

**Dumfries and Galloway
Joint Health Protection Plan
April 2024 – March 2026**

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Introduction

The Public Health etc. (Scotland) Act 2008¹ (the Act) requires NHS Boards, in consultation with Local Authorities, to produce a Joint Health Protection Plan (JHPP) which provides an overview of health protection priorities, provision and preparedness for the NHS Board area. Guidance on the content of JHPP's has been published by Scottish Government¹.

This updated plan covers the period 1st April 2024 to 31st March 2026. It is a public document and is available to members of the public on both NHS Dumfries & Galloway and Dumfries & Galloway Council's websites and on request. We hope that you will find this plan to be of interest, and of value, and that its production will contribute to protecting the health of the people who live, work and visit in Dumfries and Galloway.

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¹

<https://www.legislation.gov.uk/asp/2008/5/part/1>

Preface

NHS Dumfries & Galloway's Health Protection Team (HPT) work closely with several key partners such as Public Health Scotland (PHS), Dumfries & Galloway Council's Environmental Health service and other partners, during the prevention, investigation and management of cases and situations involving infectious diseases and environmental hazards. The Act provides an opportunity to develop planning processes, linking local departmental plans and ensuring that the objectives of the HPT match closely with the wider NHS and Council objectives. The Act also provides clarity of roles and responsibilities of NHS Boards and Local Authorities and provides extensive powers to protect public health. Broadly speaking, NHS Boards (HPTs) are responsible for people and Local Authorities (mainly Environmental Health) are responsible for premises and places. NHS Boards and Local Authorities have a duty to co-operate and to plan together to protect public health in their area².

The purposes of this plan are to:

- Provide an overview of health protection (infectious disease and environmental health) priorities, provision and preparedness for NHS Dumfries & Galloway and Dumfries & Galloway Council.
- Outline the joint arrangements which NHS Dumfries & Galloway and Dumfries & Galloway Council have in place for the protection of public health
- Improve the level of preparedness to respond effectively to a health protection incident and/or emergency
- Clarify the priorities for the period of the plan 2024-2026
- Identify the resources which are required to meet the plan
- Detail the liaison arrangements between NHS Dumfries & Galloway, Dumfries & Galloway Council and other agencies (e.g. Scottish Water (SW), Scottish Environment Protection Agency (SEPA) etc.)
- Develop learning across the agencies
- Provide a mechanism for reviewing and recording outcomes and achievements. This plan and its priorities will be included in the Health Protection annual report.

The plan will be formally updated every two years in accordance with the guidance.

Geographical extent of plan: This plan covers the NHS Dumfries & Galloway Health Board area, which is coterminous with Dumfries & Galloway Council's local authority area.

Statutory responsibility: NHS Dumfries & Galloway has the statutory responsibility to produce this plan in consultation with Dumfries & Galloway Council.

Period covered: 2 years (1 April 2024 – 31st March 2026)

2

<https://publichealthscotland.scot/publications/management-of-public-health-incidents-guidance-on-the-roles-and-responsibilities-of-nhs-led-incident-management-teams/management-of-public-health-incidents-guidance-on-the-roles-and-responsibilities-of-nhs-led-incident-management-teams/>

Authors: This plan has been written through a consultative process by a working group. The agency representatives at the steering group which developed the plan were:

