more deprived, and those of non-White ethnicity.
- Local work focussed on improving uptake and tackling inequalities, this involved development of animations to tackle barriers to uptake, support with awareness campaigns, work to engage primary care and work with the community including a small grants programme.
- Southwark Public Health published a Cancer Screening Joint Strategic Needs Assessment (JSNA) in 2023 with recommendations for improving coverage and access.

Figure 5: Cancer Screening Programme, April 23
(Red dashed line shows UK operational standard)



Inequalities and other performance challenges exist for other screening and early diagnosis programmes

SCREENING PROGRAMMES

NHSE commission and quality assure Abdominal Aortic Aneurysm (AAA) Screening, Diabetic Eye Screening (DESP) and Antenatal and Newborn (ANNB) Screening. SEL NHS ICB commissions school-aged vision screening.

- With the exception of school-aged vision programme, which is an opt-out programme, all programmes experience challenges with regard to coverage and inequalities.
- Mass recovery screening has improved uptake of AAA screening in Southwark, following the pandemic, however there are few permanent screening locations in Southwark and ethnic inequalities remain.
- DESP shows low uptake in certain ethnicities, deprived populations and young people. A provider change in July 2024 is possible.
- School-aged vision screening shows high coverage but access challenges remain for children who are not part of the main-stream school system.

Cancer early diagnosis work:

- The Targeted Lung Health Check programme was trialled in North Southwark in 2022/23.
 - This programme aims to diagnose lung cancer at an earlier stage when it is more treatable. The programme will re-visit North Southwark, and visit South Southwark in 23/24.
 - By June 2023, nearly 3000 lung health checks had been completed in North Southwark.
- Partnership Southwark animations were developed to improve awareness of prostate cancer in black men and how to access testing.

A comprehensive action plan is in place to monitor and reduce air pollution towards legal limits in Southwark

AIR QUALITY

UK government policy framework for air quality sets out air quality standards and objectives for key pollutants. Where the objectives are unlikely to be met, the local authority must declare an Air Quality Management Area and identify and publish actions to reduce air pollution from the excessive pollutants.

Since 2003, Southwark has declared an Air Quality Management Area, which, since January 2023, covers the entire borough.

There is an Air Quality Action Plan (AQAP) in place to monitor and reduce air pollution, and to help avoid exposure. Delivery of the AQAP is overseen by Air Quality Steering Group, chaired by the Director of Public Health, and this group identifies the challenges that Southwark will address with air quality projects. It identifies the areas that Southwark will try to tackle with air quality projects.

A number of projects were either completed, in progress or started during 2022/23, including:

- Walworth Low Emission Neighbourhood
- Working with schools; air quality audits, a starter grant and upgrading to heating systems
- Updating Southwark's pool cars and commissioning of cargo bikes
- Assessing the potential for freight consolidation
- Kerb Dock trial
- River freight trials
- airTEXT air pollution alerts redevelopment
- Asthma clinic housing inspection referrals
- Assessing potential air quality improvements from Southwark Energy Centres.
- Pan-London wood burning campaign
- Modelling and reporting tool development
- Projects to monitor and understand construction and air pollution levels

Adverse weather can impact health significantly and local plans are in place to support residents at risk

ADVERSE WEATHER

In England, the UKHSA produces an annual adverse weather plan, which is adapted locally to ensure it is fit for purpose to support residents at risk. The plans centre around a four tier alert system, based on specific temperature thresholds (table 2). Alerts are issued by the Met Office when adverse weather is forecast.

Adverse weather preparedness and response:

- Summer 2022 saw unprecedented high temperatures in London, including temperatures of 40°C between 18th and 20th July, which prompted a Level 4 heat warning. There were three other periods of heatwave temperatures (>28°C during the day followed by night-time temperatures >18°C).
- Southwark is at particular risk from hot weather, as an inner city borough with high housing density.
- There were four Level 3 cold weather alerts issued across winter 2022/23, including one cold spell that lasted 12 days.
- Local actions taken to protect health during adverse weather included signposting residents to cool and warm spaces, communicating advice to the public, signposting to cost of living and fuel poverty support, encouraging winter vaccination, and supporting rough sleepers.

Table 2: Hot and cold weather alert levels in 2022/23

	Heatwave alert levels	Cold weather alert levels
0	Year round planning all year	Year round planning all year
1	Summer preparedness and action 1 June to 15 September	Winter preparedness and action 1 November to 31 March
2	Heatwave is forecast – alert & readiness 60% or greater risk of heatwave in next 2 to 3 days	Severe winter weather forecast – alert & readiness 60% or greater risk of cold weather in next 2 to 3 days
3	Heatwave action Heatwave temperature is reached	Severe weather action Cold weather alert temperature is reached
4	Major incident Severe/prolonged heatwave	Major incident Severe/prolonged cold weather

A high level of health protection activity persists post-pandemic and programmes of work continue in 23/24

CONCLUSIONS

A broad array of health protection work was achieved during 2022/23, with some common themes emerging:

- A high level of health protection activity persists post-pandemic.
- We have seen some post-pandemic fallout, for example the high number of Group A Strep cases and the impact on breast cancer coverage.
- Opportunities highlighted from the pandemic including the benefits of close working with communities to tailor our health protection responses to what is acceptable, accessible and understandable.
- It is evident that there is an ongoing need for vigilance as an inner borough within a global city such as London, for example mpox, diphtheria amongst asylum seekers and travel related infections.

Across the Southwark system, we work most effectively through:

- A coordinated multi-partner/agency approach.
- Working closely with our communities.
- Using data smartly and ensuring a systematic approach to action planning.
- Making every contact count and thinking broadly around the holistic needs of population groups who, quite commonly, may benefit from more than one health protection intervention.

Programmes of work across all areas of health protection have continued in 2023/24, with organisations and teams working across the system to prevent and respond to all kinds of risks and working with our communities to ensure an equitable response and outcomes.

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