# **RUNNYMEDE BOROUGH COUNCIL**

# CONSULTATION WITH APPROPRIATE CHAIRMAN AND VICE- CHAIRMAN FOR URGENT ACTION TO BE TAKEN UNDER STANDING ORDER 42

APPENDIX 'A'

TO:

Councillors M Heath and N King

Chairman and Vice- Chairman of the Environment and Sustainability Committee

FROM: Mario Leo

OFFICER REFERENCE: MAL/Prop Officer UKHSA DATE: 25 October 2021

## 1. Synopsis of report:

There has been a request submitted to the Council that any person employed as a Consultant in Communicable Disease Control / Consultant in Health Protection at the South East Region of the UK Health Security Agency (UKHSA) be appointed by Runnymede Borough Council as a Proper Officer in relation the receipt and disclosure of notification of suspected notifiable disease, infection or contamination in patients and dead persons. This is a requirement of The Health Protection (Notification) Regulations 2010.

The current constitution and delegation of authority allows for the Corporate Head of Environmental Services (CHES) or the Principal Environmental Health Officer to authorise the appointment of such Proper Officers. However, the current Scheme of Delegations in the Council's Constitution delegates powers to Council officers to appoint Health Protection Agency (HPA) staff as Proper Officers. It is understood that HPA was disbanded in 2013.

Since the current Constitution specifically states HPA, and not UKHSA, it is considered that, as it currently stands, the Constitution's wording does not allow the appropriate Runnymede's officers to authorise the appointment of specific UKHSA staff as Proper Officers. When the Constitution is revised the wording in the Scheme of delegations will be amended.

The UKHSA has requested that the Council agree to the appointment of certain of their staff as Proper Officers of Runnymede Borough Council to enable them to discharge their functions effectively.

# 2. Reasons why this matter cannot wait for a Committee Decision

If there are matters pertaining to infectious and notifiable disease within the Borough, then the UKHSA require to have been authorised as the Proper Officer in order to act under the above regulations. Hence it is suggested that the appointment of UKHSA as the Council's Proper Officer is done forthwith rather than wait to be considered at the next Committee meeting.

## 3. Recommendation(s)

That the Corporate Head of Environmental Services and the Principal Environmental Health Officer be authorised to appointment appropriate staff of the UK Health Security Agency as Proper Officers for relevant purposes under the Public Health (Control of Diseases) Act 1984 and the National Assistance Acts 1948 and 1951.

#### 4. Context of report

By approving the course of action proposed in this report the Council will contribute to the effective management of public health functions on a regional and national basis.

## 5. Report and, where applicable, options considered

Local government undertakes a wide range of functions. In respect of certain matters, it is required to identify a particular post to discharge a specific role. When such a post is designated to carry out a function the person holding that post is described as the Proper Officer. By way of example local authorities are required to issue a number of documents and in order to ensure that any such document is authentic it should be signed by an officer of the local authority who has been designated as the Proper Officer for signing documents.

Local authorties have since Victorian times been responsible for discharging a number of public health functions. This ranged from dealing with sewers and drains, water supply, infectious diseases, and the prevention of the spread of diseases. Clearly with the advent of the National Health Service and the creation of utility companies the role has changed.

One function which has remained as part of the functions of local authorties is the control of diseases. This function has been at the forefront of public awareness during the Covid pandemic. A large number of the controls which were brought in to contain the spread of Covid were brought in under the provisions of the Public Health (Control of Disease) Act 1984 (the 1984 Act).

The Health Protection (Notification) Regulations 2010 (the 2010 Regulations) were made under powers contained in the 1984 Act and are designed to address concerns that existed about previous legal powers to deal with infectious diseases. The purpose of these statutory provisions was summarised as:

- updating the list of infectious diseases that doctors are required to notify in the light of current scientific knowledge;
- making provision for notification by doctors of cases of other infection (e.g., caused by new or emerging diseases) or contamination with chemicals or radiation that may pose a significant risk to human health;
- introducing statutory notifications of specified microorganisms by laboratories testing human samples in recognition of the crucial role that laboratories play in diagnosis.

