

**Report of the Cabinet Member for
Community, Public Health, Transportation and Environmental
Services**

Introduction

I have been asked to report to Council by Members as follows:

- 1. by Councillor Wright on progress on the 10 point green action plan**

- 2. by Councillor Shaw on the preparations that the Council and the NHS are making for the possible development of the Wuhan coronavirus into a global pandemic affecting Devon and the UK;**

- 3. by Councillor Hannaford on Women's health screening in Devon, as follows:**
 - *Overall local trends and figures across the main health concerns for women.*
 - *In which areas are we doing well and others that we need to improve.*
 - *Number of breast cancer screenings missed locally, as one in four nationally are missed.*
 - *Time and accessibility of breast screening appointments.*
 - *The major review of cancer screening published in October suggesting women should be offered lunchtime mammograms near their workplace to rescue screening rates.*
 - *Cervical cancer rates in Britain halved between the late 1980s and mid-2000s, but progress has since been 'stalling and stagnating', according to Cancer Research UK figures recently published.*
 - *The latest figures show less than three-quarters of women invited for cervical screening take it up, and this falls even further in younger age groups and more deprived regions. How are we doing locally?
The current vaccination rates for the human papilloma virus (HPV) in Devon.*
 - *New technological innovations that make it possible to potentially home test for cervical cancer in a less invasive way.*
 - *Can we work with local employers and businesses to ensure women have time off and child care for their health screening needs?*

Reports

Taking the requests for reports in order:

1. 10 point green action plan

I last reported on this issue at the County Council meeting of 10th October 2019.

Despite not adopting the 10 Point Green Action Plan originally proposed through the Notice of Motion submitted by Cllr. Wright, this Council did endorse the principle of pursuing further action to address environmental issues. As a result, opportunities for enhanced green action were considered by the Environmental Performance Board last August and relevant aspects were noted by the Farms Estate Committee in September 2009. A refreshed suite of environmental action plans is planned, although their production has been delayed due to the current priority being given to the Devon Climate Emergency.

Through my previous commentary, I indicated that future progress would be reported through the Environmental Performance Board and the publication of the annual Environmental Performance Statement. However, to ensure that this information is readily available to all Members and also to the public, the progress highlight reports presented to each meeting of the Environmental Performance Board will be published online via the DCC Environmental Policy web pages (at: <https://www.devon.gov.uk/environment/environmental-policy>). This approach will be adopted following the next scheduled Board meeting in May.

In the meantime, the table below summarises progress against a few of the areas for enhanced environmental action endorsed by the Environmental Performance Board.

Proposed Action	Progress Since Autumn 2019
Work with Woodland Trust in launching a new Devon free tree scheme linked to ash dieback.	Pilot scheme successfully established in November, with free tree packs recently offered to 45 landowners.
Launch a new 'Landmark Trees' planting scheme with Town and Parish Councils, again linked to ash dieback.	Separate pilot scheme successfully established, with landmark trees recently offered to 31 Parish Councils. Funding secured for major new project (Saving Devon's Treescapes) through Devon Ash Dieback Resilience Forum to provide a future approach to these tree planting schemes.
Approach all County Farms Estate tenants to review opportunities for new tree planting and provide tree stock.	First planting scheme undertaken in December (through DCC staff volunteering event) at DCC tenanted farm near Silverton (200 trees). Ongoing programme of planting at a series of other County Farm Estate holdings in

	preparation, for implementation through Saving Devon's Treescape project.
Promote and support a partnership initiative to review the Devon Ancient Woodland Inventory through DBRC.	Funding contributions secured through local and national partners (including DCC). DBRC project commencement in December 2019.

2. Wuhan coronavirus

At the point of announcement of the Covid-19 outbreak in Wuhan, China, Public Health England, as the lead government agency for health protection matters, put in place arrangements to contain the spread of the virus which are currently being implemented with all immediate changes required according to the status of the outbreak.

