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| SUBJECT: | Authorisation of Proper Officers – Public Protection, Environmental Health (Communicable Disease). |
| MEETING: | Individual Cabinet Member Decision, Cabinet Member for Equalities & Engagement – County Councillor Angela Sandles |
| DATE: | 11th September 2024 |
| DIVISION/WARDS AFFECTED | All |

1. PURPOSE:

- 1.1 To authorise the “Proper Officers” for the purposes of the Public Health (Control of Diseases) Act 1984 (as amended), following staffing changes in the Health Protection Division of Public Health Wales (PHW). This relates to the partnership work undertaken in respect of communicable disease involving this Council’s Environmental Health section and PHW.

2. RECOMMENDATIONS:

- 2.1 That the Head of Public Protection approves the Authorisation of Officers outlined in this report to undertake the necessary communicable disease functions on behalf of the Authority.
- 2.2 The appointments/authorisations of the following individuals employed by Public Health Wales, as “Proper Officer” for the purposes of exercising the powers available under the Public Health (Control of Diseases) Act 1984 (as amended) and Regulations made, or deemed to be made, thereunder on behalf of Monmouthshire County Council. These appointments/authorisations supersede all previous authorisations, and are as follows:

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| Siobhan Adams | Consultant in Health Protection |
| James Adamson | Consultant in Health Protection |
| Richard Firth | Consultant in Health Protection |
| Beverley Griggs | Consultant in Health Protection |
| Susan Mably | Consultant in Health Protection |
| Elizabeth Marchant | Consultant in Health Protection |
| Keith Neal | Consultant in Communicable Disease Control |
| Giri Shankar | Consultant in Communicable Disease Control |
| Wendi Shepherd | Consultant in Health Protection |

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| Rhianwen Stiff | Consultant in Communicable Disease Control |
| Christopher Johnson | Consultant Epidemiologist |
| David Ishola | Consultant Epidemiologist |
| Emily Steggall | Consultant Epidemiologist |
| Daniel Thomas | Consultant Epidemiologist |
| Christopher Williams | Consultant Epidemiologist |

3. KEY ISSUES:

- 3.1 The Public Health (Control of Disease) Act 1984 (as amended) and associated regulations made under the Act empower the Proper Officer to carry out various functions and duties. In the majority of cases the role of the Proper Officer could be defined as the person that has the responsibility to receive, give or require information to enable action to be taken in relation to people, premises or objects where they may be infected, contaminated or could otherwise adversely affect public health.
- 3.2 The Officers identified in this report, relating to the authorisation of individuals within PHW, are aware of their inclusion following a specific notification from their employer for the authorisation of additional Officers.
- 3.3 The Council has a statutory duty to investigate and thus respond to notifications of certain communicable diseases, as outlined in the 1984 Act and regulations made thereunder. Failure to have a sufficient number of suitably authorised Officers would have a detrimental impact on the Council's ability to fulfil its statutory obligations.
- 3.4 In addition to the above, the failure to investigate and respond to notifications of communicable disease is likely to have a potentially significant impact on public health. There is the likelihood that there would be additional secondary cases of infection as a result of the failure to, for example, provide infected persons with appropriate advice. This would involve advice in relation to the actions that they need to take to minimise the risk of onward transmission, excluding infected persons from work particularly in vulnerable settings, for example food handlers and carers.
- 3.5 There is also the likelihood that, without the investigation into the potential sources of infection that the Council undertakes, there would be new cases of infection. This would be as a consequence of a failure to identify and implement effective controls in relation to the source of infection.
- 3.6 **Enforcement Powers:** Generally, there is no need to compel people to take action to protect other people's health. The health protection powers are for use where voluntary measures are insufficient and legal powers are needed to deal with infections or contamination that present a significant risk to human health. The powers now available to local authorities include those that can be exercised by the local authority without judicial oversight and others that involve an application to a Justice of the Peace (JP). For example:

A JP can make a Part 2A Order requiring a person(s) to:

