

Southwark Health Protection Annual Report 2023/24

Southwark Public Health Division

September 2024

Report title:	Southwark Health Protection Annual Report 2023/24
Status:	Public
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Board approval:	Health Protection Board (September 2024)
Presented to:	This report will be presented to the Health & Wellbeing Board at its November 2024 meeting
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Executive summary

This report covers the period 1 April 2023 to 31 March 2024 and provides an overview of activity, incidents, risks and achievements relating to health protection, infectious diseases, environmental risks and screening programmes in Southwark. It includes work delivered by public health, environmental health, NHS, emergency planning and VCS.

A higher level of health protection activity continues to persist following the COVID-19 pandemic and we continue to see incidents occurring. Following an increase in measles cases, the UKHSA raised its incident response level in January 2024, and there was a significant and on-going increase in pertussis (whooping cough) cough cases. Both incidents have required significant and on-going local response.

Oversight of the local health protection system is via the Health Protection Board, chaired by the Director of Public Health, and as a multiagency partnership it seeks to ensure that arrangements are in place to prevent, reduce or manage health protection risks to the local population.

Infectious diseases

- England remained a low incidence country for TB in 2022, although incidence in London increased in 2023.
- Rates of STIs remain high, although there has been some reduction and STI testing rates have increased.
- In 2022, the number of Southwark residents newly diagnosed with HIV was 62 (a 29% decrease over five years).
- There were 225 notifications of infectious disease in Southwark during 23/24, managed by the UKHSA.

Executive summary

Food safety

- 96% of all food businesses in Southwark were deemed broadly compliant with food hygiene requirements.
- There were no outbreaks of food poisoning during the period.
- Food safety inspections have been impacted by the pandemic and a national shortage of qualified officers.

Vaccination programmes

- Falling rates of MMR vaccination increased the risk for measles outbreaks in 2023/24, with cases beginning to rise significantly in Southwark from January 2024. A combination of cyclical factors and falling prenatal vaccination uptake drove a huge rise in whooping cough cases.
- Seasonal and school age vaccinations saw significant declines in coverage in 2023-24, while early data suggests childhood immunisation coverage may have stabilised following years of decline.

Screening programmes

- In 2023-24, breast screening and bowel cancer screening coverage remained low, with inequalities existing in more deprived communities, those of non-White ethnicity, those from Latin American background and those with a learning disability.
- Challenges exist for coverage of non-cancer screening programmes, and work has started to review antenatal and newborn screening inequalities.

Executive summary

Health protection in vulnerable settings

- Health protection in adult social care settings are monitored and managed via a council / ICB group and work has included management of outbreaks, infection, prevention and control and catheter care in the community.
- We have continued to work closely with our initial accommodation centres and homeless settings, providing vaccination support, health events and guidance on adverse weather and other health protection issues.

Environmental hazards

- Local work took place to improve resilience against adverse weather, particularly in light of the cost-of-living crisis.
- Adverse weather alerts and guidance were cascaded to hundreds of council teams, health & social care providers and voluntary organisations. Four heatwave alerts were issued in 2023 and two cold weather alerts over winter.
- A comprehensive action plan is in place to reduce air pollution in Southwark to around or below nationally set limits. Although air quality in Southwark is improving, it remains poor in the north-east, and along arterial roads.

Conclusions and priorities for 2024/25

- Health protection activity remained high in 2023/24, but we were able to respond to issues as they arose, and we continued to build successful partnerships. Risks continue in Q1 24/25 including for measles, pertussis and mpox.
- Programmes of work across all areas of health protection will continue in 2024/25, with stakeholders working to prevent and respond to risks and working with our communities to ensure an equitable response and outcomes.

Health protection threats remain high, ranging from emerging illnesses, outbreaks, adverse weather and other hazards

This report covers the period 1 April 2023 to 31 March 2024 and provides an overview of activity, incidents, challenges and achievements relating to infectious diseases, environmental risks and screening programmes in Southwark. It includes work delivered by public health, environmental health, the NHS, emergency planning and VCS organisations.

Context

- 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.
- There are many underlying and connecting themes, of which inequality and inclusion is particularly important. Addressing health inequalities and working closely with our communities is critical to improving and protecting the whole population.
- A higher level of health protection activity continues following the COVID-19 pandemic. Following an increase in measles cases, the UKHSA incident response level was raised in January 2024. There was also a significant increase in whooping cough cases. Both incidents required significant and on-going local response.

Oversight of the local health protection system is via the Health Protection Board, chaired by the Director of Public Health

As a multi-agency partnership, the Health Protection Board (HPB) seeks to ensure that arrangements are in place to prevent, reduce or manage health protection risks to the local population.

Functions of the HPB

1. To provide challenge and oversight of local health protection arrangements.
2. Ensuring inequalities are considered and addressed in all arrangements that reduce or manage risks.
3. Providing assurance to the Health and Wellbeing Board on health protection issues and escalate as appropriate.
4. To oversee the continual improvement and development of the health protection function in Southwark.
5. To receive updates and reports from sub-groups, partners and lead officers and make recommendations for action as necessary.
6. Ensuring clear lines of communication with all appropriate agencies in planning and response.
7. Ensuring appropriate communication with all staff and the local population as necessary.
8. Reviewing learning from health protection incidents.
9. To present an annual report to the Health and Wellbeing Board.
10. To provide a governance and assurance framework for local vaccination and screening programme delivery.

