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Document Title	Lothian Joint Health Protection Plan 2018-2020

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REPORT TO: Members' Library Service

MEETING DATE:

BY: Head of Communities and Partnerships

SUBJECT: Lothian Joint Health Protection Plan 2018-2020

1 PURPOSE

- 1.1 To inform Members of the Lothian Joint Health Protection Plan 2018-2020.

2 RECOMMENDATIONS

- 2.1 Members are asked to note the content of this report and the approval by the Chief Executive of the Lothian Joint Health Protection Plan 2018-2020.

3 BACKGROUND

- 3.1 The Council's Protective Services' Environmental Health team undertakes investigations into a range of public health issues, e.g. food poisoning and certain gastrointestinal illnesses and communicable diseases, local contamination incidents, chemical spills etc, as well as undertaking local environmental monitoring and inspections. Much of this work is carried out in liaison with other agencies and council services, but there is particularly close partnership working between Officers of Environmental Health and NHS Lothian's Health Protection Team.
- 3.2 The Public Health etc (Scotland) Act 2008 provides the statutory framework for Local Authorities and Health Boards to protect public health as well as clarify their respective roles. The Act sets out the duties of Scottish Ministers, health boards and local authorities to continue to make provision to protect public health in Scotland
- 3.3 'Protecting public health' for the purposes of the 2008 Act means 'the protection of the community ... from infectious diseases, contamination or other such hazards which constitute a danger to human health; and includes the prevention of, the control of, and the provision of a public health response to such diseases, contamination or other hazards'.

- 3.4 The Act places a duty on health boards and local authorities to designate 'competent' persons to undertake functions assigned to them under the Act. The Act contains extensive powers for both local authorities and Health boards to carry out public health investigations.
- 3.5 A duty of co-operation is placed on health boards and local authorities in exercising the functions under the Act. Each health board must prepare a Joint Health Protection Plan for its area, and must consult the relevant local authority or local authorities in doing so.

Lothian Joint Health Protection Plan 2018-2020

- 3.6 The Lothian Joint Health Protection Plan 2018-2020 for NHS Lothian and Local Authorities has been produced in accordance with the Part 1 guidance for the Public Health etc (Scotland) Act 2008 from Scottish Government and is attached as Appendix 1 to this report. The Plan is a revision of the previous Plan which covered the period 2016-18.
- 3.7 The purpose of the Plan is to provide an overview of health protection (communicable disease and environmental health) priorities, provision and preparedness and to support the longstanding collaborative arrangements that exist between NHS Lothian and Local Authorities. An infographics document has also been provided.
- 3.8 The key communicable disease and environmental health functions of NHS Lothian and Local Authorities are:
- To reduce preventable illness and death from communicable disease
 - To identify potential outbreaks of communicable disease at an early stage so that effective control measures can be put in place as soon as possible
 - To improve the ability to prevent further outbreaks
 - To work with partner agencies to put in place measures for effective management of non-communicable disease public health incidents and health improvement measures to mitigate health impact of environmental hazards.
- 3.9 The Plan covers the NHS Lothian Health Board area, which includes the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils.
- 3.10 NHS Lothian has the statutory responsibility to produce this Plan in consultation with the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils.
- 3.11 The Plan has been written through a consultative process by a working group comprising NHS Lothian's Director of Public Health and Health Policy, Consultant in Public Health and the Chief Officer(s) of Environmental Health of the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils.

- 3.12 This Plan is in the process of being approved by the Corporate Management Team of NHS Lothian, and is being reported to the relevant elected member forum of each Local Authority. It has been noted by NHS Lothian's Lothian Infection Control Area Committee (LICAC).
- 3.13 An action plan has been developed to ensure that this Joint Health Protection Plan is implemented. The steering group comprising the NHS Lothian's Director of Public Health and Health Policy, Consultant in Public Health and the Chief Officer(s) of Environmental Health of the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils will keep the Plan under strategic review.

Implications for East Lothian Council

- 3.14 There is already close co-operation and formal liaison arrangements between NHS Lothian (Health Protection Team) and the Council's Environmental Health Services and it is envisaged that these arrangements will continue.
- 3.15 The functions undertaken by Environmental Health complement those undertaken by the NHS. Health Boards and Local Authorities have a duty to co-operate in pursuit of protecting and improving the health and wellbeing of the local population. Environmental Health advise on the development of laws, regulations and policies at local, national and international level and carry the major responsibility for local implementation and enforcement in the following areas:
- Air quality
 - Noise and other statutory nuisances
 - Recreational water quality
 - Drinking water quality – particularly private supplies
 - Food safety
 - Food composition and nutritional information
 - Living and working conditions
 - Injuries at home and at work
 - Contaminated land
 - Pest control
 - Public safety – events; skin piercing and tattooing; sunbeds, etc
- 3.16 Priorities and activities are detailed in Appendix 1 of the Plan.
- 3.17 The Council has a number of qualified and experienced Environmental Health Officers who meet the competent person designation required by the Act.

4 POLICY IMPLICATIONS

- 4.1 The work undertaken by the Environmental Health Service in conformance with this Plan contributes towards the East Lothian Plan Single Outcome Agreement.

5 INTEGRATED IMPACT ASSESSMENT

- 5.1 The position statement of this report does not directly affect the wellbeing of the community or have a significant impact on equality, the environment or economy although the development of specific actions, such as the Air Quality Action Plan may require more detailed consideration of the integrated impact assessment process.

6 RESOURCE IMPLICATIONS

- 6.1 Financial – routine health protection work will be met within existing budget.
- 6.2 Personnel - Local Authority competent persons are designated from the Council’s qualified Environmental Health Officers.
- 6.3 Other - None

7 BACKGROUND PAPERS

- 7.1 Lothian Joint Health Protection Plan 2018-2020
- 7.2 JHPP Infographics 2018-2020

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DATE	9 th November 2018

LOTHIAN

JOINT HEALTH PROTECTION PLAN

April 2018 – March 2020

Reference Details Accompanying Infographics



Midlothian



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Foreword

This is the fifth Lothian Joint Health Protection Plan (JHPP), produced as a requirement under the Public Health etc (Scotland) Act 20081. This plan has been prepared in close collaboration between NHS Lothian and the four Local Authorities of the City of Edinburgh, East Lothian, Midlothian and West Lothian.

The partners have realised some benefits from the first four plans, including better relationships and working arrangements which have resulted in improved joint incident and outbreak management, joint training and continuing professional development (CPD) sessions.

The first plan provided guidance for the introduction of systems, identified resources that are required for delivery of health protection in Lothian and mapped out key components for implementing the Public Health Act. The second plan also identified priorities for joint working. The third, fourth and fifth plans take joint working further, particularly on areas of shared concern such as air quality but will also strengthen the shared approach to quality improvement between NHS Lothian and the four Local Authorities, building on the lessons learned during incidents that took place between 2016-2018 (Appendix 1).

NHS Lothian's Public Health and Health Policy Directorate, of which the Health Protection Team (HPT) is a part of, already works closely with colleagues in Environmental Health at Lothian Councils in the investigation and management of cases involving communicable diseases and environmental hazards. The Public Health etc. (Scotland) Act 20081, which came about as a response to the International Health Regulation (IHR), the Human Rights Act² and emerging issues such as new infectious diseases and terrorism, has been helpful in clarifying roles and responsibilities in this existing arrangement.

Scotland's goals in reducing mortality and morbidity from communicable disease, reducing exposure to environmental hazards, improving health, wellbeing, the quality and sustainability of the environment are set out in the national and international policy documents^{1:3-7}. These are echoed in the key objectives of the communicable disease and environmental health functions of NHS Lothian and Local Authorities, which are:

- To reduce preventable illness and death from communicable disease and environmental hazards
- To identify potential outbreaks of communicable disease at an early stage so that effective control measures can be put in place as soon as possible
- To improve the ability to prevent further outbreaks
- To work with partner agencies to put in place measures for effective management of non-communicable disease public health incidents and health improvement measures to mitigate health impact of environmental hazards

The Act has also provided an opportunity to develop our planning processes, linking local departmental plans and ensuring that our objectives match closely those of the wider NHS and Lothian Councils' planning systems.

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Over the next two years we will continue to work towards meeting these objectives, reporting progress on an annual basis through the existing planning processes including the new community planning arrangements set out in the Community Empowerment Act⁸.

The collaborative approach between NHS and Local Authorities was re-emphasised in the 2017 Scottish Government guidance on managing public health incidents⁹. The guidance clarifies the role of NHS Boards in sharing statutory responsibility for improving and protecting public health with Local Authorities and other partner agencies. Critical in this role is the joint formation of incident management teams, the provision of the necessary resources for management of incidents on a 24 hour basis and the continuous improvement of the quality of incident management. This guidance is currently under review.

Over the last five years, some key national health protection priorities have been restated in policy documents. These include the publication of the fourth edition of the Approved Code of Practice (ACOP) for the control of Legionella Bacteria in Water System¹⁰, the VTEC/E. coli O157 Action Plan for Scotland 2013-2017¹¹ which aims to reduce the incidence of this infection by setting strategic direction for key partners and emphasising collaborative roles. Additionally, NHS Scotland Resilience Guidance requires Chief Executives to ensure adequate preparedness for major incidents and emergencies¹².

This plan also supports key priorities identified in the Single Outcome Agreements (SOA)³ for each of the Local Authority areas between the Councils, NHS Lothian and their other community planning partners, particularly in relation to the Scottish Government national outcomes for health improvement, reducing health inequalities and delivering quality public services.

We wish to continue to improve our knowledge and the quality of the service we provide for the population of Lothian and welcome comments on this plan – please send these to: health.protection@nhslothian.scot.nhs.uk

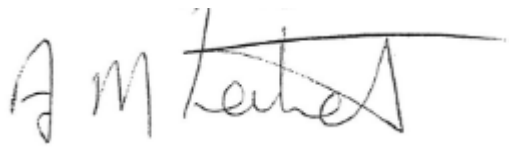
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1 Preface

This joint plan for NHS Lothian and Local Authorities has been produced in accordance with the Part 1 guidance for The Public Health etc. (Scotland) Act 20081. This aims to:

- Provide clarity about which agency and persons have overall responsibility in protecting the public health, for example ensuring lessons learned from the fatal accident inquiry into the Central Scotland E. coli O157 outbreak¹².
- Ensure preparedness and enhance co-operation among agencies in combating major emergencies, for example bioterrorism and lessons from SARS.
- Resolve gaps and uncertainties in the adequacy of statutory powers that might be required for communicable disease control, particularly for emerging hazards, for example early interventions in avian or pandemic influenza.
- Update the principles and concepts underpinning public health legislation for the twenty-first century to reflect changes in public health ethics and values, new scientific developments and the response to globalisation.

Purpose of the plan

The purpose of the plan is to provide an overview of health protection (communicable disease and environmental health) priorities, provision and preparedness and to support the collaborative arrangements that exist between NHS Lothian and Local Authorities. A joint overall steering group will continue to oversee the plan's implementation.

Geographical extent of the plan

This plan covers the NHS Lothian Health Board area, which includes the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils.

Statutory responsibility

NHS Lothian has the statutory responsibility to produce this plan in consultation with the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils.

Authors

The plan has been written through a consultative process by a working group comprising NHS Lothian's Director of Public Health and Health Policy, a Consultant in Public Health Medicine and other staff members and the Chief Officers of Environmental Health of the City of Edinburgh, East Lothian, Midlothian and West Lothian Councils. This team also constitutes the steering group which oversees the implementation of the plan. The agency representatives at the steering group which developed the plan were:

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Name	Designation
Mr Andrew Blake	Environmental Health and Trading Standards Manager, West Lothian Council
Mr Derek Oliver	Service Manager – Protective Services, East Lothian Council
Professor Alison McCallum	Director of Public Health and Health Policy, NHS Lothian
Dr Richard Othieno	Consultant in Public Health Medicine, NHS Lothian – Chair
Mrs Edel Ryan	Environmental Health Manager, Midlothian Council
Mr Stephen Williamson	Food, Health & Safety Manager, City of Edinburgh Council

Governance Arrangements

This plan has been approved by the Board and Corporate Management Team of NHS Lothian, each of the Councils and the relevant elected member forum of each Local Authority. It has been adopted by NHS Lothian’s Lothian Infection Control Advisory Committee (LICAC) and Healthcare Governance Committee (HCG).