- undergo medical examination (NOT treatment or vaccination)
- be taken to hospital or another suitable establishment
- be detained in hospital or another suitable establishment
- be kept in isolation or quarantine
- be disinfected or decontaminated
- wear protective clothing
- provide information or answer questions about their health or other circumstances
- have their health monitored and the results reported
- attend training or advice sessions on how to reduce the risk of infecting or contaminating others
- be subject to restrictions on where they go or who they have contact with
- abstain from working or trading

In addition, a JP can make a Part 2A Order requiring that:

- A thing(s) is seized or retained; kept in isolation or quarantine; disinfected or decontaminated; or destroyed or disposed of.
- A body or human remains be buried or cremated, or that human remains are otherwise disposed of premises are closed; premises are disinfected or decontaminated; a conveyance or movable structure is detained, or a building, conveyance or structure is destroyed.

- 3.7 The Authority subscribes to the Communicable Disease Outbreak Plan for Wales ('The Wales Outbreak Plan'). Appropriate arrangements are in place to liaise with all necessary partner agencies/bodies as required, (other local authorities, PHW, Consultant in Communicable Disease Control (CCDC), Food Standards Agency, etc.) in the event of an outbreak.
- 3.8 The Council is required to respond to and investigate all notifications of infectious disease that it receives for which it is the statutory responsible authority. The rationale for this is that each "sporadic" case has the potential to be the first case of an outbreak and that this can only be ascertained by investigation. Additionally, each case could potentially be the cause of an outbreak through onward transmission of the disease agent under certain circumstances. All cases will receive an initial response (visit, telephone call or note through the door as appropriate) in accordance with the "Notification Guidelines" agreed jointly by the Directors of Public Protection Wales (DPPW) and PHW
- 3.9 Notifications are received primarily from hospital laboratories, direct from GP surgeries and members of the public. Response times specific to each disease and which are based upon the potential public health significance of the infection have been set by the Health Protection Team within Public Health Wales and all Councils are required to have regard to these timescales when responding to notifications. Failure to have a sufficient number of suitably authorised officers would have an adverse impact on the Council's ability to adhere to these response times and thus performance against the 'Notification

Guidelines'. Notifications in relation to assisted burials are received from various sources such as relatives, landlords, doctor's surgeries etc.

3.10 The recommendations outlined in this report meet the Authority's priorities relating to the delivery of statutory front line services.

4. INTEGRATED IMPACT ASSESSMENT, (includes equality, future generations, social justice, safeguarding and corporate parenting)

4.1 An Integrated Impact Assessment is not required to supplement this report as there is no change to existing service provision. The purpose is to update the PHW Officers this Authority's Environmental Health section works with during communicable disease investigations. As outlined in this report, there is a positive impact on the health of our residents, together with effectively working with local businesses, to effectively investigate all reported infections.

5. OPTIONS APPRIASAL

5.1 N/A - The authorisation of Proper Officers under the 1984 Act is a statutory duty.

6. EVALUATION CRITERIA:

6.1 Success will be measured by activity – performance indicator and activity measures relevant to Communicable Disease are currently reported on a quarterly basis through our Service Business Plans. The indicators relevant to this service area are:

(A) Indicator (quantitative measure) – e.g. % of cases of E.Coli 0157 responded to within 4 hours (other response times are determined under the Communicable Disease Expert Rules).

(B) Actions (qualitative measure) - To investigate Infectious Disease Notifications and undertake interventions where necessary.

7. REASONS:

7.1 It is necessary to update the appointments and authorisations of PHW Officers to enable this Authority to effectively discharge its powers under the Public Health (Control of Diseases) Act 1984 (as amended) and Regulations made thereunder.

8. RESOURCE IMPLICATIONS:

8.1 None as a consequence of this report.

9. CONSULTEES:

Head of Public Protection
Public Health Wales
MCC Legal Services

10. BACKGROUND PAPERS:

N/A

11. AUTHOR:

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12. CONTACT DETAILS:

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End of report.