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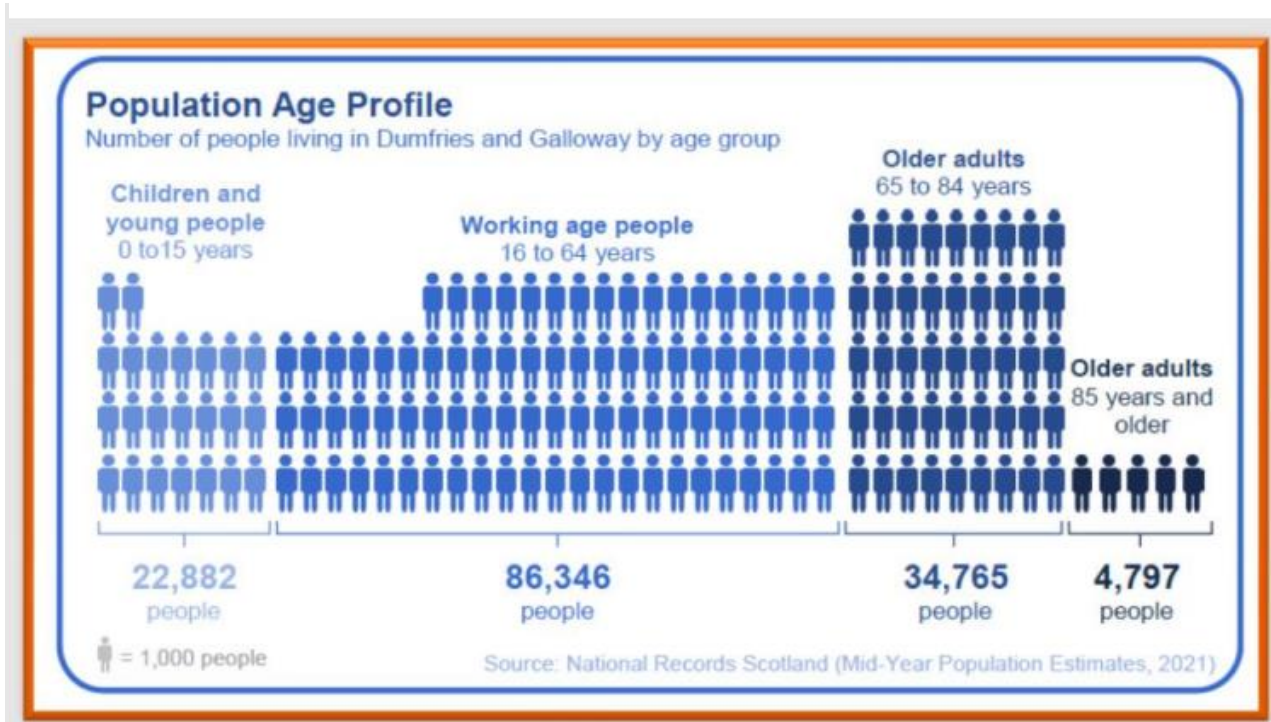
Governance arrangements: This plan has been considered by the NHS Dumfries and Galloway Public Health Committee and approved by the Board of NHS Dumfries & Galloway and Dumfries & Galloway Council. The next major review of this plan will be presented to Dumfries and Galloway Council for their agreement in draft form before being finalised by the Board of NHS Dumfries and Galloway. It is anticipated that this will be towards the end of 2025.

Status: This plan is a public document and can be accessed by the public on NHS Dumfries & Galloway and Dumfries & Galloway Council's websites. This plan covers the period April 2024 – March 2026 and will be formally reviewed every two years.

1. Overview of NHS Board and Local Authority Area

Dumfries and Galloway is home to nearly 150,000 people, however this is expected to reduce by 10,000 people in the next 20 years. People living in the area tend to be older, as we can see in Figure 1, with an average age of 49.6 years compared to Scotland's 42.0 years. Over a quarter of the population is aged 65 and over (27.7%, the second highest in all council areas in Scotland)³.

