

**Appendix 4a  
Terms of Reference  
Health Protection Board**

**Health Protection Board Membership**

Title	Organisation
<b>Chair - Director of Public Health</b>	<b>Blackpool Council</b>
<b>Deputy Chair – Consultant in Public Health (Health Protection)</b>	<b>Blackpool Council</b>
<b>Specialist Public Health Nurse (Health Protection)</b>	<b>Blackpool Council</b>
<b>Principal Epidemiologist</b>	<b>Blackpool Council</b>
<b>Public Health Emergency Planning Lead</b>	<b>Blackpool Council</b>
<b>Head of Adult Social Care</b>	<b>Blackpool Council</b>
<b>Head of Public Protection</b>	<b>Blackpool Council</b>
<b>Corporate Health Manager</b>	<b>Blackpool Council</b>
<b>Head of Coastal and Environmental Partnerships</b>	<b>Blackpool Council</b>
<b>Emergency Planning/Business Continuity Officer</b>	<b>Blackpool Council/BTH</b>
<b>Elected Member</b>	<b>Blackpool Council</b>
<b>Consultant in Communicable Disease Control / Screening and Imms Lead</b>	<b>UK HSA (Health Protection Team)</b>
<b>Head of Public Health</b>	<b>NHS England</b>
<b>Deputy Director of Nursing and Quality</b>	<b>Fylde and Wyre CCG</b>
<b>Deputy Director of Infection Prevention and Control</b>	<b>Blackpool Teaching Hospitals NHS Trust</b>
<b>Lead Nurse Infection Prevention</b>	<b>Blackpool Teaching Hospitals NHS Trust</b>
<b>Consultant in Public Health</b>	<b>Blackpool Teaching Hospitals NHS Trust</b>

## **1. Purpose**

- 1.1 The Health Protection Board is a sub-group of the statutory Health and Wellbeing Board and will focus on the Director of Public's Health statutory oversight and assurance role of health protection plans to protect the health of the population of Blackpool.
- 1.2 The Board will provide assurance to the Health and Wellbeing Board and its partner organisations on the delivery of health protection plans; including, outbreak management, infection prevention and control, public protection and the performance of immunisation programmes.
- 1.3 The Board will provide a setting for the exchange of information, scrutiny of plans and analysis of data with all partners with a role in the delivery of health protection in Blackpool, ensuring they are acting jointly and effectively to protect the population's health.

## **2. Objectives**

- 2.1 Provide assurance to the Health and Wellbeing Board that the Director of Public Health plans are in place to protect the population's health; a mandated function of the Health and Social Care Act 2012.
- 2.2 Review plans for health protection and surveillance.
- 2.3 Ensure there is a process in place to assure there are effective arrangements for health protection incidents and outbreaks with key risks identified and appropriate mitigation measures undertaken.
- 2.4 Review learning from health protection incidents and outbreaks.
- 2.5 Develop shared action plans/work plans for the HPF to focus on.
- 2.6 Provide regular updates to the Blackpool Health and Wellbeing Board (including short information updates and annual reports).
- 2.7 To provide a governance and accountability framework for existing member groups with a health protection remit and support the establishment of new groups where appropriate; to initially include following:
  - 2.7.1 *Communicable Diseases*
  - 2.7.2 *Non-infectious Sources e.g. Contamination, Poisoning, Radiation*
  - 2.7.3 *Immunisations*
  - 2.7.4 *Emergency Planning, Resilience and Response (EPRR)*
  - 2.7.5 *Infection Prevention and Control (IPC)*
  - 2.7.6 *Environmental Hazards and Coastal Water Quality*
  - 2.7.7 *Public Protection e.g. Food Control, Tattoo Parlours, Sunbeds*

*2.7.8 Harm Reduction and Prevention Forum*

*2.7.9 Migrant Health*

2.8 To receive quarterly reports (shortened format) on topics 2.7.1 to 2.7.8 regarding:

*2.8.1 Current status*

*2.8.2 Progress against outcomes (activity/quality/data/plans developed/epidemiological summaries)*