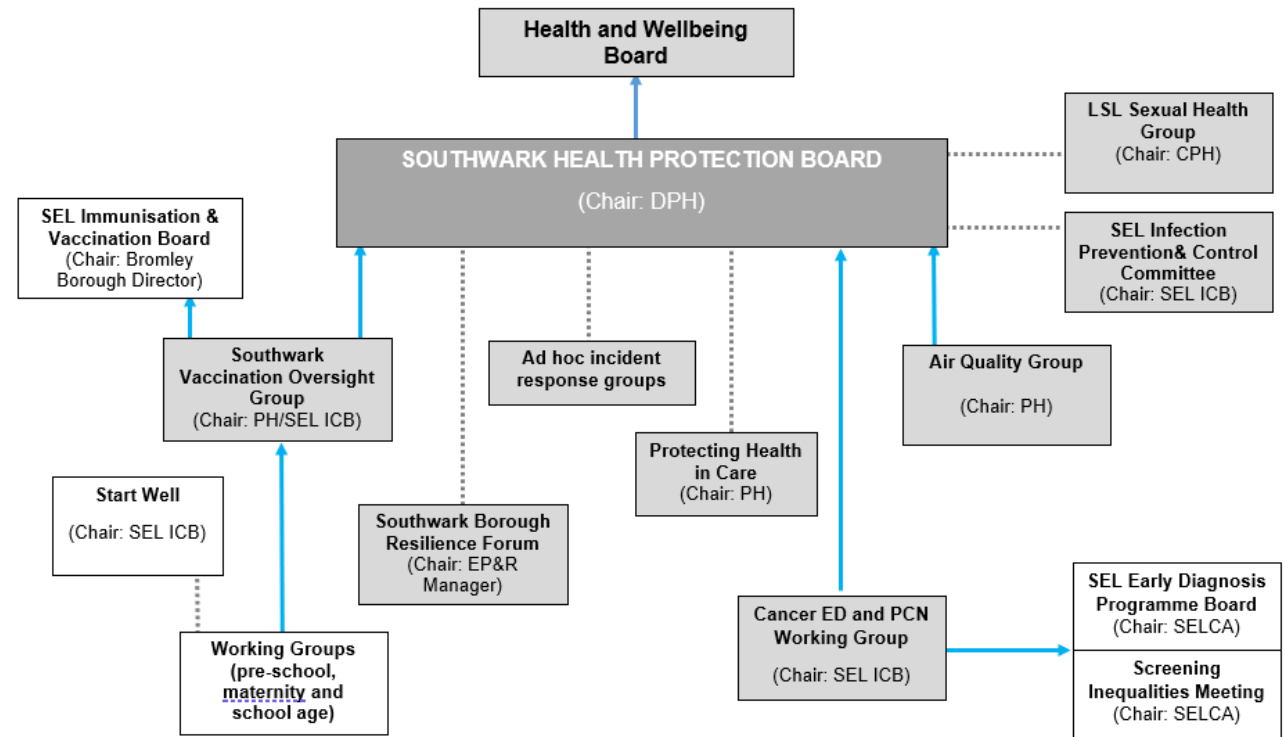
Groups and leads from across the health protection system contribute to the Health Protection Board

Membership of the HPB includes representation from across the health protection system, with groups and leads relating to health protection feeding in and providing regular updates.

Membership of the Health Protection Board

- SEL ICB
- Public Health
- UKHSA
- Environmental Health
- Emergency Planning
- Regulatory Services
- Infection, Prevention and Control
- Communications
- Clinical and Care Professional Leads
- Health & Safety
- Medicines Optimisation

Figure 1: Health Protection Board Structures, March 2024



TB incidence in England remains low but we are not on target to achieve the WHO elimination commitment by 2035

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.

Globally, TB remains the second leading single agent infectious killer after COVID-19, with more than 10 million people falling ill with TB every year and 1.4 million dying globally.

WHO established a global End TB Strategy in 2015¹, which aims to end the global TB epidemic by 2035 as part of the United Nations (UN) sustainable development goals. Although England remains a low incidence country for TB, we are not on target to reach the commitment in the WHO strategy to reduce TB incidence by 90% by 2025 and TB rates have diverged further from the trajectory required to reach elimination.

TB can be treated with antibiotics, and there is a vaccine available (BCG), offered to those most at risk, including:

- Some babies and infants (those who live in a high incidence area in the UK or if they have a parent/grandparent born in a high-risk country or if they are in close contact with someone who has TB).
- Some travellers.
- People at risk through their work.

TB rates are highest in large urban areas and the disease disproportionately affects the most deprived populations

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).

- TB rates are highest in large urban areas, with London region having the highest notification rate at 17.9 per 100,000 population (2022 data). In Southwark, the three-year average 2020 to 2022 was 14.5 per 100,000 population (figure 2).
- 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).
- Almost 80% of active TB notified in England was in people born outside the UK in whom rates remained high and steady, while rates of new TB notifications continued to slowly fall in those born in the UK
- TB in England disproportionately affects the most deprived populations, including groups at risk of exclusion and other health inequalities.
- Drug misuse was the most common social risk factor in those born in the UK (15.3%), compared with homelessness (6.5%) and being an asylum seeker (6.4%) in the non-UK born population