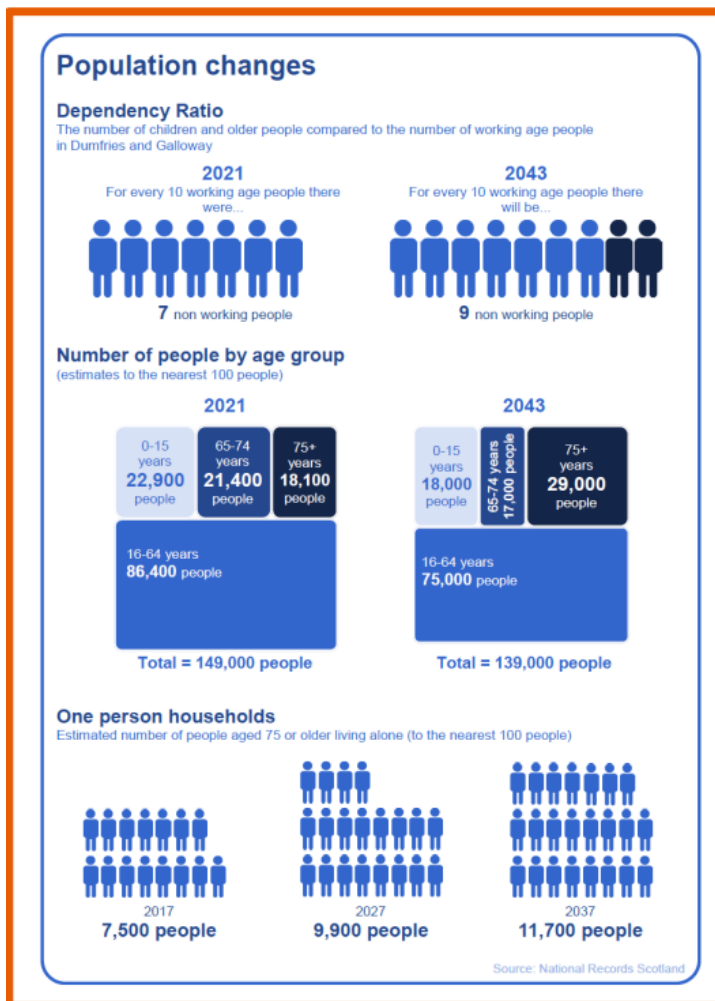
Figure 1: Population age profile in Dumfries & Galloway



The dependency ratio, which is the ratio of working to non-working people in the population (Figure 2), shows that currently, for every 10 working-age people, there are 7 children or older adults. By 2043, this is expected to change so that for every 10 working-age people, there will be 9 children or older adults. This means that there will be fewer working people to support the non-working population, which will have impacts on the local economy and health and social care services. The number of older people living alone is expected to go up from 7,500 in 2019 to almost 10,000 by 2029 and then to around 12,000 by 2037.

³ <https://www.scotlandscensus.gov.uk/2022-results/scotland-s-census-2022-rounded-population-estimates/#section5>

Figure 2: Forecasted changes in the dependency ratio in Dumfries & Galloway



The region contains the third largest area amongst all council areas in Scotland, spanning over 2,400 square miles of largely rural land⁴. Figure 3 below shows the region and the 12 ward areas. As such, it has one of the lowest population densities within mainland Scotland (22.7 per km as compared to 70.0 per km in the country as a whole)⁵. Issues which can be related to the rurality include reduced transport links, access to services and areas of deprivation. These can have a marked impact on the population and should be considered as part of this plan.

⁴ <https://statistics.gov.scot/resource?uri=http%3A%2F%2Fstatistics.gov.scot%2Fdata%2Fland-area-2011-data-zone-based>

⁵ <https://www.scotlandscensus.gov.uk/2022-results/scotland-s-census-2022-rounded-population-estimates/#section5>

Figure 3: Wards of Dumfries & Galloway⁶



2. Health Protection Risks and Challenges particular to Dumfries & Galloway

The geographical profile of the region presents several challenges to effective and timely management of a health protection incident. This poses a risk to the delivery of services and further emphasises the importance of local knowledge and effective working relationships to an incident response. The large geographical area means that travelling arrangements must be factored into the planning of a response to an incident. Many communities are rural and can be isolated. Staff from agencies may be required to travel to the site of a public health incident and this may require more than an hour of journey time, increased in cases of adverse weather conditions. The table below, Table 1 describes some of the challenges and risks that particularly impact Dumfries & Galloway.