Status

This plan is a public document and can be accessed by the public from NHS Lothian and Local Authorities’ websites. Variations of this plan will be subject to consultation with the partner Local Authorities. This plan covers the period 2018-2020. This plan will be formally reviewed every two years.

2 Overview of the Lothians

The overview of Lothian population is summarised in info-graphs which is the first part of this plan.

3 Health protection risks/challenges unique to the Lothians

While there are shared health protection risks nationwide, Lothian also has its own unique ones. The Public Health etc. (Scotland) Act 20081 and other legislation provide a statutory basis for interventions and there is a shared risk assessment process with stakeholders. These stakeholders include Environmental Health and other appropriate Local Authority services, the Police and Fire services, the Scottish Ambulance Services (SAS), Scottish Water (SW) and the Scottish Environment Protection Agency (SEPA). The risks and challenges unique to Lothian and how they are managed are detailed in **Table 1**. In addition, Appendix 2 lists key health protection plans to manage incidents.

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Table 1: Health protection risks/challenges unique to the Lothians

Unique Situation/Position	Risk/Challenges	Mitigation Measures
Host to several universities with large numbers of students in Halls of residence, flats and houses. For example, the University of Edinburgh has 16,000 students.	Increased opportunity for introduction and spread of infection. Increased use of houses in multiple occupation (HMO). And private sector residential accommodation	NHS Lothian works closely with universities regards monitoring and control of infection such as mumps and meningitis. Local Authorities regulate HMOs. Registration of private sector landlords and housing conditions including gas and electrical safety.
University centres for research including veterinary schools, nuclear medicine, biohazards and life sciences research and bio-research facilities, for example Pentland Science Park.	Bio-hazards, use of radio-active materials.	National arrangements are in place for the regulation and control of nuclear medicine and biohazards in the universities and hospitals.
Host to Scotland's Capital City, Holyrood Palace, and the Scottish Parliament and associated VIPs.	Increased potential for terrorist incidents.	Regional resilience partnership (RRP) has emergency plans for CBRN ⁽¹³⁾ incidents and major incidents. City of Edinburgh Council in liaison with key partner agencies, maintains the Edinburgh Major Incident Evacuation Plan.
Centre of culture which hosts annual festivals, Hogmanay /New Year celebrations, international events such as the G8 and major international sporting events (for example World Cup Sevens rugby and the Open Golf Championship), as well as associated VIPs.	Brings together populations from different parts of the world with a risk of new infection coming into the areas. There is potential risk of terrorism in large crowds.	Annual multi-agency plans are in place for such events. The Hogmanay plan is tested prior to the season starting. Appropriate plans are put in place for international events.
Port Health - Major local and international transport hubs in the local area including: Edinburgh Airport, Leith Docks, Hound Point terminal at South Queensferry. Waverley/Haymarket Train Stations. St Andrew's Bus Station.	There is a risk of imported infectious diseases from other countries.	NHS Lothian and City of Edinburgh Council have a port health response plan developed in collaboration with the airport authorities. Plans are underway for the development of other port health plans. International Health Regulations exist in the event of a serious infectious disease emerging locally.
Sites of potential flooding, for example River Esk, Almond, Water of Leith, Braid Burn, Burdiehouse Burn, Figgate Burn, River Tyne, Biel water, Brocks Burn and Linlithgow Mains.	Climate change is presenting a potential risk of Increased opportunity for displacement of individuals due to flooding, plus disease risk after any flooding incident.	Emergency flood response plans are in place. Flood Prevention Act duties are undertaken by Local Authorities.
Host to Torness Nuclear Power Station.	Risk of nuclear incident. Public concern.	Emergency plans are in place with partnership agencies.

Host to Addiewell (West Lothian) and Edinburgh prisons – includes vulnerable populations.	Prison population known to be at higher risk of hepatitis B. As a closed communal setting it is also at risk of communicable disease outbreaks. This population also has an increased burden of non-communicable disease.	NHS Lothian has close working relationship with prison staff for the provision of appropriate preventive measures and early intervention in incidents and outbreaks.
Breakdown of Water Supply system.	Potential risk of contamination of drinking water supply.	Considerable investment has been and continues to be made in the water supply infrastructure to improve quality and resilience. Robust monitoring and sampling regimes are in place to ensure quality.
Private water supplies in more remote rural communities across the area.	Risk of contamination with infection and chemicals.	Routine sampling and monitoring by Environmental Health with grant aid available to improve the quality of the water supply.
Coastal water quality along the Firth of Forth is critical to the high quality environment for residents and visitors.	These waters have a potential of flooding or being contaminated by agents such as oil spillage which could be a risk to public health. Breakdown of sewage infrastructure resulting in coastal water contamination. Major oil spill from tanker traffic in Firth of Forth	Multi agency emergency plans, including the Waste Water Incident Plan, Forth Ports Clearwater, Forth Oil Spill Contingency Plan and City of Edinburgh Council Oil and Chemical Pollution Emergency Plan. Local monitoring by Local Authorities and SEPA.
Tourism is a major contributor to local economy	Loss of reputation if major public health incident	Incident management plans Food and water safety controls.
Potential emissions and incidents relating to industrial processes in the area including: distilling brewing; electricity generation; open cast mining and quarrying; cement manufacture.	Risk of major incidents and release of toxic chemicals. Increase air pollution from routine emissions. Legionella in cooling towers.	All the agencies have major incident plans which are regularly exercised. Local Authorities maintain cooling towers registers.
Legacy of an industrial history and the associated issues of contaminated land including ex-mining areas and former landfill sites.	Potential chemical environmental pollution. Complaints from communities with assertions of health risk.	Contaminated land issues are addressed either by enforcing conditions attached to planning consents or invoking the powers contained in part IIA of the Environmental Protection Act (EPA) 1990(67). Monitoring by the Local Authorities and investigation and control of incidents where there is potential human exposure.
West Lothian hosts the second largest poultry flock in Scotland in addition to, arable beef and dairy farming.	Potential animal health risks (for example bird flu and other zoonoses).	Disease contingency plans are in place with relevant partner agencies (East Lothian, Scottish Government, Police, Animal Health and Plant)
Substance misuse including novel psychoactive substances.	Substance misuse is a common cause of ill health, death and drug related crimes.	Most people with substance misuse problems are cared for by General Practitioners. Comprehensive range of multi-agency, evidence based prevention, treatment and care services in place

		coordinated through Alcohol and Drug Partnerships, Hepatitis action plans.
Air quality issues.	Increased risk of respiratory and cardiovascular diseases.	Local Authorities monitor air quality declaring Air Quality Management Areas (AQMAs) and developing action plans as appropriate.

4 Resources and operational arrangements

NHS Lothian and the four Local Authorities in Lothian are committed to complying with the requirements stipulated in the 2017 Scottish Government guidance, on Management of public health incidents⁹, the VTEC/E. coli Action Plan¹¹, NHS Scotland Resilience Guidance¹² and the revised Code of Practice (ACOP) for the control of Legionella Bacteria in Water System¹⁰ as priority areas. This will include providing staff trained to the agreed standard that are able to participate in Incident Management Teams (IMTs). These documents require that partner agencies maintain a level of resources regarded as adequate for and the support required for preventing and managing public health incidents.

The local health protection work is linked to National health Protection Oversight group through sub-committees for different health protection area such as environmental public health, and Gastrointestinal disease and Zoonoses of the Health Protection Network (HPN). The HPN is seen as a Network of existing professional networks in Health Protection across Scotland, which aims to improve health protection services in Scotland, by bringing those working in this field together in ways which facilitate learning from each other in a structured manner. The Society of Chief Environmental Health Officers in Scotland has representatives on almost all the working groups reporting to the Scottish Health Protection Network Oversight Group of which it is also a member. The Society cascades and shares information through its various working groups and meetings. A schematic diagram of this network arrangement is included as Appendix 4.

4.1 Staffing

NHS Lothian and the four Local Authorities have each appointed competent persons and share competent persons lists, in accordance with the Public Health etc (Scotland) Act 2008¹. **Table** shows the numbers of competent persons appointed by each agency. Each of the agencies will maintain sufficient numbers of competent persons and update the lists as appropriate.

Table 2: Designated Competent Persons as designated under the Public Health etc (Scotland) Act 2008

Agency	NHS Lothian	City of Edinburgh	East Lothian	Midlothian	West Lothian
Designated competent persons	12	26	6	3	5

**NB. These numbers may fluctuate*

In addition to the designated competent persons, Local Authorities and NHS Lothian can call upon a number of other staff who work within the overall remit of their services to assist in the investigation of incidents if necessary and appropriate.

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4.2 IT and communications technology

Information and Communications technologies are available to NHS Lothian and Local Authorities to facilitate health protection and environmental health work, including the management of incidents and outbreaks are set out below.

4.3 NHS Lothian Electronic Guidance and guidelines:

- NHS Lothian staff have access on the web e-library – the NHS electronic health library.
- NHS Lothian Public Health staff who work out of hours are provided with a set of local guidance and guidelines for reference.
- NHS Lothian’s HPT keeps a database of on-call guidance.
- SHPIR, the Scottish Health Protection Information Resource (Health Protection Scotland (HPS)) provides a suite of key nationally updated guidance.
- On-call staffs have access to international travel advice and guidance via TRAVAX website.

Information Technology:

- Mobile phones and bleeps are issued to out of hours staff.
- Encrypted laptops and encrypted memory sticks are available for staff to take home when on-call.
- A standard operating procedure for establishing a telephone helpline within NHS Lothian is currently being developed by HPT and Telecommunication Department is nearing completion. This will ensure that a helpline can be set up rapidly, where it is considered appropriate to have an additional point of contact for the public during an incident, to supplement NHS24.
- TRAK, the hospital patient management system, is used for accessing laboratory results and information relating to hospital patients.
- NHS Lothian SCI-store e-results, the Scottish Care Information System are used by GPs for notification to the board and storage of laboratory results used for managing patients.
- Scottish Environmental Incident Surveillance System (SEISS)¹⁴ is a database of environmental health incidents in Scotland.
- Toxbase, a database that provides information on toxin and poisons for managing cases and incidents.
- The Scottish Infectious Disease Surveillance System (version 2) (SIDSS 2)¹⁵.
- The Scottish Immune Recall System (SIRS)¹⁶ is a database used as a call and re-call system immunisation programmes.
- Community Health Index (CHI) provides authorised members of staff patient identifier information which is used for tracing patients. Access is controlled by the Director of Public Health and Health Policy as Guardian of the CHI.
- The Electronic Communication of Surveillance in Scotland (ECOSS) is used for laboratory services notification to NHS Lothian Public Health Directorate and from the Directorate to HPS.

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- The Airwave encrypted digital radio system was installed within NHS Lothian, in March 2011 with base sets, provided by Scottish Ambulance Service, located in our Emergency Departments. Two hand-held radios were issued by Scottish Government to Emergency Planning for use during a major incident.
- NHS Lothian is part of MTPAS, the Mobile Telecommunications Privileged Access Scheme. Under this scheme a Network Service Provider (NSP) a single special privileged access SIM cards (MTPAS SIMs) to Category 1 (including NHS Lothian) and 2 responders, as defined in the Civil Contingencies Act (CCA) 2004¹⁷, to allow continued communication when there is a network congestion or shutdown.
- NHS Lothian together with other Scotland health boards have introduced and are now using HPZone-Scotland¹⁸ - a secure web-based decision support system for the control, surveillance and management of cases and incidents of infectious diseases and environmental hazards.

4.4 Local Authorities

Local Authorities have databases with detailed information concerning business operations in their areas, including risk assessment of their compliance standard and addresses and contact details for all food businesses. These systems are capable of interrogation and can be used to produce specific premises lists subject to the coding structures used. Edinburgh and West Lothian use Authority Public Protection (APP) by Civica; East and Midlothian use the Uniform system by IDOX technology.