Figure 2: Three-year average TB notification rates by London LA, 2020 to 2022²

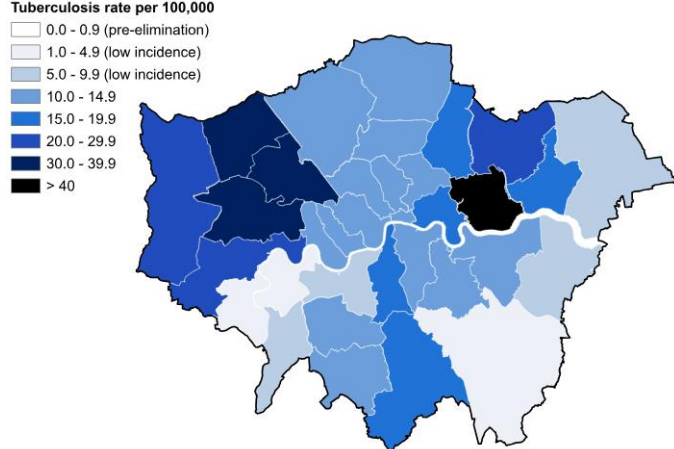
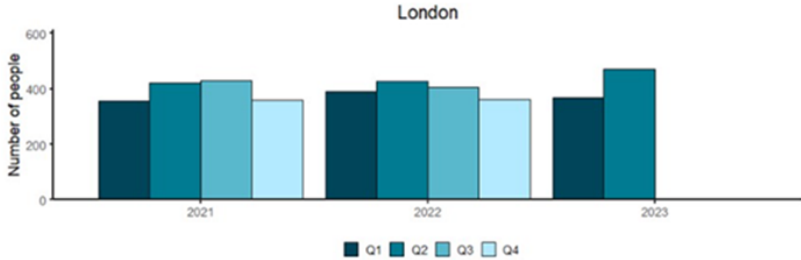


Figure 3: Number of TB notifications (provisional data), London 2021 to Q2 2023³



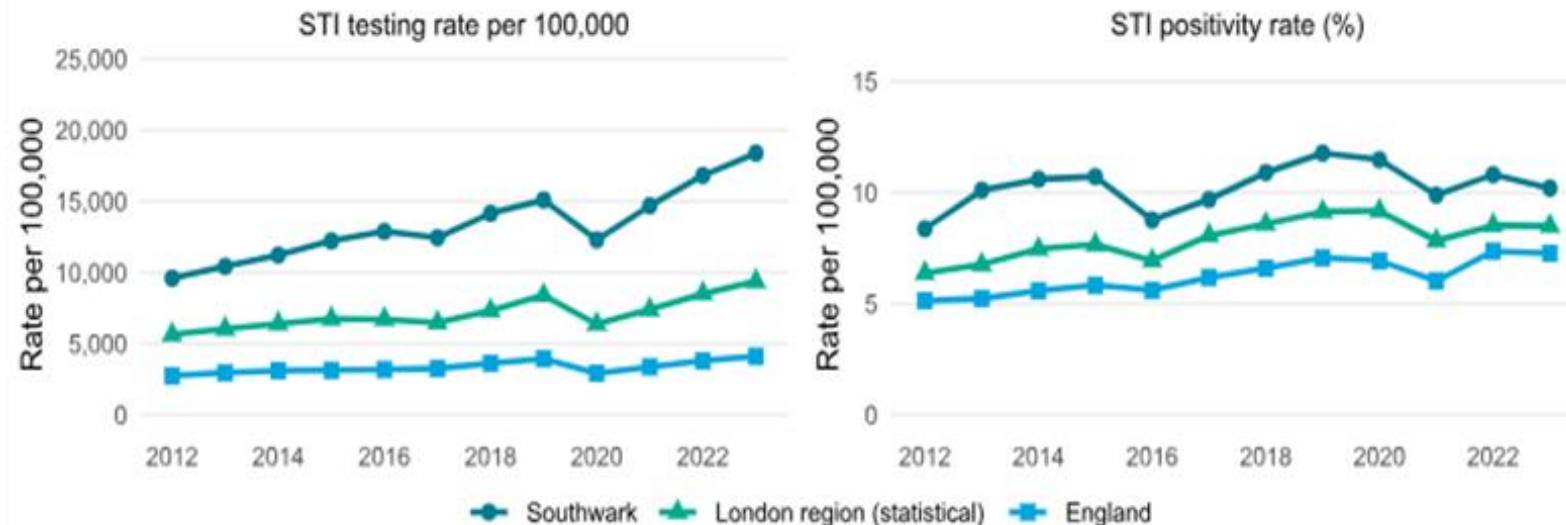
1. Tuberculosis (TB): action plan for England - GOV.UK (www.gov.uk)
2. TB incidence and epidemiology in England, 2021 - GOV.UK (www.gov.uk)
3. National quarterly report of tuberculosis in England: Quarter 2, 2023 provisional data - GOV.UK (www.gov.uk)

STI diagnoses remain high, however there has been some reduction in STIs and STI testing has also increased

In 2023, Southwark had the second highest rate of new STIs diagnoses in England, with a 4% increase in new STI diagnoses compared to 2022.

Despite the slight increase in STI diagnoses, this should be considered in the context of high STI testing rates in Southwark. In 2023, the rate of STI testing in Southwark increased by 9% compared to 2022, which is considerably higher than the rate of testing in England (18,289 per 100,000 vs 4,111 per 100,000).¹

Figure 4: STI testing rate and positivity rate (excluding chlamydia in under 25 year olds) per 100,000 population by year in Southwark and England: 2012 to 2023



1. Office for Health Improvement and Disparities. Public health profiles. 2024 <https://fingertips.phe.org.uk>.

Southwark has high rates of syphilis, gonorrhoea and chlamydia, all of which have health impacts if not treated

Southwark has the third highest rate of syphilis and the second highest rate of gonorrhoea in England.