⁶ Reproduced from Dumfries & Galloway Council Plan 2023 – 2028

Table 1: Health Protection challenges/risks particular to Dumfries & Galloway

Situation/ position	Risk/ challenges	Mitigation measures
Port Health - Domestic transport hub in the port at Cairnryan	Domestic transport hub carrying passengers, goods, food and animals.	Vermin control Food safety inspections of ferries
Host to HMP Dumfries	Prison population known to be at higher risk of blood borne viruses (BBV). As a closed setting there is also an increased risk of outbreaks of infectious disease.	Opt-out BBV screening is available at HMP Dumfries. The infectious disease team provide in-reach clinical care for anyone diagnosed with a BBV and prison health staff facilitate treatment administration and monitoring. Outbreaks of infectious disease in HMP are managed using a multidisciplinary team approach lead by HPT. Optimal preventative measures are always encouraged to prevent outbreaks. NHS D&G, 'Major Disturbance at Dumfries Prison Major Incident Plan', available and updated February 2024. Testing of plans relating to HMP are under discussion and are going to be included in a rolling programme of exercises.
Water supply issues, including high number of lead piping across the region and Private Water Supplies	Risk of contamination with infection and chemicals. Risk of private water supply issues in hot dry weather. Households may not have a supply of potable water. High number of lead pipes in water	Dumfries and Galloway Council's Governance and Assurance service plan makes a commitment to sample, and risk assess the region's private water supplies and includes a project on sustainability of supplies.

	supplies in the region.	
<p>Flood risk</p> <p>There are significant areas of coastline, lochs and reservoirs in Dumfries & Galloway which covers a large area. Dumfries & Galloway is largely rural with a large amount of woodland and agricultural land cover.</p>	<p>Currently it is estimated there are around 16,000 people and 10,000 homes and businesses at risk from flooding in D&G.</p> <p>This may increase to 20,000 people and 13,000 homes and businesses by the 2080s due to climate change. The expected annual cost of flooding is around £15 million.</p> <p>Note, however that flooding from wave overtopping is not fully represented in the assessment of flood risk and the impact of coastal flooding may be underestimated.</p> <p>Potentially vulnerable areas (PVAs) were designated in 2018 based on the potential current or future risk from all sources of flooding. This designation was informed by the national flood risk assessment (There are 22 potentially vulnerable areas (PVAs) in this Local Plan District.</p>	<p>Many organisations across Dumfries & Galloway, including the Council, the emergency services and SEPA provide an emergency response to flooding. Flood risk management plans 2021 (sepa.org.uk)</p> <p>Emergency plans are prepared and maintained under the Civil Contingencies Act 2004 by Category 1 and 2 Responders and are coordinated through regional and local resilience partnerships, often supported by voluntary organisations.</p> <p>These plans set out the steps to be taken to maximise safety and minimise impacts during flooding, ensuring the effective management of response to emergencies. Emergency plans may also be prepared by individuals, businesses, organisations or communities.</p> <p>The Dumfries and Galloway Local Resilience Partnership (LRP) have tried and tested generic planning and response arrangements and a number of local arrangements in place covering our highest risk PVAs.</p> <p>There are specific road closure plans for coast flooding impacting communities and road users on the A716 along West Luce bay.</p>
<p>Wildfire risk</p> <p>In Scotland 72% of</p>	<p>Potential for more frequent wildfires in the area</p>	<p>Dumfries and Galloway LRP maintains a “Wildfires – Multi Agency Incident Response Guide”</p>