- Support for the two Airwave Terminals previously provided by Scottish Government to each Scottish Local Authority Emergency Planning/Business Continuity/Resilience Units has been withdrawn. The City of Edinburgh Council has a small number of Airwave Terminals for its own use. Police Scotland maintains a pool of Airwave Terminals that can be distributed to partner agencies in an emergency.
- The Airwave encrypted digital radio system has been adopted by the Local Authorities Emergency Planning and Business Continuity Services. Two hand-held radios were issued by Scottish Government to each Local Authority for Emergency Planning for use during a major incident. Additional handsets may be accessed in the event of an emergency
- A number of the Lothian Local Authorities have key personnel who are also part of MTPAS, the Mobile Telecommunications Privileged Access Scheme to allow continued communication when there is a network congestion or shutdown.

4.5 Scientific and Laboratory Services

The scientific and laboratory services which NHS Lothian and Local Authorities require for surveillance and management of public health incidents, which are currently available include:

- NHS microbiological and biological laboratories based at the Royal Infirmary of Edinburgh and the national reference laboratories.
- Edinburgh Scientific Services
- Scottish Water laboratories
- SEPA Laboratories

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- National Reference Laboratories for Feed & Food in the UK
- Health Protection Scotland analytical and epidemiological support
- Scottish Poisons Unit
- Privately Contracted Laboratories

4.6 Collaborative Arrangements

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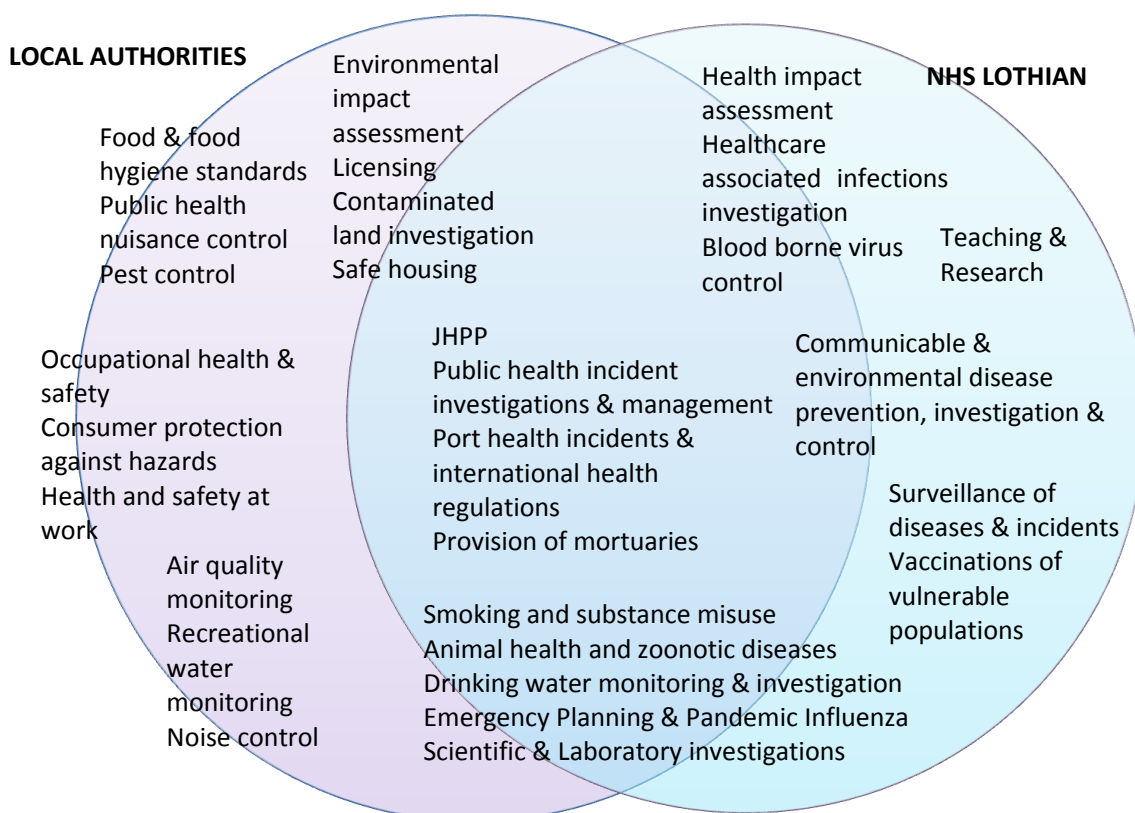
Figure 1 is an illustrative summary of the joint working and areas of collaboration between NHS Lothian and the four Lothian Local Authorities. The details on specific areas of joint working are in **Appendix 1**.

NHS Lothian has collaborative arrangements and links with national organisations and groups and at international level through Health Protection Scotland (HPS) and the Scottish Government (SG) for dealing with communicable diseases and environmental Hazards. Locally, organisational arrangements are in place to facilitate good collaborative working between NHS Lothian, Local Authorities and other health protection partners, including Animal Health and Plant Services, Scottish Water and other utility companies, the FSS and SEPA. NHS Health Protection Joint Liaison Group implements most of the collaborative activities between NHS Lothian and the four Local Authorities. Lothian Infection Control Advisory Committee (LICAC) meets on a bi-monthly basis to review policies and infection control issues. Health protection incident review activities also take place in a number of committees and groups. At regional level emergency planning activities are coordinated by the East of Scotland Resilience Partnership and the constituent Fife, Forth Valley and Borders Local Resilience Partnerships.

A national Scottish Health Protection multi-disciplinary and multi-professional, network representing a wide range of stakeholders, including NHS and Local Authorities has recently been established. The Health Protection Network has the key functions of supporting the development of good practice in the prevention and control of both infections and environmental hazards in Scotland. NHS Lothian and Lothian local authorities (through the Society of Chief Environmental Health Officers) are represented in various subcommittees of the network where development of new guidance, standards for best practice and continuous professional development in health protection also takes place. The Lothian representatives to these committees often bring back learning to share with colleagues. **Appendix 4** shows the structure of the health protection network and the oversight group.

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Figure 1: Joint health protection activities between NHS Lothian and Lothian Local Authorities. (Illustrative rather than comprehensive)



4.7 Reviewing Health Protection Standard Operating Procedures (SOP) or guidance

The Directorate of Public Health and Health Policy has standard operating procedures for significant infectious diseases other hazards, outbreaks and major incidents. The HPT workplan includes reviewing standard operating procedures with partners. Those requiring review are identified based on their review date or the emergence of new national guidance.

Debriefs for significant incidents or major outbreaks are held to learn lessons from how they have been managed. These debriefs can be multi-agency and multi-disciplinary within the Directorate as appropriate.

The Local Authorities have standard operating procedures for a wide range of environmental health functions, including food safety and health and safety incidents. The two standard operating procedures, which are developed jointly between the Directorate of Public Health and the Local Authorities, are the sporadic food borne disease and gastrointestinal illness and the major outbreak plans.

NHS Lothian and the Local Authorities will continue to review operating procedures, including those that relate to the Public Health etc. (Scotland) Act 20081 duties (**Appendix 2**)

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4.8 Staff Knowledge, Skills and Training

The following arrangements are in place for ensuring the maintenance of knowledge, skills and competencies for staff with health protection duties.

4.9 NHS Lothian

The Director of Public Health and Health Policy issues a weekly professional update that includes training opportunities, courses and conferences as well as updates on policy, evidence and key meetings.

Audit and peer review sessions on on-going public health projects and activities are part of the weekly information exchange meetings and CPD sessions held in the Directorate.

HPT organises, as a minimum, twice yearly on-call updates as part of regular continuing professional development (CPD) sessions within NHS Lothian's Directorate of Public Health and Health Policy. Additional related sessions, providing training and exercising for Emergency Planning, are also provided.

HPT will inform on-call staff of other training day courses and conferences organised regionally or nationally and all staff on-call are required to participate in an Emergency Planning exercise on an annual basis. All consultants and senior specialist Trainee registrars who are within two years of Certificate of Completion of Training (CCT) are required to have experience of chairing a Problem Assessment Group (PAG) or equivalent at least once in every two years, to take part in a suitable multi-agency exercise (see below) or multi-agency incident response at least one in every two years and to be familiar with current issues in the Health Protection Team (HPT). Ideally staff will be offered the opportunity to attend the HPS on call course whenever it runs. There are limited places available each year for Health Protection Scotland (HPS) on call and Scientific and Technical Advice Cell (STAC) training. NHS Lothian supports CPD requirements for registered medical and other public health and the knowledge and skills framework requirements for professional, scientific and support staff for whom formal registration requirements are not yet in place.

4.10 Lothian Local Authorities

All Local Authorities have procedures in place for annual review of staff development needs, including support for meeting professional CPD requirements where appropriate. Environmental Health staff are encouraged to attend training or update events organised by NHS Lothian, Health Protection Scotland (HPS), the Royal Environmental Health Institute of Scotland (REHIS), the Society of Chief Officers of Environmental Health in Scotland (SOCOEHS) and Food Standards Scotland (FSS), for example. All Local Authority staff working in food safety and food standards are required to meet minimum competency and the ongoing professional development requirements of the Food Law Code of Practice¹⁹. Similar formal requirements have been developed in relation to staff working in relation to occupational health and safety.

4.11 Joint Training

During 2018 – 2020, the joint training will focus on competent persons training for new staff, joint incident management, MedVet training day and exercising of plans. These are summarised in the infographics which accompanies this plan.

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5 Capacity and Resilience

5.1 NHS Lothian

NHS Lothian, in conjunction with Local Authorities and HPS, assessed the capacity and resilience of local health protection services in 2009. The assessment put a set of criteria into place and these were used to assess the status of health protection services. These criteria covered a number of areas, including: team composition; resources and education; communication mechanisms and technology; information management and facilities standards; policies; procedures; joint working and governance; on call and surveillance arrangements.

During 2017/18 health protection resilience has been reviewed as part of the national public health reform. Out of hours audit has been carried and consideration of a more resilient model is still on-going at national level.

NHS Lothian Health Protection Team staffing is constantly under review. A recent review noted that there was need for more staff, both consultant and nursing staff. As a result of this review there was an increase in nursing staff and the development of better ways of working is on-going.

5.2 Local Authorities

Each of the Local Authorities provides a core level of trained and competent staff to deliver a wide range of statutory environmental health duties. Local Authorities undertake their own service reviews on a regular basis. In addition they are subject to external scrutiny by the Food Standard Scotland (FSS) audit branch in relation to meeting the requirements of food safety legislation. Whilst historically, all of the Local Authorities have been able to provide health protection related services, there has been some contraction in areas of activity over recent years due to financial constraints.

The 2013 Audit Scotland Report - *Protecting Consumers*²⁰, raised concerns about the longer term sustainability of Trading Standards (TS) Services particularly at smaller Councils (classed as those with less than eight TS staff) and also looked at food safety services.

The report acknowledged that Food Services were, on the whole, currently better resourced than Trading Standards but raised concerns for both services about loss of experience and expertise and ensuring core competencies and training for the future.

The report recommended more formal joint working arrangements and shared service options as possible solutions. While the report did not address wider environmental health functions, (e.g, public health work, environmental monitoring & investigations, nuisance and housing standards work, health & safety enforcement etc), there are similar concerns about these service areas too.

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5.3 Approach to regulation

We will develop a work programme to introduce new ways of working designed to minimise the adverse impact of deregulation on the ability of the Health Board and Local Authorities to comply with their duties to protect and improve the health and wellbeing of the population. In developing our priorities for action we will examine the population impact of potential adverse events against the level of risk they pose and the likelihood of occurrence. Used appropriately, regulation is an efficient, effective and equitable tool for improvement. We will introduce new interventions designed to improve performance and new tools to measure our achievements.

6 Public Involvement and Feedback

NHS Lothian

6.1 Patient and Public Involvement

In NHS Lothian, involving patients and the public means involving them in how health services are designed and delivered²¹. This is achieved by working in partnership with Local Authorities, the voluntary sector and other community groups when planning health services and health policies.

Patient and public involvement in NHS Lothian health protection takes place through seeking feedback from service users and patients and through a variety of conferences and working groups. For example, the Hepatitis C Action Plan sub-groups and LICAC have public representatives.