Syphilis and gonorrhoea

- Southwark has the third highest rate of syphilis in England; however, this is improving as rates of syphilis declined by 10% from 2022-2023.¹
- Southwark has the second highest rate of gonorrhoea, which increased by 5% from 2022 to 2023.¹
- Across London, there remains high rates of syphilis and gonorrhoea, which suggests the need for a pan-London approach to reduce rates.
- The high rates of syphilis and gonorrhoea are of high concern due to health risks of untreated syphilis and anti-microbial resistant gonorrhoea.

Chlamydia

- Southwark has the third highest rate of chlamydia in England. In 2023, chlamydia rates in Southwark increased by 3% compared to 2022.
- Chlamydia often does not have symptoms, so asymptomatic testing is important for detecting it. Detection in Southwark has fallen recently, which may be associated with reduced testing in communities where the infection is most prevalent. However, the detection rate is still high and in line with England's detection rate.

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

In 2022, the number of Southwark residents aged 15 years and older who were newly diagnosed with HIV was 62; this represents a 29% decrease in the last 5 years.

Human immunodeficiency virus (HIV)

- In 2022, the number of Southwark residents aged 15 years and older who were newly diagnosed with HIV in the UK was 62. The rate of new diagnoses per 100,000 residents was 20.2 (compared to an England rate of 4.3 per 100,000). This represents an 11% decrease since 2021 and a 29% decrease in the 5 years since 2017.
- Southwark has a higher number of residents who are at risk of HIV who would benefit from taking PrEP to prevent HIV. In 2022, 21.8% of HIV-negative people accessing sexual health clinics in Southwark were defined as having PrEP need. Among these, 79.4% initiated or continued PrEP.
- Late diagnosis is the most significant predictor of HIV-related morbidity and short-term mortality. In Southwark, the percentage of late HIV diagnoses between 2020 - 22 was 40.9%, similar to 43.3% in England. In Southwark, late diagnosis is higher amongst heterosexual men than Gay, Bisexual and Men who have Sex with Men.

Local action for HIV and STIs have focussed on prevention, reducing stigma and identifying undiagnosed cases

Local action taken has aimed at prevention and reducing inequalities.

- A new local HIV prevention and testing project targeted at Black communities has engaged over 50 Black residents in its first month and supported residents to reduce their HIV risk, including referring eligible residents to the sexual health clinics for PrEP.
- Two GP HIV champions were funded to work with primary care colleagues to reduce HIV stigma and increase HIV testing in primary care. The champions have also been working with the Terence Higgins Trust to deliver HIV awareness training to Healthcare Assistants.
- The Public Health team have funded a PrEP advocacy project, which is training Black residents in Southwark to confidently talk to their communities about HIV and prevention, including the benefits of taking PrEP.
- Southwark, Lambeth and Lewisham councils commissioned The Love Sex Life partnership to help reduce sexual health inequalities among Black communities living in the boroughs. This champions and advocates for culturally specific and sensitive sexual health services that represent the Black communities to provide care that is relevant to their lived experience, which included support to increase awareness of STIs and provision of condoms.
- An interim young person service was commissioned, which engaged diverse young people across the borough, teaching them about STIs, HIV and how to reduce risky sexual behaviour and prevent STIs and HIV. Similarly, Southwark funded a condom distribution scheme for young people to support young people to reduce their risk and engage in safer sex practices.

There were 225 notifications of infectious disease in Southwark during 23/24, managed by the UKHSA Health Protection Team

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

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 2023/24, there were 225 infectious disease notifications¹ received and processed in Southwark.
- Notified infections are received and managed by the UKHSA South London Health Protection Team. Management will include actions to prevent the spread of infections, limit its effect on the population and protect high risk contacts.
- The local EH team provide support to the UKHSA for the follow up of gastro-intestinal infections.

1. <https://www.gov.uk/guidance/notifiable-diseases-and-causative-organisms-how-to-report>.

The food safety function aims to protect against food related illness and is the responsibility of Environmental Health

The primary aim of the food safety service is the prevention of food-related illness, best achieved by encouraging effective management by those responsible for preparing and supplying food.

- The service checks business compliance with food law requirements, primarily through a series of routine inspections of food businesses and responding to complaints about food and allegations of 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 (A highest risk; E lowest). Higher risk businesses are inspected more frequently.
- In 2023/24, the service carried out 936 food safety inspections, which included all high-risk food businesses.
- Owing to the cumulative impact of the pandemic, a significant number of food businesses in the lowest risk category are overdue an inspection. Measures are in place to realign with the expected inspection frequency and the Food Standards Agency (FSA), the government agency responsible for food safety, is aware of our position.
- There is a national shortage of suitably qualified and experienced officers available to deliver food safety regulation. This is a challenge for the service.
- 96% of all food businesses were deemed broadly compliant with food hygiene requirements, exceeding the national target of 75% set by the FSA. Well-regulated and compliant food businesses means there is less likelihood of food poisoning from food purchased from these businesses.
- 213 complaints of food poisoning were received during 23/24. There were no outbreaks of food poisoning.

2023/24 saw very high levels of measles cases in Southwark and across London, which required local action

Falling rates of MMR vaccination increased risk for measles outbreaks in 2023/24, with cases beginning to rise significantly in Southwark from January 2024.

Measles incident and the MMR vaccination programme

- UKHSA modelling in spring 2023 predicted large measles outbreaks in London due to low MMR vaccination uptake post pandemic.
- In response, Southwark, SEL and London systems launched campaigns to promote measles vaccination, including a primary school catch-up model delivered by school age immunisations providers, a range of communications activity, and a Southwark small grants programme to promote vaccine confidence.
- Southwark & London did not see significant numbers of measles cases until January 2024, following a large outbreak in the West Midlands which began in autumn 2023. UKHSA declared a national incident in response to rising measles cases in January 2024.
- Measles cases were more common in more deprived areas, largely due to vaccine inequalities.
- Locally, a measles response strategy was developed in partnership with primary care, SEL ICB and the South London Health protection team.
- As part of the response, local action included delivering training on MMR vaccination to community health ambassadors, and pop-up vaccination clinics were organised in a range of Southwark libraries and children & family centres.