<p>wildfires happen in March-April and 87% occur in shrub land /peat bogs.</p> <p>D&G covers 6,426 sq Km (8.2% of Scotland's land area with a population of approx. 149,000. About 29,200 people or 19.6% of the population live in remote rural locations. 1 in 5 households do not own a car and fibre-broadband and mobile-network coverage is one of the lowest in the UK.</p>	<ol style="list-style-type: none"> 1. Hot and dry weather significantly increases the prospect of wildfires. Such conditions are increasingly common. 2. Within D&G the variety of habitats (moorland woodland, forest, farmland, shrub and urban/rural interface) presents a broad range of wildfire risks (fuel types), including surface fire and forest fire. 3. The downwind airborne risk to public health, in terms of respiratory hazard, could be significant. 4. Lives of people living and working in rural communities and those visiting unfamiliar and/or remote areas could be at risk. Access to isolated inhabited properties and small remote communities could present a communication and evacuation challenges. Rural and remote communities can be hugely impacted by wildfire, which can cause significant environmental and economic damage. 5. Livestock, farmland, wildlife, protected woodland, sites of scientific interest and environmentally sensitive areas can all be devastated by wildfire. 6. Critical National Infrastructure, such as communications masts, wind farms, national grid, gas transmission, trunk roads and rail lines could all be temporarily affected or permanently damaged by wildfire. 	<p>For wildfire danger and wildfires Scottish Fire and Rescue Service (SFRS) are the lead organisation for public information as detailed in their Grass and Wildfire Communication Plan. and to further alert stakeholders.</p> <p>In the event of a significant incident, Dumfries and Galloway Council (DGC) may declare a Major Incident and activate the Major Emergency Scheme and operate the DG Virtual Operations Support Team (DGVOST) system to support SFRS public warning and informing and to activate the persons at risk distribution system (PARD) to identify particularly vulnerable persons and support "care for people" efforts.</p> <p>SFRS have primacy during the response to a wildfire. During a significant wildfire SFRS may activate an increased level of Command of the incident response from a remote SFRS location. Bronze Command will be local to the scene and determined by SFRS on-scene commanders.</p>
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Host to Chapelcross Power station	The Power Station is undergoing decommissioning; there remains a small risk of nuclear incident.	Onsite risk only, managed through Nuclear Restoration Services (previously known as Magnox Ltd)
Transportation of nuclear waste through the region	Radiation being transported through the region by various methods of transportation.	NHS D&G Hazardous material (HazMat)/ Chemical, Biological, Radiological and Nuclear (CBRN) Plan available and updated April 2023 Availability of radiation detecting monitoring kit, through monitors based at the Emergency Department at Dumfries & Galloway Royal Infirmary (DGRI) & Galloway Community Hospital (GCH).
Air quality issues	Increased risk of respiratory and cardiovascular disease	Air quality in Dumfries & Galloway is continually monitored by Environmental Health for NO ₂ and found to be within acceptable levels.. This will continue to be monitored. Farmers are encouraged to comply with the Code of Good Practice to prevent environmental pollution from agricultural activity and partnership working with SEPA will tackle problem areas.

3. Health protection: national and local priorities

a. National Priorities

The Scottish Government⁷ and COSLA agreed six Public Health priorities in June 2018. The priorities are shown in Table 2:

⁷ [Scotland's public health priorities - gov.scot \(www.gov.scot\)](http://www.gov.scot)

Table 2: Scotland’s Public Health Priorities

Priority 1	A Scotland where we live in vibrant, healthy and safe places and communities
Priority 2	A Scotland where we flourish in our early years
Priority 3	A Scotland where we have good mental wellbeing
Priority 4	A Scotland where we reduce the use of and harm from alcohol, tobacco and other drugs
Priority 5	A Scotland where we have a sustainable, inclusive economy with equality of outcomes for all
Priority 6	A Scotland where we eat well, have a healthy weight and are physically active

It is acknowledged that the public health priorities do not reflect all activities that contribute to the health of the Scottish population, however it is stated “our work to protect the health of the population from serious risks and infectious diseases through vaccination, infection control and incident response (health protection) will continue to be an essential public health function and must be maintained. We will not compromise our existing, high-quality protections and our ability to respond to emerging threats⁸”.

The Chief Medical Officer and Scottish Government have identified various national health protection priorities as detailed in Table 3 below.

Further work is required in the areas below in future years:

- Ensuring that the learning from the COVID-19 pandemic is captured in any ongoing future pandemic preparedness
- Continuing to support the transition to living with COVID-19 and contributing to Scotland’s COVID-19 inquiry as required
- Improving health in the early years especially through new and existing vaccination programmes
- Contributing to Scotland’s aim of eliminating hepatitis C as a public health concern by 2024
- Ensuring the effective implementation of current policy such as Scotland’s Tuberculosis framework and Scottish Government Sexual Health and Blood Borne Virus Action Plan (2023-2026)
- Further implementing a coherent, measurable strategy to reduce the risks to health from environmental risk factors such as air pollution, lead in water, contaminated land and radon
- Improving food, water and environmental safety

⁸ [Public Health Priorities for Scotland \(www.gov.scot\)](http://www.gov.scot)