The HPT have carried out a number of feedback projects over the last two years. These include:

- A survey of care home managers views on the advice and support given by HPT during outbreaks of norovirus and influenza.
- Feedback from returnees who travelled to West Africa during the Ebola outbreak.
- Feedback from head teacher after a norovirus outbreak.

Learning from this feedback is used to improve our policies and practices in dealing with health protection issues. The HPT have a quality improvement team which co-ordinates this improvement work and meets on a monthly basis.

6.2 Staff and Partnership

The NHS Lothian Partnership Forum has been established as part of an area-wide employee relations framework that allows staff to influence how NHS Lothian works²². In health protection terms this forum provides the opportunity of early involvement and the ability to influence decision making on health protection issues which affect staff. Partnership involvement is considered essential when any incident moves from being a Problem Assessment Group (PAG) which is a professional assessment of a potential incident to an incident being declared and a formal Incident Management Team being established. One of the most obvious roles for Partnership is providing advice and helping to ensure high levels of understanding and uptake when staff screening is necessary as part of incident management.

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6.3 Lothian Local Authorities

Local Authorities carry out a variety of client and community consultation and feedback activities, using the results to improve the efficiency and effectiveness of service delivery. However, for the purposes of the JHPP, the main area of cross-client contact by environmental health staff is the investigation of incidences of gastrointestinal infections outwith a hospital setting.

7 Monitoring and review

The steering group comprising the Director of Public Health and Health Policy, NHS Lothian and the Chief Officer(s) of Environmental Health of City of Edinburgh, East Lothian, Midlothian and West Lothian Councils will keep the priorities spelt out in the under review to ensure that they are implemented.

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Appendix 1: Joint Health Protection Activities between NHS Lothian and Local Authorities

Priorities: We have specified what are the current deliverables for completion in 2018-20, what are for delivery in two to three years time or, for further in the future. These can be listed as:

- **Deliverables** - for the coming year with expected outcomes and milestones;
- **Developmental** - for a specific timescale beyond the coming year with expected outcomes and/or milestones listed and;
- **Directional** – Horizon scanning for future public health issues;
- **Sustainability** - We ensure that once targets are reached we can maintain that level.

Subject	Health Protection Issues	Local Authority Role	NHS Health Protection Role	Joint NHS/Local Authority role	Priority level
Emergency Planning					
Public health incidents	Ensuring the most effective protection of public through NHS and Local Authorities co-operation in investigation and control of outbreaks	Perform duties and functions defined under the Public Health (Scotland) Act. Assign appropriate staff and contribute resources required for the investigation and control of incidents and outbreaks.	Perform duties and functions defined under the new Public Health (Scotland) Act. Provide leadership for investigation of public health incidents and outbreaks. Exclude workers in high-risk occupations confirmed as having relevant infectious disease. Pay for exclusion of high risk workers.	Draw up joint plans for the investigation and control of incidents and outbreaks. Participate in incident and outbreak investigation, review and audits Participate in multiagency exercises and planning events.	Deliverable
	Potential risk of importation of exotic infection from other countries. Increased	Inspection of ships for hygiene and vermin/pests	Imposing appropriate Controls on ships and passengers when	Development of Joint operational plans. Response to airport call outs.	Deliverable

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Subject	Health Protection Issues	Local Authority Role	NHS Health Protection Role	Joint NHS/Local Authority role	Priority level
Port Health	<p>potential for drug use. Lothian has major local and international transport hubs in the local area including:</p> <p>Edinburgh Airport, Leith Docks South Queensferry Hound Point terminal, Waverley /Haymarket Train Stations.</p>	<p>Monitoring of water supplies. Enforcement of international health regulations, a designated port authority for the purpose of issuing ship sanitation etc. certificates.</p>	<p>disease reported or suspected. Liaison with other agencies and health authorities.</p>	<p>Reducing risk of disease entering country via ports Ship Sanitation. Vermin control.</p>	
Mass Gatherings	<p>Lothian is a centre of culture which hosts annual festivals, Hogmanay /New Year celebrations, international events such as the G8 and major international sporting events (e.g. Open Golf Championship, World Cup Sevens rugby), as well as associated VIPs. This brings together populations from different parts of the world with a risk of new infection coming into the areas. There is potential</p>	<p>Work with the police to ensure safety at venues. Various licensing activities for entertainment, civic government, alcohol.</p>	<p>Ensure that Accident and Emergency department in hospitals have emergency plans to receive casualties.</p> <p>Work with other agencies to ensure adequate presence of first aiders.</p>	<p>Develop and test Hogmanay plans prior to the season starting.</p> <p>Monitor upcoming events and put in place appropriate plans for international and other large size events, e.g. carried out planning of mitigation measures for potential public health issues associated with the</p>	Deliverable

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Subject	Health Protection Issues	Local Authority Role	NHS Health Protection Role	Joint NHS/Local Authority role	Priority level
	risk of terrorism in large crowds.			Commonwealth Games 2014.	
Climate change	<p>Climate change presents a potential risk of increased displacement of individuals due to flooding, plus disease risk and mental health problems after any flooding.</p> <p>Incident sites of potential flooding include River Esk, Almond, Water of Leith, Braid Burn, Burdiehouse Burn, Figgate Burn, River Tyne, Biel water, Brocks Burn and Linlithgow Mains.</p>	<p>Put in place emergency flood response plans dealing with displacement and remediation. Implement Flood Prevention Act duties.</p>	<p>Provide advice on potential health risk in the event of flooding. Ensure healthcare provision for vulnerable populations during flood incidents. Provide healthcare to the affected individuals. Contribute to the Local Authority flood plans.</p> <p>Identify NHS Lothian sites that are vulnerable to flood risk and establish plans to mitigate the risk and ensure business continuity. Implement NHS Lothian Strategic Development strategy</p>	<p>Participate in multiagency exercises and flood planning events. Participate in multiagency flood incident management. Develop plans in line with Scottish Government Climate Change Adaptation framework 2012</p>	Sustainable

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Subject	Health Protection Issues	Local Authority Role	NHS Health Protection Role	Joint NHS/Local Authority role	Priority level
			with actions to reduce carbon emissions		
Radiation - Ionising and non-ionising	Potential risk to public from radiation sources. Risk of nuclear incident. Risk of malicious release (terrorism). Sunbed use increasing cancer risk Radon accumulations increasing cancer risks.	Draw up a multi-agency off-site nuclear incident plan. Inspection and appropriate licensing of sun-bed operators. Monitor of radon gas in public building owned by the Local Authority and support families to monitor homes in potentially affected areas	Contribute to a multi-agency off-site plan. Monitor of radon gas in public building owned by the NHS and support families to monitor homes in potentially affected areas.	Participate in multiagency radiation exercises and planning events. Participate in multiagency radiation incident management.	Deliverable
Good Places Better Health¹⁰ (National Health Policy) issues					
Prison accommodation	Lothian hosts two prisons - includes vulnerable populations. Increased risk of disease outbreaks such as hepatitis B, HIV and TB among prisoners.	Inspection of Prison kitchens under food safety and food standards legislation.	Develop close working relationship with prison staff for the provision of appropriate preventive measures and early intervention in incidents and outbreaks.	Participate in incident and disease outbreak investigation and control.	Deliverable

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<p>University accommodation</p>	<p>Lothian hosts several universities with large numbers of students for example the university of Edinburgh has 16,000 students. Increased opportunity for introduction and spread of infection. Increase use of Houses in Multiple Occupation (HMO).</p>	<p>Regulation of HMOs. Investigation of housing standards issues. Protection of Private tenants through registration of private landlords. Promote Landlord Accreditation to increase standards above the statutory minimum</p>	<p>Put in place plans to work with university authorities in monitoring and control of infection such as mumps and meningitis.</p>	<p>Investigate and manage incident of infections and outbreaks when they occur.</p>	
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Air quality	<p>Potential emissions and incidents relating to industrial processes in the area including: distilling and brewing, electricity generation, open cast mining and quarrying, cement manufacture etc. Risk of major incidents and release of toxic chemicals. Increase air pollution from routine emissions. Increased risk of respiratory and cardiovascular diseases.</p>	<p>Monitor air quality compliance with legislative standards. Declaration of Air Quality Management areas as appropriate and formulation of action plans.</p> <p>Respond to planning applications where air quality may be impacted</p> <p>Participate in the vehicle emissions and vehicle idling partnership</p>	<p>Contribute to the development of the national Air Quality Monitoring during major incidents. Ad hoc and advice on analyses of health impacts of air quality.</p>	<p>Participate in multiagency air quality exercises and planning events. Participate in multiagency air quality incident management. Consultation on air quality action plans.</p>	
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Home Safety	Carbon monoxide poisoning. Fire risk. Safety of appliances. Risk from goods bought	Advice and complaint investigation about the safety of goods sold. Potential for surveys and test purchasing to check the safety of goods sold. Powers to seize unsafe goods.	Possibility of being asked for advice on potential risk to humans from products (e.g. those containing specific substances) Proactively offer advice to vulnerable populations in contact with clinical services e.g. children under 5. NHS Lothian also funds a range of child safety projects. Monitoring of accidents via routine data	Joint investigations as appropriate	Developmental
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<p>Housing</p>	<p>Poor quality, energy inefficient housing is associated with respiratory ill health and winter mortality and fuel poverty. Overcrowding is associated with poor health. Housing design features may affect mental health, accessibility and risk of domestic injury.</p>	<p>Work in partnership with housing services to assess quality of housing with regard to the Tolerable Standard and to use statutory powers to secure improvement where funding permits or is of significant public health risk. Conduct the registration of Private Landlords scheme</p> <p>Develop and deliver the Local Housing strategy</p> <p>Deliver the Statement of Assistance in terms of housing improvements.</p>	<p>Support for health impact assessments of housing developments.</p>	<p>Health Impact Assessments of housing development and regeneration schemes. Tackling inequalities</p>	<p>Deliverable</p>
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<p>Contaminated Land</p>	<p>Lothian has a legacy of an industrial history and the associated issues of contaminated land including ex mining areas, former landfill sites etc.</p> <p>Potential chemical environmental pollution.</p> <p>Complaints from communities with assertions of health risk.</p>	<p>Identification of contaminated land and addressing problems found in accordance with national guidance contained in part IIA of EPA 1990. (guidance is not contained in statute also most issues of contamination are dealt with as part of the Planning process as part of redevelopment monitoring of sites and investigation and control of incidents where there is potential human exposure. Use a phased, risk based approach to the identification, investigation and remediation of contaminated land sites.</p>	<p>Statutory consultee advising on risk to human from a wide variety of contaminants.</p>	<p>Investigation of assertions of risk and assessment of impact of remediation measures. Investigate contaminated land and take action to ensure health risks are eliminated or adequately reduced.</p>	<p>Developmental</p>
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Greenspace	High quality accessible green space is associated with better mental health and increased physical activity.	Open space strategy	Ad hoc advice on benefits of green space. Build into work on physical activity. Support for community gardening projects and greening of NHS estate.	Health impact assessments of green space proposals	Developmental
Transport	Transport can affect air quality, physical activity, injuries, access to health-promoting facilities, noise, community severance etc	Local Transport Strategy	Advice on health issues arising from transport policies and proposals	Health impact assessments of transport policy and strategy	Developmental
Quality of Public Realm	Design of public spaces may affect levels of physical activity, mental wellbeing, social cohesion etc.	Planning policies – formulation, implantation and monitoring	Advice on health issues arising from planning proposals	Health impact assessment of planning policies	Developmental
Strategic Environmental Assessment	SEA includes consideration of Human Health		Offer ad hoc advice and support on health issues in SEAs	Joint work on scope of SEAs	Developmental
Equally Well¹¹ (Joint Work to Tackle the Social Determinants of Health Inequalities) – National Health Policy					