A mixture of cyclical factors and falling prenatal vaccination uptake drove a huge rise in whooping cough cases in 2023/24

Whooping cough tends to spike on a 4 to 5 year cycle, but the impact of the pandemic and falling prenatal vaccination rates led to unusually high numbers of cases in 2023/24.

Whooping cough (pertussis) incident:

- Whooping cough prenatal vaccination protects newborns from whooping cough until they are old enough to get the 6 in 1 vaccine.
- The 6 in 1 vaccine and the pre-school booster vaccine give children good protection against whooping cough, and particularly from severe disease, however immunity wanes over time, so the vaccine provides limited protection from transmission in teenagers and adults.
- Across England, between January and March 2024, there were 2,793 laboratory confirmed cases of pertussis, compared with 858 in the whole of 2023.
- Across England, and to June 2024 10 infants have unfortunately died in this current outbreak since November 2023¹. As far as we are aware, no infants have died in Southwark.
- In response to the rising pertussis cases, a South East London maternal vaccinations working group was stood up, and a range of communications and engagement activity with pregnant people took place.

Robust oversight arrangements are in place that provide assurance and support for all vaccination programmes

In 2023-24, all vaccination programmes continued to be commissioned by NHS England regional teams, with the Director of Public Health (DPH) responsible for assuring vaccination programmes and promoting actions to tackle inequalities.

Vaccination programmes in Southwark are overseen by a Vaccinations Oversight Group, reporting to the DPH via the Health Protection Board, and to the Director of Partnership Delivery and Sustainability and senior management team of Partnership Southwark.

Table 1: Vaccination programme providers and changes in 2023/24

Vaccination programme	Provider	Changes in 2023/24
Prenatal vaccinations (including pertussis, and seasonal flu & COVID-19)	Maternity services; primary care	None
Routine childhood immunisations (0-4s)	General practice	None
School age immunisations (HPV, DTP, MenACWY, school flu)	Hounslow & Richmond Community Healthcare	Years 9–11 added to school flu programme (so now reception to year 11)
Adult vaccinations (shingles, pneumococcal; seasonal)	Primary care	Flu & COVID-19 autumn booster limited to 65+ (previous year was 50+)

Note: The Health Inclusion Team at GSTT provide vaccinations to asylum seekers and homeless populations.

Coverage of MMR is around the London average, but lower than the level required to achieve community (herd) immunity

Early data suggests childhood immunisation coverage may have stabilised following years of decline.

- Final annual data for most childhood immunisation programmes is published in September 2024, but Q4 data suggests that Southwark 6 in 1 coverage was around the London average, while MMR coverage was higher than the London average.
- Both remain well below the 95% target set by WHO (95% coverage is required to achieve herd or community immunity).
- Work to reduce inequalities this year included pop-up MMR clinics; a small grants programme to fund community groups tackling vaccine hesitancy, and an immunisation health equity audit.

Table 2: MMR & 6 in 1 (polio, diphtheria, hepatitis B, tetanus, pertussis, hib) (Q4 23/24 data)

Vaccine	Coverage at 24 months		Coverage at 5 years	
	Southwark	London	Southwark	London
MMR 1	84.5%	81.4%	86.7%	85.2%
MMR 2	-	-	81.1%	73.6%
6 in 1	87.2%	87.5%	87.8%	87.2%

1. Quarterly vaccination coverage statistics for children aged up to 5 years in the UK (COVER programme): January to March 2024 - GOV.UK (www.gov.uk)
 2. Human papillomavirus (HPV) vaccination coverage in adolescents in England: 2022 to 2023 - GOV.UK (www.gov.uk)

Vaccination coverage declined in Southwark in 2023-24, while work continued to address inequalities

Seasonal and school age vaccination coverage saw significant declines in 2023-24.

- **Maternity immunisations:** Coverage in Southwark and South East London was below the London average across all maternal programmes.
- **School age immunisations:** Coverage of the HPV vaccine has dropped recently and is lower than the London average (table 3). Work took place with schools and the provider to improve the vaccination process and engage with parents and children about the HPV offer. Coverage of school-aged flu vaccination also fell significantly in Southwark (although remained at around the London average).
- **Seasonal immunisations:** In line with London trends, seasonal flu and COVID autumn booster uptake was lower than in previous years, despite significant outreach work and communications activity.

Table 3: HPV vaccination coverage (22-23 academic year)

Vaccine coverage	Southwark	London	England
HPV1 in year 8 females	52.7%	59.0%	71.3%

The Southwark Cancer Working Group oversees projects focussing on improving uptake and reducing inequalities

In 2023-24, all cancer screening programmes continued to be commissioned by NHS England London. The Director of Public Health has a statutory duty to assure local screening programmes and promote action to reduce health inequalities.

Cancer Working Group

- The Cancer Working Group drives action for cancer screening and early diagnosis programmes to improve coverage and tackle inequalities, alongside managing operational challenges, and living with cancer actions.
- The group reports into the Health Protection Board, the Director of Public Health and has strong links with NHSE and the SEL Cancer Alliance.