A major aspect of 2010 Regulations was the requirement for GPs to notify local authorties when patients they are treating are suffering from certain illnesses. The 2010 Regulations require that GPs notify the Proper Officer of the local authority of such matters.

Local authorties are therefore required to appoint one of their officers as the Proper Officer for such purposes.

The UKHSA is a government agency in the United Kingdom, responsible since April 2021 for UK-wide public health protection and infectious disease capability and replacing Public Health England (PHE). It is an executive agency of the Department of Health and Social Care (DHSC).

The formation of the UKHSA essentially transferred PHE's health improvement functions to the Department, while its health protection elements form part of the new government agency. Staff and systems were moved into the new organisation in 2021. PHE continued to have a shadow existence until September 2021. UKHSA became fully operational on 1 October 2021.

One of the main roles of UKHSA is to plan for, prevent and respond to external health threats such as infectious diseases. In order to discharge that function it is important that the UKHSA become aware of infectious diseases at the earliest opportunity. They have therefore requested that local authorities appoint certain of their medically qualified officers as Proper Officers under the 2010 Regulations for the purposes of the notification of the medical conditions listed in the 2010 Regulations.

In order for the Council to comply with this request from UKHSA it is necessary to grant officers the powers to appoint UKHSA staff as Proper Officers.

If the Council were not to accede to this request it could cause delays in dealing with infectious diseases.

If this proposal is approved the Council will sign a proforma letter produced by the UKHSA recording this appointment.

## 6. Policy framework implications

none.

# 7. Financial and Resource implications (where practicable)

There are no Financial or Resource implications associated with this proposal. The salary cost of staff employed by the UKHSA will be met by that organisation.

## 8. Legal implications

There is a requirement of Local Authority to appoint a Proper Officer in relation to the receipt and disclosure of notification of suspected notifiable disease, infection or contamination in patients and dead persons.

## 9. Equality implications

None

#### 10. Other implications -

Environmental considerations: will allow for the Proper Officer from UKHSA to be authorised in relation to for the receipt and disclosure of notification of suspected notifiable disease, infection or contamination in patients and dead persons under regulations 2, 3 and 6 of The Health Protection (Notification) Regulations 2010.

The main purpose of the notification system is to enable prompt investigation, risk assessment, and response to cases of infectious disease or contamination (including chemicals or radiation), that present (or could present) a significant risk to health. The second benefit of notification is the provision of data for use in epidemiological surveillance of infections and contamination to monitor effectiveness of existing interventions, identify need for new interventions, and inform the planning of healthcare services.

#### 11. Background papers

None

#### 12. Chief Officer(s) Decision

Signature of authorised officer Mario Leo (Interim CHES)...

I have been consulted and am in agreement with the above

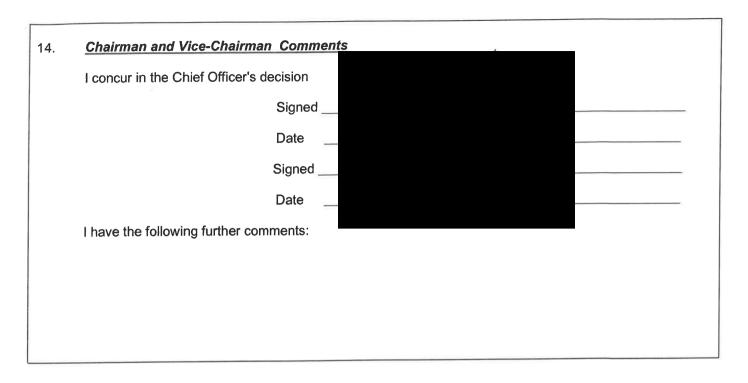
Signature(s) and position(s) of other relevant Chief Officer, Corporate Heads or authorised representatives

**NB**: this <u>must</u> include the Assistant Chief Executive or his authorised representative where the decision involves expenditure, loss of income, or future implications for budget or financial forecast.

### 13. Chief Executive's Decision

Signature of Chief Executive .

I have been consulted and am in agreement with the above



Further information may be obtained from Mario Leo

on Ext. 5640

The completed copy is to be returned by the Councillors to the Corporate Head of Law and Governance (John Gurmin) who will send a copy to the Chief Officer and report to the relevant Committee for information.