Infectious and Communicable Disease Control	Food poisoning. Legionella.	Investigation of potential sources, contacts and causes in partnership with NHS. Taking appropriate formal and informal action to ensure potential source is adequately dealt with. Hold register of cooling towers etc. Sampling of swimming pools to ensure no risk to users.	Addressing medical needs of affected persons. Investigation of potential sources, contacts and causes with assistance of Local Authorities. Advising on potential control options. Exclude high-risk persons.	Developing SOPs, planning for incident management, managing and controlling outbreaks and incidents and surveillance. Review of incident management and learning lessons. Exclude high-risk persons.	Deliverable
Health and Safety at Work	Potential exposure to carbon monoxide from use of solid fuel appliances in commercial kitchens	Interventions, including inspections and formal action where appropriate, to ensure awareness of new HSE guidance to the catering trade and ensuring compliance to minimise risks to employees and	Advice on health risks (Healthy Working Lives)	Joint investigations if incident of serious injury or public concern. HPT referral to LA if patient hospitalised with elevated CO levels.	Deliverable

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		neighbouring residents.			
Animal Health and zoonotic diseases	Procedures supporting the control of BSE, bird flu, rabies, bovine TB etc.	Monitoring of controls on animal health. Appropriate formal and informal action to deal with problems found. Monitoring of controls imposed as part of animal diseases, such as animal movement orders.	Working with Animal health to monitor the occurrence of zoonotic disease in livestock and domestic animals. Advice on potential risk to human arising from animal health activities including outbreaks of animal diseases. Advice on vaccination to population at risk including travel abroad.	Investigation and control of incidents and outbreaks of zoonotic diseases.	Deliverable
Smoking, Alcohol & Substance Misuse	Smoking is the single largest preventable cause of premature mortality. Substance misuse is a preventable cause of ill health, death and drug related crimes.	Responsibility for ensuring goods are not sold to those under 18. Age Related Sales: Tobacco, cigarette, lighter refills, fireworks. No-smoking legislation implementation regarding smoking in public places.	Follow up of individual cases of infection connected with substance misuse. Assess alerts about contaminated alcohol and new drugs causing potential ill health. Advise on appropriate measures to prevent and treat HIV, Hepatitis B and C. Develop and implement action	Participate in disease incident and outbreaks related to substance misuse Underlying and long term issues addressed through planning and delivery of services in partnership through the Smoking & Health, Alcohol and Drug	Developmental

		Licensing standards officer's interventions regarding age verification policy and responsible drinking.	plans through the HCV MCN.	Partnerships (ADPs) and Community Safety Partnerships.	
Noise Control	Anti social behaviour. Exposure to occupational noise. Exposure to nuisance noise which may affect health.	Powers to issue fixed penalty notices for anti-social activities. Powers to investigate and control noise nuisance generally through statutory nuisance legislation of licensing regime. Powers of H&S enforcement where excessive noise may be encountered in the workplace	Advice on health effects on humans arising from noise-producing activity.	Provide public health advice on incidents	Sustainable

Licensing	Activities Including: Alcohol, Street Trading Tattooing & Skin Piercing Petroleum. Alcohol related health harm and community safety linked to availability. Spread of infection such as hepatitis B and C and sexually transmitted diseases.	Monitoring of alcohol licensing via licensing standards officers Licensing monitoring and inspection of street traders, tattooists, skin piercers and petroleum storage. Dealing with complaints and taking appropriate informal or formal action.	Advice on health risks of activities, the impact of alcohol on population health and the link with outlet density. Advice on implementing the public health principle in alcohol licensing including on licensing conditions and/or options to control problems and arising from incidents	Underlying and long term issues around alcohol misuse addressed through planning and delivery of services in partnership through the Alcohol and Drug Partnerships (ADPs) and Community Safety Partnerships.	Developmental
Pest Control	Vermin - potential to spread disease. Insects - disease spread potential, can arise from unhygienic conditions with human health risk.	Inspection of area for vermin and pests taking appropriate informal or formal action to address problems found. Treating of vermin and insects (discretionary).	Advice on potential risk to humans from a variety of pests.	Investigation and control of pest related diseases.	Developmental
Dog Control	Stray dogs - safety and potential for disease spread Dog fouling - potential to spread disease. Dangerous dog threat or attack.	Uplift of stray dogs Enforcement of fouling and dangerous dog Legislation Promote responsible dog	Advice on potential risk to humans from dog fouling Linkages to promotional work on best practice and	Investigation and control of zoonotic disease related to dogs.	Developmental

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	Noise nuisance from excessive barking	ownership to minimise Barking, fouling and poor control.	other dog related issues.		
Public Health Nuisances	Variety of statutory nuisance conditions affecting local residents / community.	Monitor area and respond to complaints with regard to statutory nuisance issues such as dirty houses, unhygienic living conditions, drainage problems, odour problems, etc.	Advice on risks and effects on the health of occupants and other relevant persons.	Follow up complaints and investigate nuisance that affect public health.	Developmental
Houses in Multiple Occupation & Private Sector Rental Accommodation	Nuisance and health effects on occupants from poor living conditions and disrepair Overcrowding, fire, safety.	Licensing of HMOs and registration of Private Landlords. Monitor local housing for defects and respond to complaints. Inspect for compliance Enforce against unlicensed/ unregistered premises.	Advice on risks and effects on the health of occupants and other relevant persons Advice on risks to health of Occupants.	Joint investigation as appropriate for HMO related public health incident	Developmental

Health & Safety at Work	Illness or injury to persons.	Enforcement of Health and Safety legislation: to reduce the incidence of accidents and ill health at work in partnership with the HSE. This involves adherence to inspection/sampling programme, participation in national campaigns and other interventions as directed by HSE and investigation of accidents and complaints.	Advice on health risks (Healthy Working Lives)	Explore the link between Local Authority health and safety investigations/ intervention planning to NHS accident/ emergency data.	Developmental
Water Supplies	Old reservoirs and water treatment plants in need of development. Risk from consumption of contaminated water supplies. Lead in Water Guidance relating to WHO standards 2012.	Regulation and monitoring of private water supplies and ensuring national standards are met. Administer grant assistance scheme for improvement of private water supply quality.	Work with Scottish Water to ensure regular sampling and monitoring of supply and distribution system Advice on medical aspects of risk to individuals and groups.	Investigation of water related infections and contaminants of drinking water supply. A Health Protection Joint Liaison Subgroup on private water supply.	Deliverable

Food Safety	Reduction in food poisoning Ensure food ingredients are safe and food appropriately labelled to ensure vulnerable people are protected (e.g. - allergens)	Inspection of food premises Inspection of production facilities for hygiene and composition. Sampling of food to check for compliance with standards. Promotion of good hygienic practice. Promotion and information on labelling/composition	Advice on medical aspects on request. Linkages to promotional work on hygienic practices and other food related issues. Expert advice on potential health effects arising from conditions found.	Investigation and control of food borne infectious disease incidents and outbreaks	
Food Hygiene & Food Standards	Food is a potential vehicle for transmission of infectious diseases.	Implement an effective inspection programme based on a risk based approach including adherence to inspection/sampling/audit programmes, provision of food hygiene and food safety training to business community. There	Promote hand washing practice and food hygiene to members of the general public during incidents.	Participate in investigation of incidents and outbreaks of food borne and gastrointestinal infections.	

		is adoptive not required participation in national campaigns as promoted by FSA, investigation of food-borne illnesses, investigation of complaints and provision of information to the public on good food hygiene practice via local publicity campaigns e.g. Food Safety Week.			
Diet & Nutrition					
TB services	Increasing numbers of TB cases, drug resistance, poor compliance amongst vulnerable groups such as people who are homeless, or with problematic alcohol and/or drug use.	Provision of housing to vulnerable groups Investigation of accommodation standards	Identify, investigate and treat cases and contacts, offer BCG vaccination. NHS Lothian is currently implementing Scotland TB plan and the piloting and evaluating of a web based TB	Investigation and management of TB incidents.	Deliverable

			surveillance system for Scotland.		
Sexual Health and HIV Services	Preventing spread of sexually transmitted infections	Licensing of sex shops/ establishments Teaching about sexual health and relationships.	Diagnosis, counselling and treatment of cases.	Joint planning for sexual health and HIV - strategy development HIV treatment and care - joint agreement for Milestone House.	Deliverable
Care Settings & Health Improvement, Efficiency, Access Treatment (HEAT) Targets					
HAI	There is a risk of patients who are free from infection acquiring it from care institutions when they get admitted for other reasons.	Food hygiene inspections of hospital catering. Expert support and advice for HAI	NHS Lothian has plans to achieve a reduction of the rate of <i>Clostridium difficile</i> infections in patients aged 15 and over to 0.25 cases or less per 1,000 total occupied bed days by 2014/15. To further reduce HAI so that by 2014/15 NHS Lothian's <i>staphylococcus aureus</i> bacteraemia (including MRSA)	Investigation of incidents/ outbreaks	Deliverable

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			cases are 0.24 or less per 1,000 acute occupied bed days.		
Childhood Vaccinations	There is a risk of vaccine preventable diseases to re-emerge or cause outbreaks when the population vaccination coverage is low. Recent examples have been outbreak of measles and mumps.	Education - school and further employment, work with local businesses	NHS Lothian has a childhood immunisation programme that aims to vaccinate at least 95% of children according to national schedules (2011 uptake of MMR at 24 months was 93.5%).	Reservoirs of infection	Deliverable
Human Papillomavirus (HPV) Vaccine Programme:	HPV infection is responsible for the development of almost all cases (90+%) of cervical cancer. effective against the two strains. HPV vaccines are s of the virus. The HPV vaccine for girls aged 12 to 13 years is aimed at protection against 70% of cervical cancers.		NHS Lothian continues to implement the HPV programme with catch up for S4, S5 and girls who are out of school.		Deliverable
Viral Hepatitis	Prevention of BBV in drug users, increasing testing in high risk	Regulation of tattooing and other high risk activities	NHS Lothian actions outlined in the Scottish Government	Social worker involvement in hepatitis MCN	Deliverable

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	groups, ensuring immunisation policies in place for hepatitis B in at risk groups, collaborative working to ensure patients supported through assessment and treatment for hepatitis C		Sexual Health and Blood Borne Virus framework are being implemented through the NHS Lothian Viral Hepatitis Managed Care Network (MCN).	Joint working via alcohol and drug action teams	
Pandemic Influenza	A pandemic is one of the most severe national challenges likely to affect Scotland and Lothian. Proportionate planning and drawing on lessons learnt from H1N1 is essential for mitigation of the potential impact of a pandemic.	Develop local plans for response and recovery from a pandemic.	NHS Lothian continues to identify, treat and monitor cases of influenza A(H1N1) and will ensure arrangements are in place to offer vaccination to the Lothian population against this virus as appropriate.	Participate in Local and Regional Resilience Partnership pandemic planning process.	Sustainable

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<p>Information sharing (NHS & Local Authorities) & Joint Analysis</p>	<p>Sharing information is essential for effective implementation of health protection interventions.</p>		<p>NHS Lothian has arrangement for ensuring that Health professionals employed or contracted have the training and support necessary to allow them to balance their responsibilities for patient confidentiality, with public safety and health protection when sharing information.</p>	<p>Regularly review effectiveness of arrangement for information sharing between NHS Lothian and Local Authorities.</p>	<p>Deliverable</p>
<p>Provision of Mortuaries</p>	<p>Improper or delayed disposal of dead bodies can result in spread of infection</p>	<p>Arrangement for disposal of dead under National Assistance Act provisions. Make arrangement for provision of mortuary services</p>	<p>Advice on health risks in relation to contaminated/infected bodies.</p>	<p>Joint investigations as necessary</p>	<p>Developmental</p>