When the World Health Organisation described the outbreak as public health emergency of international concern, the NHS and Devon County Council immediately implemented enhanced planning arrangements for Covid-19 and continue to do so on a daily basis. As an example of the planning activities going on, Devon County Council's Director of Public Health chairs a daily teleconference which includes emergency planning, social care and human resources. NHS providers in Devon also currently have regular teleconferences, chaired by the NHS Devon Clinical Commissioning Group, which includes the three Directors of Public Health. We also participate in a call with PHE and the universities in the South West.

Communications are being led by the Department of Health and Social Care/Public Health England and are cascaded by our own communications team.

In addition, the Local Resilience Forum, through its networks of emergency planning staff, have been reviewing the updated Devon and Cornwall Pandemic Influenza Plan and its supporting plans. Should a Covid-19 Pandemic be declared, this plan will be implemented immediately.

3. Women's health screening

Cervical screening, breast screening and HPV (Human Papilloma Virus) immunisation uptake in Devon

This report has been compiled using information from the Devon, Cornwall and Isles of Scilly Health Protection Committee Annual Report 2018-19 as the data are publicly available. The annual report will be presented to the next Devon Health and Wellbeing Board as part of the local authority's assurance process.

Accountability and assurance arrangements

NHS England/NHS Improvement (NHSE/I) is accountable for national screening and immunisation programmes. These are commissioned via Section 7A arrangements.

PHE Screening and Immunisation Teams work alongside NHSE/I to commission the programmes.

Local authorities, through the Director of Public Health, are responsible for seeking assurance that services are operating safely whilst maximising coverage and uptake. Serious incidents that occur in the delivery of programmes are reported to the Director of Public Health and to the Health Protection Committee. There are oversight groups (Programme Boards) for all screening programmes and these form part of the local assurance mechanisms to identify risks and oversee continuous quality improvement.

Cervical screening

The national programme is moving to a 'Primary HPV' model, where women's samples are first tested for HPV infection and only those that are positive for high-risk HPV infection go on to be tested for cytology. This is a very positive change as it will more effectively identify women at greatest risk of developing cancer, and at the same time return a higher proportion of women who are HPV negative (and at lower risk of cancer) back to routine screening intervals.

Local issues:

- During 2018/19, **sample turnaround times** for the Devon programme were falling short of the national standard, with 69.2% of sample results sent to women within 14 days (April 18). The service is now back on track with a significant improvement in turnaround times (April 19: 96.8%).
- **Workforce issues** are a challenge for all screening programmes. In the cervical programme, sample-taker training and assurance is critical in maintaining quality and safety. Therefore, initiatives were implemented in 2018/19 to support sample-takers.
- **Coverage** of local cervical cancer screening programmes remains a concern. Rates remain above the national average yet continue to fall, mirroring the slow but consistent reduction in national rates over many years (Table 1). All areas are below the national target of 80%.

Table 1: Cervical cancer screening coverage, 2016-2018

Indicator ¹	Lower threshold	Standard	Geography	2016	2017	2018
Cervical cancer screening coverage	75	80	Devon	77.1	76.6	76.3
			Plymouth	74.5	73.6	73.1
			Torbay	74.8	73.9	73.0
			Cornwall	75.7	74.9	74.5
			Isles of Scilly	81.9	78.2	79.2
			England	72.7	72.0	71.4

¹ Data Source: LA Dashboard (data taken from Public Health Outcomes Framework (PHOF) <http://www.phoutcomes.info/>)

Breast screening

In 2018/19 all breast screening services were affected by the national incident (May 2018) whereby some eligible women may not have been invited for their final screening appointment. Services were required to provide thousands of extra appointments in addition to maintaining the routine programme. All Devon providers worked extremely hard to complete the catch-up in the nationally required timescales, with minimal impact on the routine programme. Learning from the incident has been implemented across the national programme with additional quality improvement and assurance processes introduced with no concerns raised about local services.

For 2018/19, all providers generally maintained performance however there were in year fluctuations due to equipment and staffing issues, and pressures from symptomatic services. These issues are representative of pressures across the national programme and have been proactively managed to minimise any impact on women. Workforce remains an area of concern with national and local shortages of key staff across the providers.