Local public health work

- Three bids for funding from the SEL Cancer Alliance were successful in 2023/24:
 - To run a series of in-depth cancer workshops with an interpreter, with the first four being delivered during 23/24 in Spanish, Tigrinya and Arabic.
 - To develop cervical screening videos with the London School of Communications, aimed at young women.
 - The mandatory integration of cancer early diagnosis discussion into all NHS health checks.
- Small grant project work continued with local VCS groups including IRMO, SRCF and Flashy Wings.
- Outreach work also continued this year with key events including World Cancer Day and Carnival Del Pueblo.

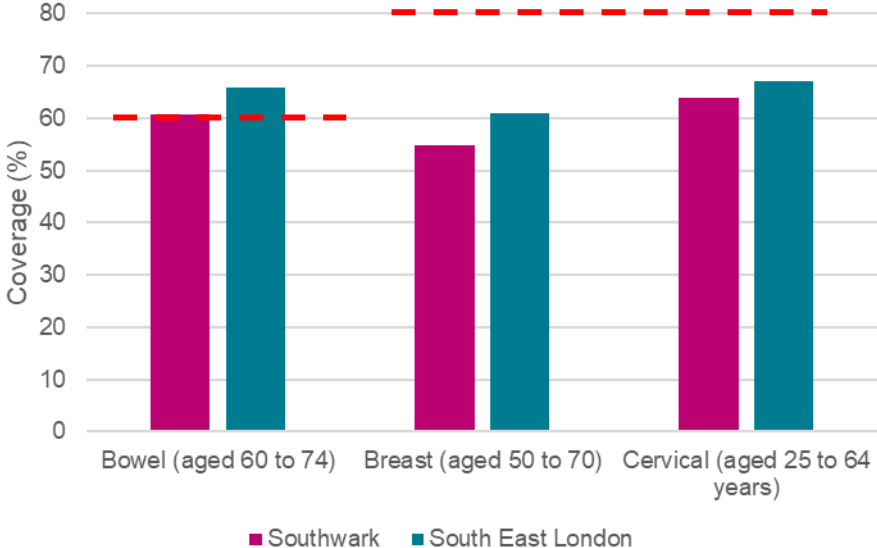
Southwark cancer screening coverage for breast and bowel screening remained below national standards in 2023/24

In 2023-24, breast screening coverage in particular remained low with inequalities relating to deprivation.

Current screening coverage

- Current coverage is low for breast and cervical screening programmes; although bowel screening meets the national operational target (figure 5).
- Coverage is lower in more deprived communities, those of non-White ethnicity, those from Latin American background and those with a learning disability.
- Coverage for people with autism and severe mental illness vary depending on screening programme, but in general tend to be lower.

Figure 5: Cancer screening coverage, Apr 23
(Red dashed line shows UK operational standard)



Other early cancer diagnosis programmes

- The targeted lung health check programme visited Southwark during 23/24.
- On-going promotion for men with a family history of prostate cancer and Black men to discuss testing with their healthcare professional.

1. SEL ICS BI Team (2024). South East London Cancer Screening Dashboard. <https://sus.sharepoint.com/sites/SELANalyticsInsight/SitePages/Cancer%20Screening.aspx> (Accessed: 18 June 2024).

Challenges exist for non-cancer screening, and work has started to review antenatal and newborn screening inequalities

NHSE commission abdominal aortic aneurysm (AAA), diabetic eye (DESP) and antenatal and newborn (ANNB) screening programmes; SEL ICB commission school-aged vision screening.

Coverage

- There are some concerns regarding coverage and inequalities for AAA screening and DESP. Unpublished data shows that coverage for AAA screening in Southwark is among the lowest in SEL.
- School-aged vision screening has good coverage as it is an opt-out programme, delivered at school in reception.
- Coverage is within acceptable or achievable range for all ANNB programmes, however concerns around inequalities prompted a preliminary ANNB inequalities review.

Preliminary ANNB Screening Inequalities Review

- Published national literature and local data on ANNB screening inequalities is limited, however what is available suggest there are inequalities regarding ethnicity, deprivation and disability status.
- Language barriers, lack of public awareness of the benefits of screening / early presentation, and fear of accessing health services are likely to contribute to inequalities for all programmes.
- Initial recommendations include improved data sharing and monitoring, engagement and communication around the importance of ANNB screening and early presentation to maternity services, review of protocols and support for health inclusion groups, improved staffing and training for staff. This work will be continued in 24/25.

Health protection issues in vulnerable adult social care settings are monitored and managed via a council / ICB group

During the pandemic, a group was set up to monitor and mitigate health protection risks in adult social care; this has continued as the Protecting Health in Care Group, chaired by Public Health.

The aim of the Protecting Health in Care Group (PHIC) is to promote joint working between Southwark Council Public Health, Adult Social Care and Commissioning teams, the SEL ICS Community Infection Prevention and Control (IPC) team and the QHS GP care home service, on issues related to health protection in adult social care settings, which includes care homes, domiciliary care and supported living.

During 2023/24 the following was achieved:

- Reflected on lessons learned during the pandemic to inform future preparedness and resilience.
- Continued to monitor and provide guidance and manage outbreaks of infectious diseases, including COVID-19.
- Contributed to winter and summer planning, preparedness and operational response.
- Managed issues arising from IPC audits in care homes and other IPC guidance.
- Development of branded temperature cards plus advice for distribution to those receiving home care.
- Considered views of staff to support improvements in vaccination rates among care home staff.
- Started work on catheter care needs in the community, including data collection and training for domiciliary care staff to improve catheter care.
- Supported good practice guidance around family/resident engagement.