*2.8.3 Incidents managed and changes made, and suggestions for process improvement*

*2.8.4 Assurance that appropriate plans and testing arrangements are in place for all subgroup programmes*

2.9 To receive more detailed Annual Reports from topics 2.7.1 to 2.7.9 including:

*2.9.1 Details of new policies and developments*

*2.9.2 Plans in development or completed*

*2.9.3 Summary of incidents and investigations*

*2.9.4 Improvements*

*2.9.5 Summary of testing and assurance completed*

*2.9.6 New policies and developments*

2.10 To review:

*2.10.1 Significant incidents*

*2.10.2 Outbreaks*

*2.10.3 Risk registers*

2.11 To identify:

*2.11.1 Best practice*

*2.11.2 Areas of concern*

*2.11.3 Lessons learned*

*2.11.4 Necessary changes*

*2.11.5 Mitigating actions*

2.12 To make recommendations to:

*2.12.1 Topic area leads*

*2.12.2 Commissioners*

*2.12.3 Providers*

*2.12.4 The Health and Wellbeing Board*

*2.12.5 The Council*

2.13 To provide health protection input into the Joint Strategic Needs Assessment process.

2.14 To support the Director of Public Health in providing information for the purposes of

Scrutiny on any health protection related matter.

- 2.15 To receive reports on any other issue that would enable the Director of Public Health to undertake their assurance role in relation to health protection.

### 3. Principles

The Health Protection Board expects all partner agencies to:

- 3.1 Support the aims and objectives of the Board.
- 3.2 Consult and/or inform the Board of organisational changes (including any changes in representation) that may impact on collective working.
- 3.3 Proactively manage risk and acknowledge the principle of shared risk in the context of partnership working.
- 3.4 Own the health and wellbeing inequalities agenda through promoting and driving service transformation and improvement within their respective services and organisations and report on progress on mutually agreed actions.
- 3.5 Share relevant information and promote collaborative and innovative work.

### 4. Membership

- 4.1 Membership will be continuously reviewed, and the Health Protection Board reserves the right to co-opt individuals for specific areas as necessary provided that:
- 4.2 Any such new member can demonstrate to the satisfaction of the Board the contribution that they can make to the overriding aims and objectives; and
- 4.3 In deciding whether to admit any such new member the HPF shall have regard to the resulting size and composition of the Board were the new member to be admitted.
- 4.4 The Core Membership of the group will be as listed in Appendix A.
- 4.5 Each member to nominate on deputy to attend in their absence.

### 5. Quoracy

- 5.1 There is an expectation that Board members will prioritise attendance. If a member is unable to attend the meeting they should nominate a deputy.

### 6. Communication of Decisions to Partners

- 6.1 All members will be responsible for communicating actions and decisions to appropriate colleagues within their own organisation following each meeting.

## **7. Frequency of Meetings**

- 7.1 The group will meet quarterly and at other times as required by the Director of Public Health.
- 7.2 Task and finish groups may be established as required

## **8. Committee Chair**

- 8.1 Meetings will be chaired by the Director of Public Health, or their appointed deputy.
- 8.2 Minutes will be produced by the administrative team of the Director of Public Health. Meeting papers will be circulated 5 working days ahead of meetings, with minutes also circulated in a timely fashion to HPF members following each meeting.

## **9. Reports**

- 9.1 Short reports for discussion at the Health Protection Forum will be submitted by each topic lead at least 7 working days ahead of the meeting date to allow time for collation and circulation to the group. Verbal reports will be accepted if organisational capacity is limited.

## **10. Standing Agenda Items**

Standing agenda items will include (for each topic lead):

- current status summary
- progress against outcomes (activity/quality data/plans developed/epidemiological summaries)
- incidents managed and changes made, and suggestions for process improvement

## **11. Review**

- 11.1 Terms of Reference will be fully reviewed at least every two years.
- 11.2 The Terms of Reference will be amended every time an organisation becomes or ceases to be a member.
- 11.3 Next review date: February 2024