Coverage remains stable though below the national target of 80%, mirroring the national trends. Coverage for Devon has remained above the national average (Table 2).

Table 2: Breast cancer screening coverage, 2016-2018

Indicator ²	Lower threshold ³	Standard ⁴	Geography	2016	2017	2018
Breast Cancer screening coverage	70	80	Devon	78.8	78.3	78.3
			Plymouth	79.3	79.0	78.2
			Torbay	74.7	74.1	74.4
			Cornwall	80.0	79.3	78.4
			Isles of Scilly	80.1	79.5	79.8
			England	75.5	75.4	74.9

Improving uptake (breast and cervical screening)

Following the national breast screening incident and a cervical incident soon after, the Secretary of State announced a review of UK cancer screening programmes. This was published in October 2019 and made a series of recommendations regarding IT systems, better high-risk identification/screening, organisational and governance changes, and recommendations to improve uptake, including use of text reminders and extending access to clinic appointments - as referenced in the request for information from Councillor Rob Hannaford. We are currently waiting for the national response to these recommendations to be agreed which will then inform

² Data Source: LA Dashboard (data taken from Public Health Outcomes Framework (PHOF) <http://www.phoutcomes.info/>)

³ Threshold based on 2017-18 Public Health Functions Agreement

⁴ National Screening and Immunisation Programme Standard

local action. The recommendations also refer to potential new technology that has not yet been considered by the National Screening Committee.

All members of the local Health Protection Committee are committed to work more closely with partners to drive improvements in screening uptake and quality and to reduce inequalities within and across communities. This includes supporting NHSE/I's delivery of the ambitions outlined within the NHS Devon Long Term Plan:

- supporting effective local delivery of primary HPV testing within the cervical programme; and delivery of HPV vaccination for boys (commenced September 2019)
- working with partners to ensure that all screening programmes (cancer and non-cancer) are continuing to meet or exceed national performance standards
- continuing to develop specific plans with the Cancer Alliance to understand variability in uptake, improve quality and reduce inequality
- responding to learning from Sir Mike Richards' Independent Review
- exploring new models of working
- capitalising on wider digital developments and greater use of artificial intelligence

HPV Vaccination

HPV vaccination is a two-dose programme with both doses given in Year 8 or first dose given in Year 8 and second dose in Year 9. In Devon, all adolescent boosters are given in Year 9 with an offer of mop-up community clinics. The school-aged programme also includes flu vaccination.

2018/19 saw the successful mobilisation of a new provider for school-aged immunisations in Devon. There were several challenges due to the extension of the flu programme to include year 5 and implementation of a new e-consent system. Additional clinics were delivered to minimise the impact on uptake. Table 3 shows HPV uptake and Table 4 shows adolescent booster uptake by Local Authority. The adolescent booster data is part of a new national pilot data collection and is very provisional – therefore the quality of the data is not guaranteed.

Table 3: Local Authority uptake of HPV Dose 1 in Year 8 females (%) up to 31 August 2019

Indicator	Standard ¹	Geography	2016/17	2017/18	2018/19	2018/19
HPV (%)	86.1	Devon	86.2	82.5	84.3	84.3
		Plymouth	85.1	86.6	83.6	83.6
		Torbay	85.0	86.2	86.2	86.2
		Cornwall & IoS	78.6	81.9	78.4	78.4
		England	87.2	86.9	87.9	87.9

Table 4: Local Authority adolescent booster uptake in Year 10s (%)

Local Authority	2016/17 vaccinated up to 31/08/17	2017/18 vaccinated up to 31/08/18	2018/19 vaccinated up to 31/08/19
Devon	82.4	90.0	89.7
Plymouth	77.6	76.4	78.7
Torbay	75.9	77.9	76.7
Cornwall	80.3	76.9	76.8
England	82.0	82.9	86.0

NHSE/I is working closely with Devon's school-aged immunisation provider to ensure improvements are made for the 2019/20 academic year. Self-consent for HPV vaccination is to be developed as an additional tool to increase uptake.

Councillor Roger Croad
Cabinet Member for Communities, Public Health, Transportation and Environmental Services