There are ongoing risks of infectious disease spread in initial accommodation centres due to living in close quarters

We have continued to work closely with our inclusion health settings, including initial accommodation centres for asylum seekers and homeless hostels.

The Southwark borough asylum seeker and refugee health and wellbeing group reports health protection issues into the Health Protection Board. The Public Health, Inclusion Health Group meets monthly to provide updates on work with inclusion health groups and identify areas for collaboration.

Health protection concerns in IACs

- The response to high risk of diphtheria in asylum seekers arriving via the channel continued. A large surge in arrivals requiring prophylaxis put huge pressure on accommodation providers, GPs and the Health Inclusion Team (HIT). A surge plan was developed, and in November 2023 the UKHSA advised the risk level had reduced and there were more robust systems for testing and treatment at initial reception centres, eg Manston. The focus of local authority level response would be on timely GP registration, health assessments and vaccine catch up.
- An outbreak of chickenpox occurred at a Southwark IAC with 14 cases identified. The response was managed by the South London Health Protection Team.
- There is an ongoing risk of infectious disease spread in IACs due to families living in close quarters and an increase in room sharing among single residents since Operation Maximise (Home Office initiative to increase bed spaces available in asylum accommodation). Additionally, people who are ASR are in a poorer health state¹.

We regularly support vaccination and wider health and wellbeing clinics and events in inclusion health settings

Various vaccination and wider health and well-being events were held in initial accommodation centres and homeless settings during 2023/24.

Vaccine clinics in IACs

- The Health Inclusion Team (HIT) ran vaccine catch up clinics in the IACs which focused on MMR and pertussis vaccines in response to the high rates of these infections.
- In addition, the HIT ran winter vaccination clinics in the IACs offering COVID-19 and flu vaccines to those eligible, including school age children who did not receive the vaccine at school.

Health and wellbeing events in homeless settings

- Four health and wellbeing events were held in homeless settings in Autumn 2023 to promote and deliver COVID-19 and flu vaccinations. Alongside vaccine delivery there was a wider health and wellbeing offer including TB and blood-borne-virus screening.
- There was positive feedback from the service providers and clients who attended the events with more similar events planned for the coming year.

Local work took place to improve resilience against adverse weather, particularly in light of the cost of living crisis

UKHSA produce an adverse weather & health plan, which is operationalised locally by local authorities and the NHS, principally through a weather health alert cascade

Adverse weather

- The Public Health team administer the alert system for Southwark, with alerts and planning guidance cascaded to hundreds of council teams, health & social care providers and voluntary organisations.
 - During summer 2023, 1 amber heat health alert and 3 yellow heat health alerts were issued for London.
 - During winter 2023-24, 1 amber cold health alert and 1 yellow cold health alert were issued for London.
- Further work took place to improve resilience to adverse weather, including:
 - A cold weather emergency planning exercise
 - Signposting webinars to improve frontline staff's ability to signpost to services such as cost of living support, fuel poverty support and vaccinations which improve winter resilience
 - Targeted work with GPs to improve the hot weather action cards for primary care.
- An in-depth needs assessment will be conducted in 24/25 to gather evidence of the health impacts of hot weather and assess the vulnerability of Southwark residents and the built environment to overheating.

A comprehensive action plan is in place to reduce air pollution in Southwark to around or below nationally set limits

A UK government framework sets out air quality standards and objectives for key pollutants, and 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.

Air quality

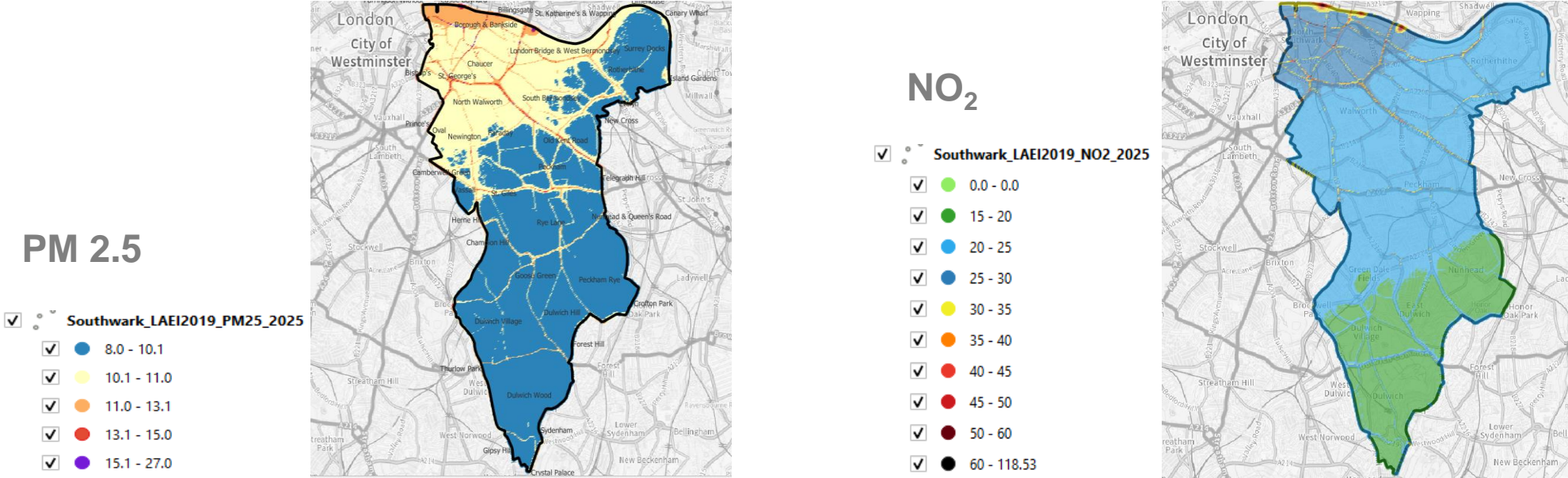
- The majority of Southwark was declared an Air Quality Management Area in 2003. However, since January 2023, this applies to the entire borough.
- There is an Air Quality Action Plan (AQAP) in place to monitor and reduce air pollution, and to help avoid exposure. Delivery of the AQAP is overseen by Air Quality Steering Group (AQSG). The steering group which meets quarterly, identifies the air quality challenges that Southwark faces, determines priority air quality matters for attention and monitors the authority's progress delivering the AQAP.
- All of the monitoring and core statutory duties in the Air Quality Action Plan were completed. However, few actions targeted for completion in the period 2023/24 were delayed owing to external factors such as reliance on third party providers and financial constraints, these will be completed during 2024/25.

