

11 March 2026

Subject:	<i>Health Protection Annual Report 2024-25</i>
Presenting Officer and Organisation 	<i>Sophie Pagett Service Manager Health Protection Sandwell Metropolitan Borough Council</i>
Purpose of Report	Information

1. Executive Summary

- 1.1 The 2024–2025 Health Protection Annual Report provides assurance to the Sandwell Joint Health and Wellbeing Board that strong governance, partnerships, and systems are in place to protect the health of Sandwell residents. The report also updates the Board on health protection outcomes, bringing together intelligence from the Council, UKHSA, NHS England, Black Country ICB, and local NHS Trusts to outline performance, risks, and priorities for the year ahead.
- 1.2 There were a range of reactive and proactive challenges in Sandwell in 2024-25. Responses to outbreaks of measles, pertussis, and seasonal winter illnesses were delivered, and strengthened vaccination programmes, improved infection prevention in care settings, and enhanced surveillance supported proactivity. System partners continued to prioritise equity, resilience, and action on health inequalities.
- 1.3 Key Strategic Recommendations made in 2024 – 25 report for action in 2025/26:
 - Develop a life course Oral Health Strategy that spans the life course.
 - Establish a Vaccination and Immunisations subgroup to increase uptake rates.
 - Strategic focus on TB, consideration to extend latent TB infection screening due to rising incidence.
 - Live test pandemic preparedness through Exercise Pegasus.
 - Review the Pandemic Flu Plan in line with forthcoming national guidance.
- 1.4 Sandwell remains committed to evidence based, equitable, and collaborative health protection, ensuring residents remain at the centre of prevention, preparedness, and population level protection efforts.

2. Recommendations

- 2.1 That the Board notes this is the first Health Protection Annual Report, providing assurance and oversight of health protection arrangements locally, through a multiagency approach.
- 2.2 That the Board notes the recommendations set out in the Annual Report report.
- 2.3 That the Board agrees to receive an Annual Health Protection Report to review updates on key areas of activity.
- 2.4 Board members note there is not a primary care representative on the Health Protection Board and asks for one to be identified.

3. Context and Key Issues

3.1 Background

- 3.2 The purpose of the Health Protection Annual Report is to provide assurance to the Health and Well-being Board that there is oversight of health protection arrangements, actions and outcomes for the Sandwell population.
- 3.3 The Health Protection Board is a sub-group of the statutory Health and Wellbeing Board and focusses on the Director of Public Health's statutory oversight and assurance function relating to health protection of the population of Sandwell. Assurance will be provided on the delivery of health protection plans, including outbreak management, infection prevention and control, immunisation and screening programmes; and environmental, radiation and chemical threats at the individual, group, and population levels.

4. Sandwell Health Protection Board & Governance

- 4.1 Sandwell Health Protection Board is a membership of partners from across the system who have a responsibility to ensure the safety of population health. Local Authority Health Protection provide assurance to the Director of Public Health and Council that systems are in place to reduce disease burden. Terms of reference are included as an Appendix. It is chaired by the Service Manager for Health Protection who reports directly to the director of Public Health and is a key member of the Public Health Senior Leadership Team.
- 4.2 The Board is asked to note the membership of the Health Protection Board and may want to consider a Primary Care representative, following the development of neighbourhood plans and the important role of primary care in health protection.
- 4.3 The Board meets quarterly and has had good attendance during 24 -5.

5. Sandwell Health Protection Board receives routine updates from partners regarding:

- Control of communicable diseases
- Control of novel and emerging diseases
- Emergency preparedness, resilience, and response
- Investigation and control of incidents and outbreaks
- Surveillance of communicable diseases
- The prevention and management of infections in health and social care environments.
- Assurance of local immunisation programmes and cancer screening programmes
- Reducing TB burden which is a priority area for the Borough.

6. Key findings:

- 6.1 Vaccinations and Immunisations
- Childhood vaccination uptake improved but remains below the 95% herd immunity target.
 - A multiagency response to a local Measles Outbreak
 - School-aged flu vaccination increased for the third consecutive year

- 6.2 Tuberculosis
- TB rates remain significantly above regional and national averages at 20.6 per 100,000 (2024).
 - A three-month latent TB screening pilot in ESOL clinics found 22% positivity and strong engagement, leading to programme extension.
- 6.3 Oral Health
- Oral Health remains an area that is underdeveloped in Sandwell and needs a life course approach
- 6.4 Data
- Vaccinations and screening data is varied in quality. Where we have limited data on ethnicity we can see a difference in uptake, but reporting is problematic not ethnicity is not routinely recorded.

7. Summary

- 7.1 The Board is asked to note the work of the Health Protection Board in providing assurance on prevention, preparedness, resilience and response of health protection issues.
- 7.2 Over the next year, national NHS reforms, including the introduction of the NHS 10-year plan, will bring significant changes across the system. These reforms are likely to affect key partner organisations and create movement at place, regional, and national levels. The new ICB cluster arrangements and changes within NHS England will introduce a period of transition, alongside opportunities for greater collaboration and system alignment.
- 7.3 Despite this evolving landscape, partners across Sandwell will continue to work together in new and strengthened ways to protect the public's health from infectious disease threats and to reduce inequalities. Aligning the priorities of the NHS, UKHSA, and the Council Plan will help ensure that residents remain at the centre of prevention, preparedness, and the management of potential threats and harms to public health.

8. Engagement

- 8.1 Consultation of the Health Protection Annual report was sought from the Health Protection Board members and partners.

9. Implications & Considerations

Resources:	No direct implications arising from this report.
Legal and Governance:	The Health and Social Care Act 2012 sets out the role of the Director of Public Health is to seek assurance that plans are in place to protect the population's health and is a mandated function. This report provides the assurance and negates the risk.
Risk:	Risk implications for the public's health and ability to respond to the risk of new and emerging threats of infectious diseases on a local level. Mitigations through preparedness plans, exercise testing and business continuity planning.
Equality:	Exacerbation of health inequalities and equity if recommendations within the report are not adopted.
Health and Wellbeing:	Potential implications on population health and wellbeing if the recommendations are not supported.

Social Value:	No direct implications arising from this report.
Climate Change:	Implementation of the Sandwell air quality action plan mitigates and outlines how the council will tackle issues relation to climate.
Corporate Parenting:	No direct implications arising from this report.

10. Appendices

Appedix 1: Sandwell Health Protection Annual Report 2024-25

Appedix 2: Sandwell Health Protection Board Terms of Reference