Appendix 2: Key health protection plans for the Lothian area

Shared Plans	Last Review Date	Next Review Date
Police Scotland Major Incident Plan	N/A	Under development
East of Scotland Regional Resilience Partnership Generic Emergency Plan (maintained by SCG Co-ordinator)	05/2011	05/2012
East of Scotland Regional Resilience Partnership Pandemic Influenza (maintained by SCG Co-ordinator)	05/2010	Under review
East of Scotland Regional Resilience Partnership Community Risk Register	04/2011	Under review
East of Scotland Regional Resilience Partnership Public Communications Plan	05/2011	05/2012
East of Scotland Regional Resilience Partnership Animal Health Plan	05/2010	Under review
The City of Edinburgh Council Emergency Plan (General Plan for the Council's response to Serious Emergencies or Major Incidents).	07/2014	04/2016
The City of Edinburgh Council Pipelines Emergency Plan (Statutory Requirement under the Pipelines Safety Regulations)	03/2015	04/2016
Edinburgh Site Specific Response Plan (maintained by Police Scotland on behalf of East of Scotland Regional Resilience Partnership)		
NHS Borders Pandemic Influenza Plan	02/2009	Under review
The City of Edinburgh Council BP Dalmeny Installation Off Site Plan (Statutory Requirement under the Control of Major Accident Hazards Regulations)	12/2014	12/2016
Joint Port Health Plan	2018	2020
Police Scotland Severe Weather plan	07/2011	Under Review
Scottish Waterborne Hazard Plan	07/2010	Under Review
The City of Edinburgh Council Flooding Emergency Plan (Under review.)	Under Review 2015	Under Review
Sporadic food and gastrointestinal infection incidents plans	2017	2019
Blue Green Algae in Inland Waters Assessment and Control etc. Plan	2017	2020
Shared Waste Water Incident Plan	2017	2020
The City of Edinburgh Oil & Chemical Pollution Emergency Plan	03/2015	03/2017

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NHS Lothian	Last Review Date	Next Review Date
NHS Lothian Major Incident/Outbreak Plan for Lothian	2015	2019
NHS Lothian Incident Management Strategic Plan- Public health	2014	Under review
Contingency Plan for Pandemic Influenza: Strategic Policy	2015	Under review
NHS Lothian and Port Health Authority Procedure for cases of illness in vessels arriving at Leith and other anchorages in Lothian.	2017	2020
NHS Lothian and Port Health Authority Procedure for cases of illness in aircraft arriving in Edinburgh	09/2010	Under review
Drug and Alcohol Plan		
The Sexual Health and Blood Borne Virus Framework	2017	2019
A TB Action Plan for Scotland	2014	Under Review
NHS Lothian Standard Operating procedures for specific diseases including meningitis, E.coli O157.	Ongoing	Ongoing

City of Edinburgh Council	Last Review Date	Next Review Date
The City of Edinburgh Council Emergency Plan (General Plan for the Council's response to Serious Emergencies or Major Incidents).	07/2014	04/2016
The City of Edinburgh Council Pipelines Emergency Plan (Statutory Requirement under the Pipelines Safety Regulations)	03/2015	04/2016
The City of Edinburgh Council BP Dalmeny Installation Off Site Plan (Statutory Requirement under the Control of Major Accident Hazards Regulations)	12/2014	12/2016
Edinburgh Flooding Emergency Plan (The City of Edinburgh Council)	Under review 2015	Under review
Corporate Business Continuity Plan	04/2015	04/2017
Business Continuity Pandemic Flu Plan	Under review 2015	Under review
The City of Edinburgh Oil & Chemical Pollution Emergency Plan	03/2015	03/2017
Corporate Severe Weather Resilience Plan	11/2015	10/2016

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West Lothian Council	Last Review Date	Next Review Date
West Lothian Major Incident Plan	2013	2016
Severe Weather Plan	2015	2017
Major Accident Hazard Pipelines Emergency Plan	2013	2016
Control of Major Accident Hazard Off Site Emergency Plan	2014	2017
Livingston Shopping Centre Emergency Plan	2009	Under review

East Lothian Council	Last Review Date	Next Review Date
Torness Off Site Emergency Plan	2017	2020
Corporate Emergency Plan	2017	Under Review
Oil Pollution Plan	2016	2019
Severe Weather Response plan	2017	2018
Major Accidents Hazard pipeline (MAHP)	2016	2020
Rabies Emergency Plan	2009	Under Review
ELC Rest Centre plan	2018	2020

Midlothian Council	Last Review Date	Next Review Date
Midlothian Registered Care Homes Stage 2 Plan	2014	2016-17
Midlothian Council Business Continuity Plans (Midlothian Council Services)	2016	2018
Midlothian Council Emergency Procedures(*now incorporating Recovery Plan)	2016- currently under review	2017-18
Fuel Plan	2012	2016-17
Midlothian Pandemic Flu Plan	2014	2016-17
Pipeline Emergency Plan	2016	2018
Midlothian Council Food Service Plan	2016	2017
Severe Weather Plan	Dec 2015	2017
Animal Diseases Plan	Currently under review	
Midlothian Registered Care Homes Stage 2 Plan	2014	2016-17
Midlothian Council Business Continuity Plans (Midlothian Council Services)	2016	2018
Midlothian Council Emergency Procedures(*now incorporating Recovery Plan)	2016- currently under review	2017-18
Fuel Plan	2012	2016-17

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Appendix 3: Significant public health incidents or outbreaks 2016-2018

NHS Lothian

Business Continuity:

Incident/Outbreak	Improvement to plans
Incidents and Outbreaks	
Asbestos fire Bonnyrigg	
Palytoxin	Incident presented at the 5-Nation Health Protection conference in Belfast to share learning with colleagues, UK-wide.
West Lothian Carbon Monoxide at primary school	
CO ² in houses at Gorebridge - 1 & 2	Incident presented at various for a locally, nationally and internationally. As a result of the final report of Gorebridge 1 Scottish Government has embarked on a change on easing access to BGS data and information for agency use when needed for risk assessment. Head of planning in conjunction with the Coal Authority have convened a meeting to consider recommendation of the report. Following the meeting they are advocating for a change in guidance for planners, developers, regulators and local authorities. CIRIA is considering undertaking a major piece of work to develop guidance on membrane retrofitting in accordance with current technology.
Hotel Chemical Incident	Not necessary
Major natural gas leak, Midlothian	Debrief held – no need to review any guidance.
High Lead Edinburgh Tenement flat	
East Lothian Water – no bathing	
Burning Bing, Midlothian	

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Food	
ZIKA	
Measles in University, Edinburgh	Improved links with the Army medical Personnel
Norovirus – restaurant chain	Incident presented at various for a locally and nationally for lessons learnt. The proprietors of the restaurant chain learnt that they do not just need to involve their private EHOs but need to work with local authorities when they are faced with a health risk.
E.coli – Bakery	
Legionella – East Lothian	
Total Warrior event – East Lothian	

Blood Borne Viruses	
Hep C transmission at a GP practice	
Young People – Tattooing incident	
Needlestick injury	
Tuberculosis	
Multiple TB meetings for hospital in patients	
Vaccine Related	
Large mumps outbreak in the university populations in Lothian	Promotion of the MMR vaccine among University students
Port Health	
Airport/Seaport incidents which required a joint visit to an aircraft <ul style="list-style-type: none"> • Caribbean Princess Influenza A • A case of rash illness on board an aircraft which turned out to be chicken pox and passengers had to be followed up with an inform and advice letter. • Windstar Cruise ship D&V • Caribbean Princess Influenza A 	Port health plan to be finalised

City of Edinburgh Council:

Incident/Outbreak	Improvement to plans
Environmental (EIA)	

West Lothian Council:

Incident/Outbreak	Improvement to plans
Environmental (EIA)	
Water	
Food	
Specific Diseases	

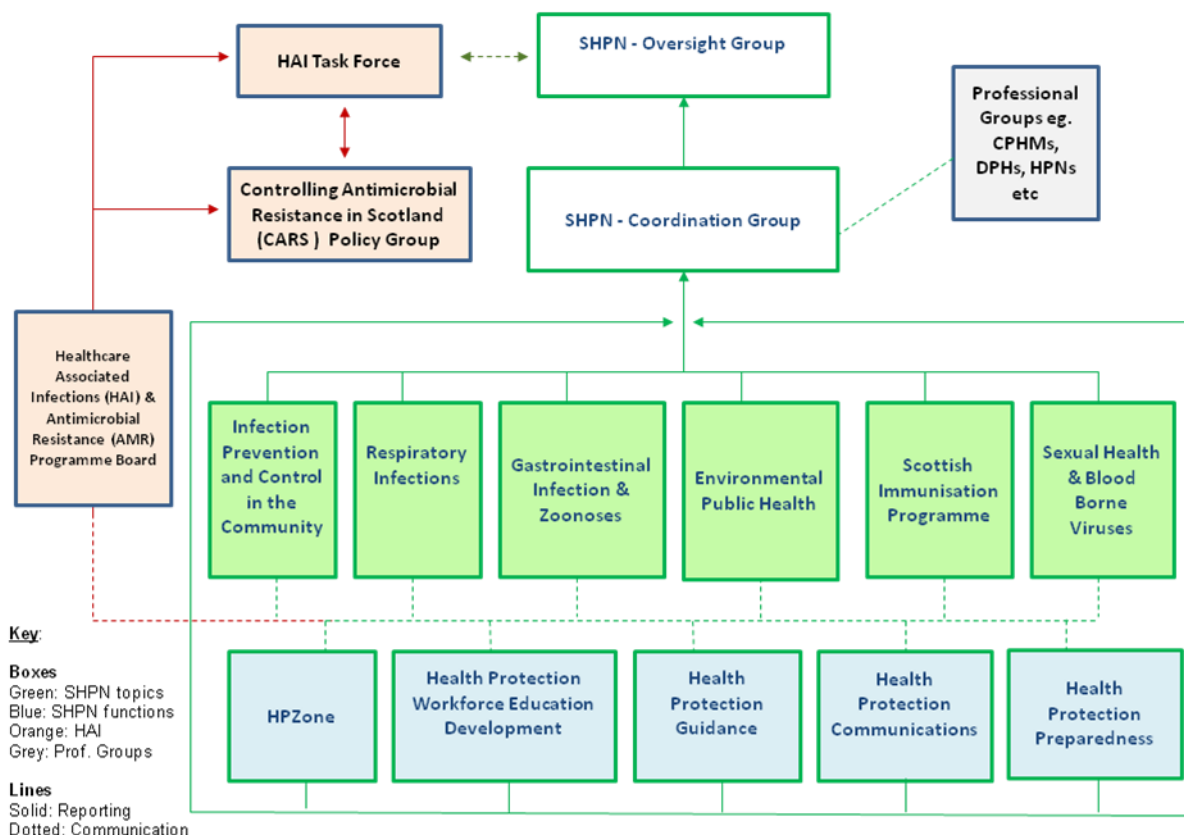
East Lothian Council:

Incident/Outbreak	Improvement to plans
Norovirus Outbreaks (various) in schools	
Isolated Legionnaires Disease incidents related to compost, showers and garden hose issues	

Midlothian Council:

Incident/Outbreak	Improvement to plans

Appendix 4: Scottish Health Protection Network (SHPN)



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Appendix 5: List of Acronyms

ACOP	Approved Code of Practice
AIPG	Avian & Influenza Pandemic Group
APP	Authority Public Protection
AQMA	Air Quality Management Area
BBV	Blood Bourne Viruses
CBRN	Chemical Biological, Radiological & Nuclear
CEC	City of Edinburgh Council
CHI	Community Health Index
CNS	Central Nervous System
COPD	Chronic Obstructive Pulmonary Diseases
COSLA	Convention of Scottish Local Authorities
CPD	Continuing Professional Development
CPHM	Consultant in Public Health Medicine
DPH	Director of Public Health
EC	European Commission
ECOSS	Electronic Communication of Surveillance in Scotland
EHO	Environmental Health Officer
ELC	East Lothian Council
EMF	Electromagnetic Field
EPA	Environmental Protection Act
EU	European Union
FSA	Food Standards Agency
FSS	Food Standards Scotland
GROS	General Register Office for Scotland
HAI	Healthcare Associated Infection
HCG	Healthcare Governance Committee
HEAT	Health Improvement, Efficiency, Access Treatment
HIV	Human immunodeficiency virus
HMO	House in Multiple Occupation
HPS	Health Protection Scotland
HPT	Health Protection Team
HPV	Human Papiloma Virus
HSE	Health and Safety Executive
IHP	International Health Regulation
IMT	Incident Management Team
JCVI	Joint Committee on Vaccination and Immunisation
LBSCG	Lothian and Borders Scottish Co-ordinating Group
LDP	Local Delivery Plan
LICAC	Lothian Infection Control Advisory Committee
LRP	Local Resilience Partnership
MC	Midlothian Council
MCN	Managed Clinical Network
MMR	Measles, Mumps Rubella
MRSA	Methicillin Resistant Staphylococcus Aureus
MTPAS	Mobile Telecommunications Privileged Access Scheme
NHS	National Health Service
NSP	Network Service Provider
PAG	Problem Assessment Group