Air quality in Southwark is improving, but remains poor in the northwest of the borough and along arterial roads

The maps show the projected improvement in air quality by 2025.

- Highest levels of fine particulate matter (PM2.5) and Nitrogen Dioxide (NO2) remain in the northwest of the borough and along arterial roads.
- Compared to previous years, this shows an improvement in air quality.

Figure 6: Modelled air quality for 2025 (PM 2.5 and NO₂)



The cross-cutting Air Quality Action Plan is targeting key features of air pollution in Southwark

A number of projects aimed at improving air quality were either completed, in progress or started during 2023/24.

Table 6: Current and on-going air quality projects

Air quality projects	
Working with schools; air quality audits, a starter grant and heating system upgrade	Assessing potential air quality improvements and obtaining permits for Southwark Energy Centres
Asthma awareness raising and indoor air quality monitoring	Pan-London wood burning campaign
Bookable permit holder only loading bays	Pan-London anti-idling campaign
Updating Southwark's pool cars and commissioning cargo bikes	Pan-London Non-Road Mobile Machinery at events, road works, and waste sites
Assessing the potential for freight consolidation	Multi-borough canal boats engagement project
Kerb Dock trial	Extending the Smoke Control Area to waterways
airTEXT air pollution alerts redevelopment	Modelling and reporting tool development
Asthma clinic housing inspection referrals	

Conclusions

Health protection activity remained high, bringing various challenges in 2023/24, but there have been many successful partnerships built and areas of work completed.

- The impacts of the pandemic continued, which exacerbated some health protection risks in 2023/24. Low vaccination rates, partly due to vaccine fatigue, increased the risk of measles and whooping cough cases and outbreaks, and other infections remained in circulation, such as mpox and Group A Streptococcus.
- We continued, however, to build on opportunities. This included the benefits of close working with communities to tailor our preparedness activities as well as our response to promote equity, tackle inequalities and to ensure our response is accessible, understandable and acceptable to our residents.
- It is evident that close partnership working across the council, SEL ICB, local VCS and national bodies, promotes more effective management and mitigation of the impacts of health protection incidents. This is illustrated by the array of successful partnership working in place across the health protection system.
- Horizon scanning and preparedness to mitigate the impacts of emerging infections and other health protection hazards remains of utmost importance, especially given the international diversity of our borough at the heart of a such a global city.

Emerging issues in Q1 and Q2 of 2024/25

In the first half of 2024/25, we have continued to respond to increased numbers of measles and whooping cough infections, and a new strain of mpox has emerged in parts of Africa.

- Continued high transmission of measles has occurred between April and September 2024, with an additional national back to school campaign amid concerns of a further surge in cases as children go back to school.
- Extremely high number of whooping cough (pertussis) case notifications also continued, particularly during quarter 1 of 2024/25.
- In August 2024 the WHO declared the upsurge of mpox (clade I) in the Democratic Republic of Congo and a growing number of countries constitutes a public health emergency of international concern¹. In London, vaccination continues to be offered to high-risk men (GBMSM) attending sexual health clinics.
- A new vaccination programme was rolled out from 1 September for older adults aged 75 to 79 and pregnant women, to protect against respiratory syncytial virus (RSV). RSV is a common virus causing coughs and colds, that can make babies and older adults seriously ill.
- Other emerging issues include the rise of antibiotic resistance gonorrhoea cases in England and the on-going threat of vector-borne diseases (illnesses that can be transmitted to humans by other living organisms such as mosquitoes and ticks).

1. <https://www.who.int/news/item/14-08-2024-who-director-general-declares-mpox-outbreak-a-public-health-emergency-of-international-concern>

Health Protection priorities in 2024/25

Programmes of work in 2024/25 will continue to build on achievements of previous years, with stakeholders working across the health protection system to prevent and respond to various risks and working with our communities to ensure an equitable response and outcomes.

Health Protection priorities for 2024/25 include:

- A focus on developing robust and tested frameworks and plans to improve system preparedness for potential health protection threats, including pandemics, outbreaks and incidents.
- Contributing to the national Future of the Health Protection System (FHPS) work. This is a collaboration between Health Protection strategic system partners to enhance the resilience, effectiveness & scalability of the national and local health protection system. FHPS has a vision to enhance the current system to ensure it is locally delivered, regionally enabled, and nationally supported, to achieve a joint ambition of having the best possible health protection system for England.
- Exploring new and innovative ways to work better with our communities, particularly those who might be more vulnerable to health protection threats.
- Continuing to provide an effective system-wide response to health protection risks and hazards as they arise.

Find out more at:
www.southwark.gov.uk/publichealth