REHIS	Royal Environmental Health Institute of Scotland
RIE	Royal Infirmary of Edinburgh
RRP	Regional Resilience Partnership
SARS	Severe Acute Respiratory Syndrome
SAS	Scottish Ambulance Service
SEISS	Scottish Epidemiology Infection Surveillance System
SEPA	Scottish Environment Protection Agency
SG	Scottish Government
SHPIMS	Scottish Health Protection Information Management System
SHPIR	Scottish Health Protection Information Resource
SIDNEY	Scottish Infectious Diseases Notification Electronic eYe
SIDSS	Scottish Infectious Disease Surveillance System
IRS	Scottish Immunisation Recall System
SOA	Single Outcome Agreement
STAC	Science and Technical Cell Course
STI	Sexually transmitted infections
SW	Scottish Water
TB	Tuberculosis
TS	Trading Standards
STEC	Shiga toxin- producing E coli both E coli O157 and non- O157 strains
VIP	Very important person
WHIP	Worcestershire Health Informatics Programme
WHO	World Health Organisation

THE LOTHIAN JOINT HEALTH PROTECTION PLAN

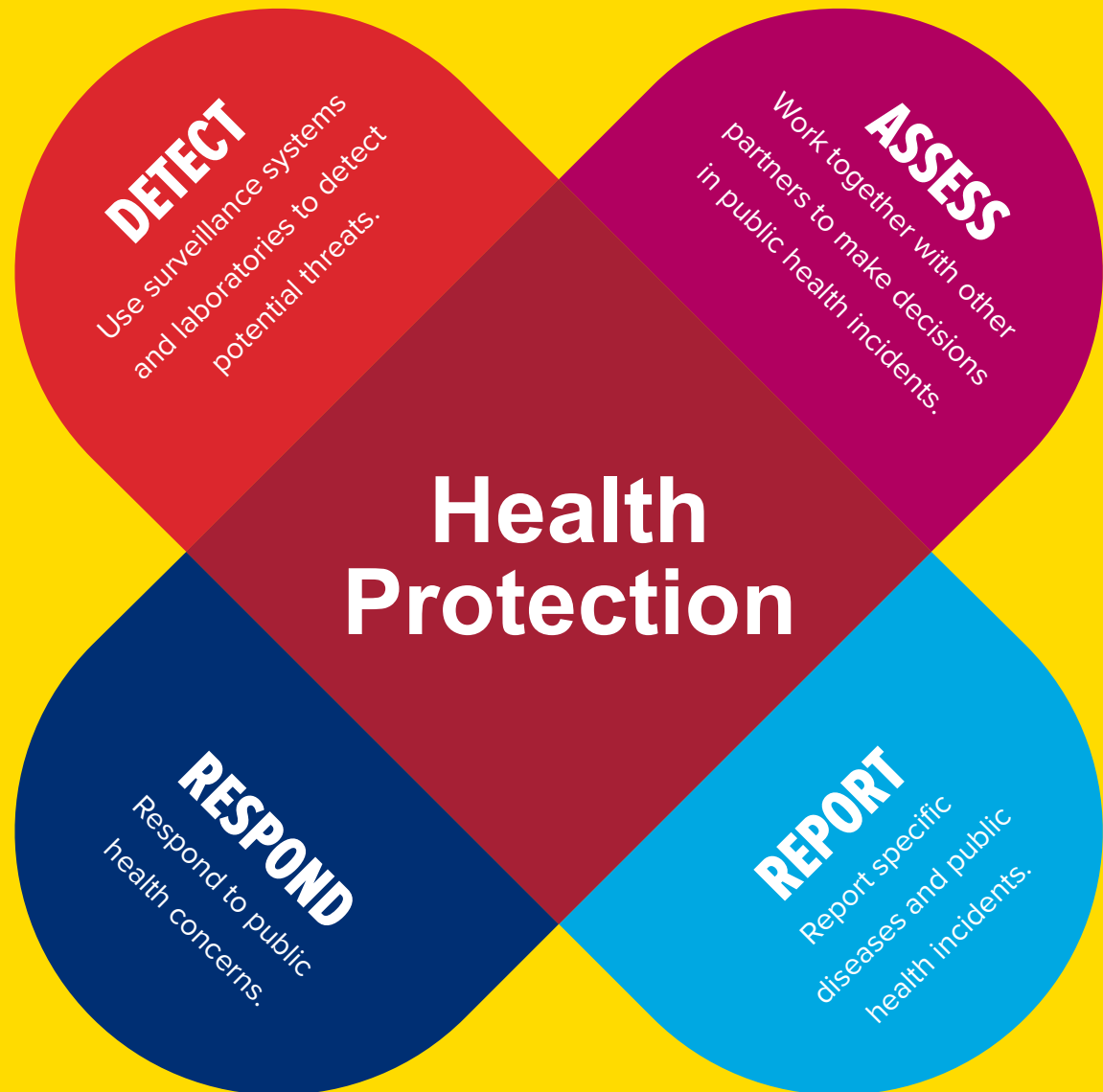
APRIL 2018 - MARCH 2020



HEALTH PROTECTION

Health Protection in Scotland is an institutional function which involves protecting the health of the population, improving the prevention and control of infectious diseases and other environmental hazards by using a variety of legislation including the Public Health (Scotland) Act, 2008 and its guidance.

Health protection ensures the quality and safety of food, water, air, land and the general environment. It prevents the spread of communicable diseases and mitigates the impact of environmental hazards during incidents with a focus on national and local priorities.

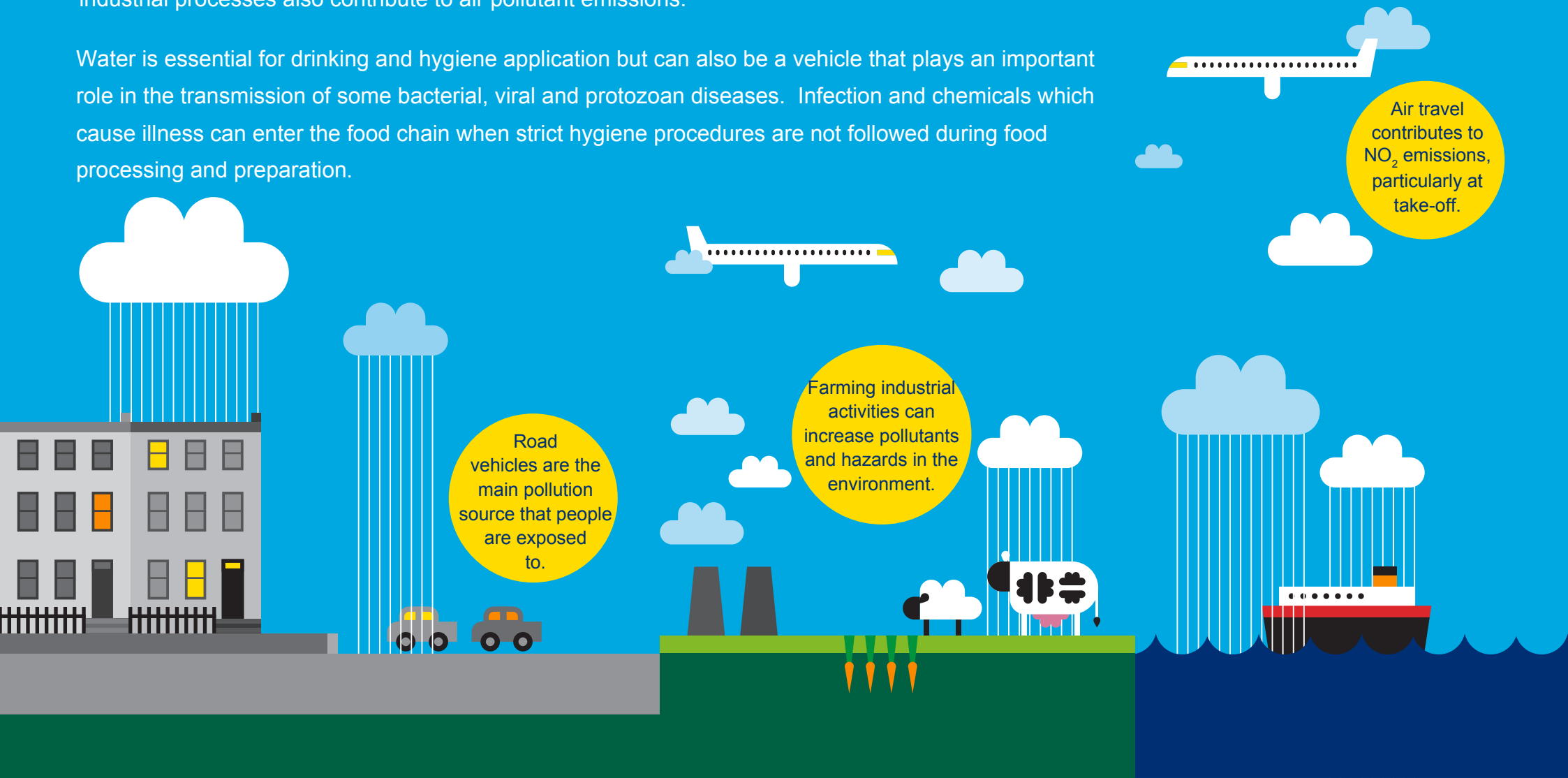


ENVIRONMENTAL HEALTH

Environmental risk factors significantly impact human health, either directly by exposing people to harmful agents, or indirectly, by disrupting life-sustaining ecosystems. The World Health Organisation estimates that 24% of the global disease burden (healthy life years lost) and 23% of all deaths (premature mortality) are attributable to environmental factors.

Road vehicles are the main source of air pollution that people are exposed to. Combustion for heating, farming activities and industrial processes also contribute to air pollutant emissions.

Water is essential for drinking and hygiene application but can also be a vehicle that plays an important role in the transmission of some bacterial, viral and protozoan diseases. Infection and chemicals which cause illness can enter the food chain when strict hygiene procedures are not followed during food processing and preparation.

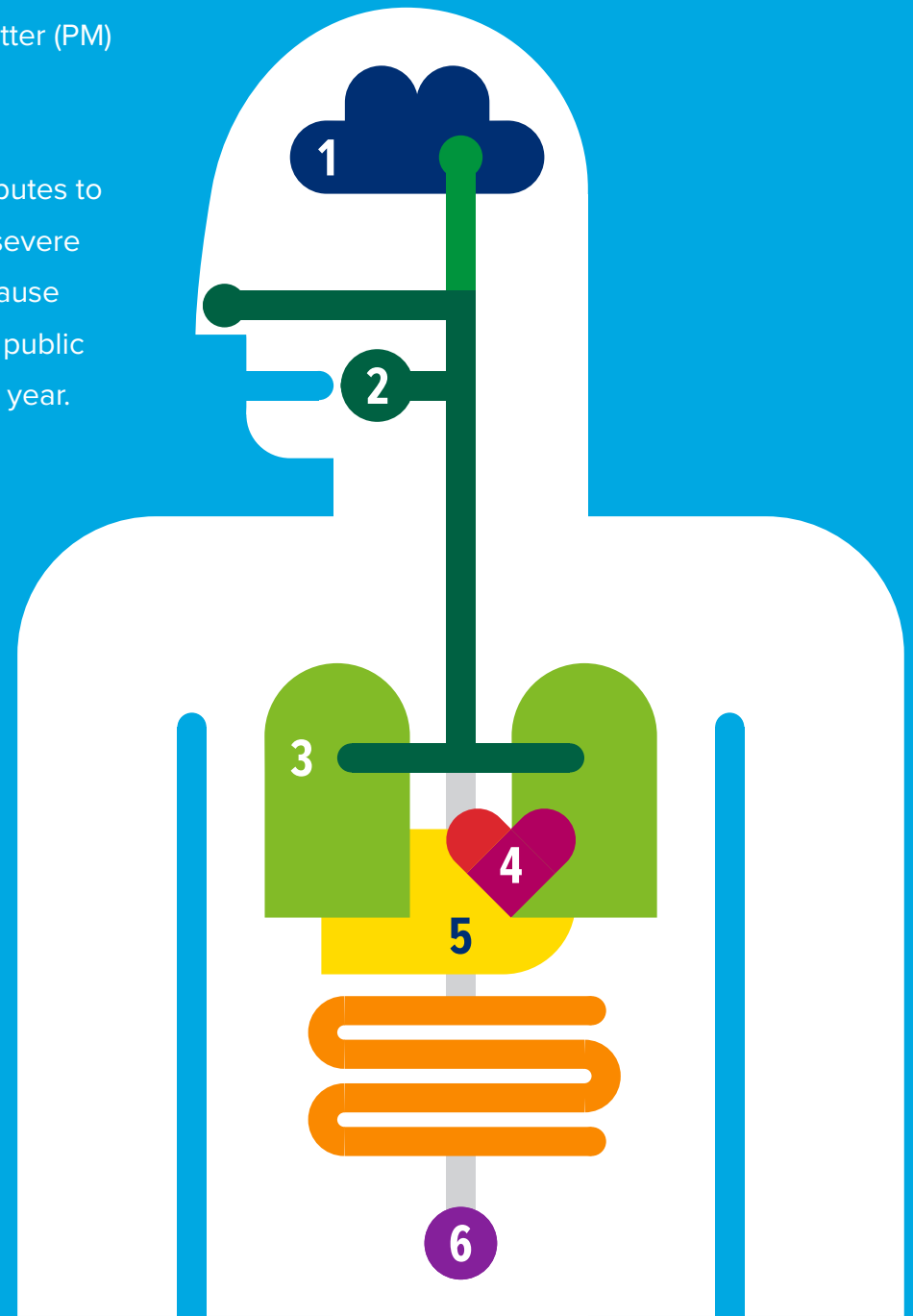


EFFECTS OF AIR POLLUTION

Air pollution is a mixture of particles and gases that can have adverse effects on human health. The most important primary air pollutants are particulate matter (PM) and nitrogen dioxide (NO₂).

Air pollutants are the largest environmental risk to public health and contributes to cardiovascular disease, lung cancer and respiratory diseases. In the most severe cases, it can lead to the loss of life. Air pollution in the UK is estimated to cause 29,000 deaths and 340,000 healthy life years lost. The adverse impact on public health caused by air pollution costs the UK economy more than £20bn per year.

- 1** PM can contribute to strokes in later life and has been found in samples of brain and central nervous system tissue.
- 2** Exposure to PM and NO₂ can irritate the eyes, nose and throat tissue.
- 3** Poor air quality affects everyone. It can have long term impacts on all and immediate effects on the vulnerable.
- 4** Heart and blood vessel diseases like strokes are one of the main impacts of air pollution.
- 5** Ultrafine PM can get into the blood then throughout the body and has been found in body organs.
- 6** PM has been found in the reproductive organs and in unborn children.



JOINT HEALTH PROTECTION PLAN

The joint health protection plan is a collaborative approach to protecting the health of the Lothian population between NHS Lothian and the four local authorities. As well as the priorities laid out within the joint health protection plan, there are also areas of health protection that are delivered independently by NHS Lothian and independently by each of the partners.

A. NHS LOTHIAN

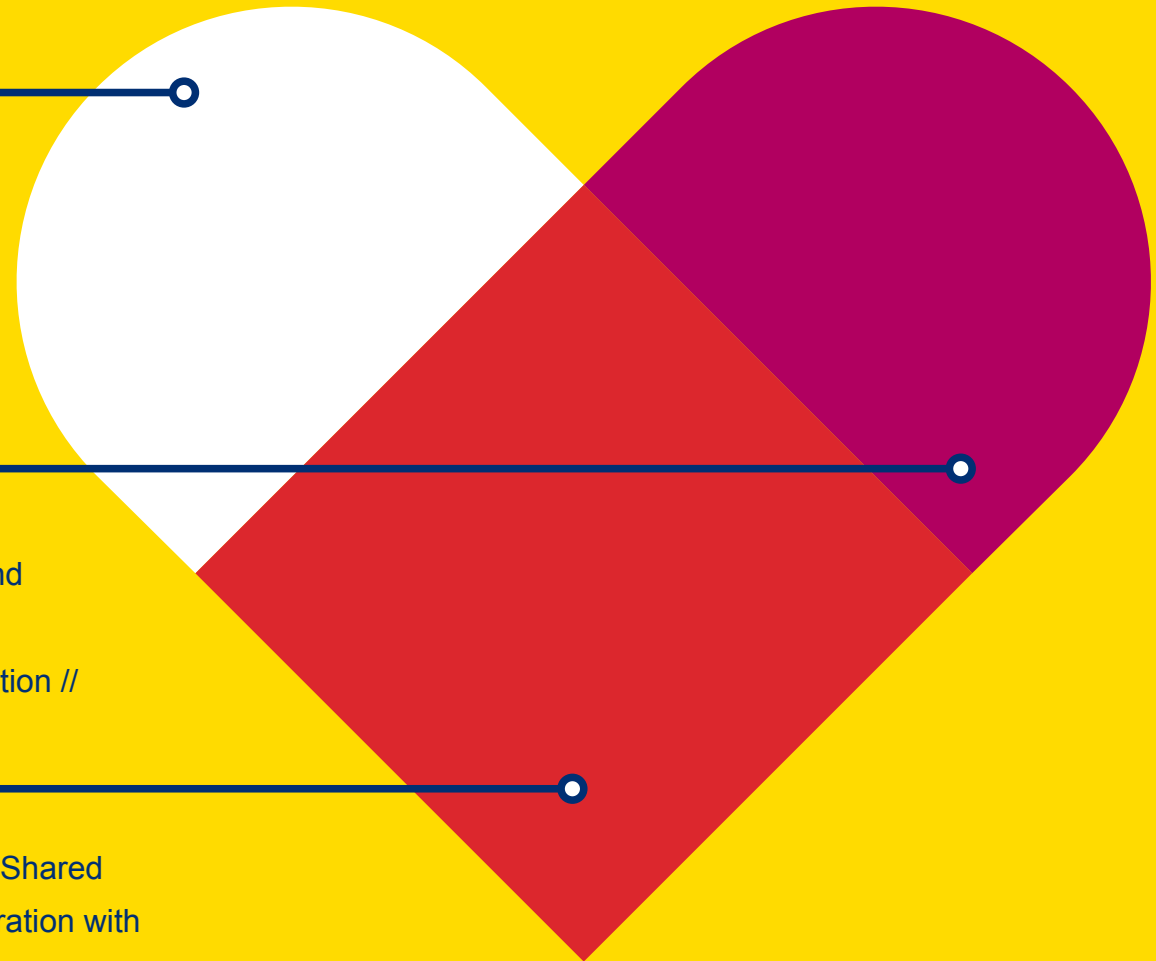
Teaching & research // Vulnerable populations vaccinations // Healthcare associated infections // Blood borne virus control // Health impact assessment // Smoking and substance misuse // Surveillance of diseases & incidents.

B. LOCAL AUTHORITY

Air quality monitoring // Food and food hygiene standards // Recreational water monitoring // Health and safety at work // Occupational health & safety // Public health nuisance control // Contaminated land investigation // Regulatory protection.

C. JOINT HEALTH PROTECTION PLAN

Incident and outbreak management // Joint Working // Shared training // Focus on air quality // Strengthening collaboration with partners // Aligning local services with national plans and priorities.



LOTHIAN POPULATION

Lothian is a geographically diverse area covering around 700 square miles with a population of 880,000. The population's gender split is 49% males and 51% females. The local authority and age profiles are illustrated below. 58% of the Lothian population live in City of Edinburgh. The working age population (16 - 64 years) accounts for 67%, with 16% of the population under 16 and the remaining 17% over 65.

LOTHIAN POPULATION BY LOCAL AUTHORITY



LOTHIAN POPULATION BY AGE AND SEX



■ EAST LOTHIAN
 ■ EDINBURGH
 ■ MIDLOTHIAN
 ■ WEST LOTHIAN

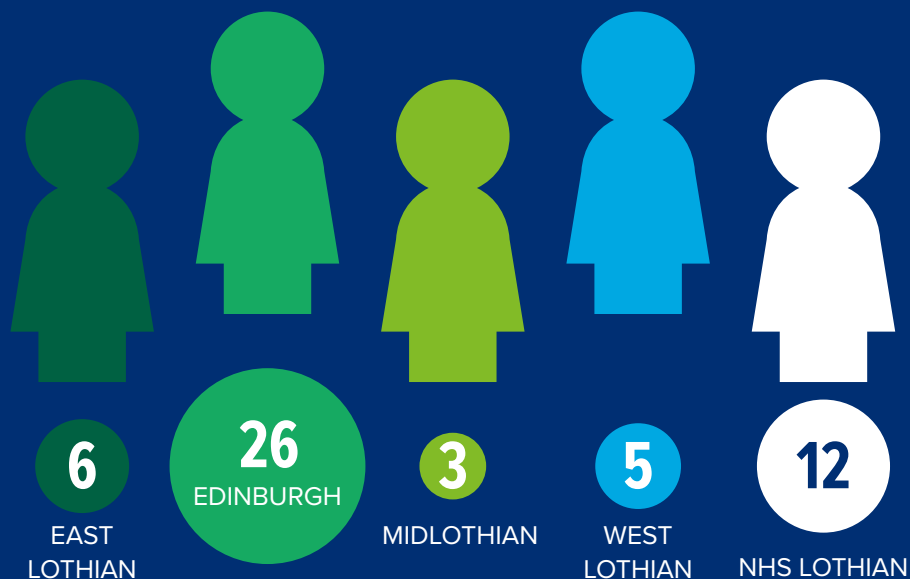
■ MALES
 ■ FEMALES

ANATOMY OF OUTBREAKS AND INCIDENTS

Infections and pollutants in the environment can be a threat to public health.

AN INFECTION/CHEMICAL THREAT ANYWHERE CAN BE A THREAT EVERYWHERE

Infection or pollutants in the community can spread or cause ill health. The Health Protection team keep registers of risks and challenges unique to the Lothians which are potentially a source of outbreaks and incidents.



WHEN INCIDENTS OR OUTBREAKS OCCUR

Health Protection monitors, detects and promptly responds to incidents and outbreaks through joint Problem Assessment Group (PAG) and Incident Management Teams (IMT) multiagency response to protect the community from infectious disease, contamination and any other hazards that constitute a danger to human health.

Number of staff designated as competent persons to investigate incidents, by respective agencies, as required under the Public Health (Scotland) Act 2008.

2,382

INCIDENTS AND OUTBREAK MANAGEMENT

NUMBER OF INCIDENTS AND OUTBREAKS JOINTLY DEALT WITH BETWEEN 2016 & 2018

PRIORITIES FOR THE NEXT TWO YEARS

The Joint Health Protection Plan has eight key priority areas for April 2018 to March 2020, which are summarised here. The detailed description of Lothian risks and challenges, local health protection resources, joint activities, health protection plans for the Lothian area and lessons from health protection incidents and outbreaks are contained in the link: <https://www.nhsllothian.scot.nhs.uk/jointhealthprotectionplan>



The Health of Lothian Population



1. Focus on Air Quality
2. Regulatory Protection
3. Immunisation
4. Incident and outbreak Management



5. Shared Training
 - Competent Persons training for new staff
 - Joint Incident Management
 - MedVet Training Day
 - Exercising of Plans

6. Aligning Local Services with National Plans and Priorities



7. Joint Working
8. Strengthening Collaboration with Partners

**Professor Alison McCallum
Director of Public Health and
Health Policy
NHS Lothian**

**Mr Tim Davison
Chief Executive
NHS Lothian**

**Ms Angela Leitch
Chief Executive
East Lothian Council**

**Mr Andrew Kerr
Chief Executive
City of Edinburgh Council**

**Mr Kenneth Lawrie
Chief Executive
Midlothian Council**

**Mr Graham Hope
Chief Executive
West Lothian Council**