- Protecting vulnerable groups, especially older people in health and social care, against exposure to hazards and their adverse effects
- Mitigating the impact of climate change
- Being prepared to respond to current and emerging diseases and potential health risks, including vaping
- Addressing place standard and resettlement challenges
- Mitigating the impact of the cost-of-living crisis on individuals, families and communities and the resultant public health issues

b. Local Priorities

Health Protection is a core part of the services delivered by NHS Dumfries & Galloway through the Public Health Department's HPT and Dumfries & Galloway Council through the protective services remits (environmental health, trading standards, licensing standards and animal health and welfare). This plan recognises that work is undertaken daily relating to the following areas of responsibility and service delivery:

- Protecting public health
- Preventing the spread of infectious diseases in the community
- Improving standards of food safety
- Ensuring safe and potable drinking water supplies
- Promoting a safe environment and protecting the public from environmental hazards
- Ensuring adequate plans are in place to respond to incidents and emergencies

Joint local priorities have been identified through joint meetings in conjunction with a review of national priorities. The local priorities are detailed in Table 3 below and will be incorporated into the operational service plans of Dumfries & Galloway Council or NHS Dumfries & Galloway and where they are common, delivered through effective working and partnership

Table 3: National and Local Priorities

	Source	Outcome	Work plan
1.	National priority	Reduce vaccine preventable diseases	<ul style="list-style-type: none"> • Immunisation is one of the most effective public health interventions for preventing illness and deaths from infectious diseases. • Vaccine uptake remains a key priority; however there are some challenges in this respect. These include the re-emergence of previously eliminated diseases such as measles, the emergence of new outbreaks of infectious disease and the increasing risks posed by the global anti-vaccination movement. • NHS Dumfries & Galloway will continue to deliver an effective immunisation programme which includes: <ul style="list-style-type: none"> ○ All childhood vaccines (including vaccines delivered in schools) ○ All adulthood vaccines (including seasonal flu and COVID-19 vaccines) ○ All selective immunisation programmes ○ Additional vaccines for individual with underlying medical conditions ○ All catch-up campaigns alongside the introduction of new vaccines ○ All vaccines considered appropriate for vaccine-preventable disease health protection response
2.	National priority	Reduce the incidence of tuberculosis (TB)	TB remains a leading cause of morbidity and mortality worldwide and disproportionately affects the most deprived and vulnerable members of society serving to

			<p>exacerbate existing health inequalities. The predominant challenge is that of latent tuberculosis infection (LTBI) as many of the active cases are the result of 'reactivation' of LTBI</p> <ul style="list-style-type: none"> • Implement the actions within the Scottish Tuberculosis (TB) Framework⁹ including that of the development of an overarching policy for the management of latent tuberculosis. • Due to the increases in local tuberculosis cases in Dumfries & Galloway, some gaps in TB services in Dumfries & Galloway have been identified, and potential options are under discussion.
3.	National priority	Progress action towards Hepatitis C (HCV) elimination	<p>The Scottish Government has set a goal to eliminate HCV infection and HCV related severe disease and death as a major public health concern by 2024. The area of sexual health and blood-borne viruses (SHBBV) was significantly impacted by the pandemic. An update to the SHBBV framework¹⁰ was published in recent months.</p> <ul style="list-style-type: none"> • Implement any actions and recommendations developed as part of national SHBBV policy. One specific area of work will be updating NHS Dumfries & Galloway's HCV Elimination Plan • Other National priority - Scotland's goal of eliminating new transmission of HIV by 2030 • Scottish Government post-covid plan "Reset and Rebuild - sexual health and blood borne virus services: recovery plan" and Injecting Equipment

⁹ [A TB Action Plan for Scotland - gov.scot \(www.gov.scot\)](http://www.gov.scot)

¹⁰ [Sexual health and blood borne virus action plan: 2023 to 2026 - gov.scot \(www.gov.scot\)](http://www.gov.scot)

			Provision (IEP) guidelines
4.	National priority	Addressing housing/ incivilities	<ul style="list-style-type: none"> • Utilise Private Landlord Registration scheme to assist with improving housing conditions in the private rented sector and reducing antisocial behaviour • Continue working on strategies to improve housing conditions including licensing of Houses of Multiple Occupancy (HMO) and residential mobile homes sites • Work with RSLs to protect tenants from dangerous dogs in shared spaces. • Review approaches to incivilities to identify good practice and specific projects to implement. Incivilities can include issues such as vandalism, graffiti, litter, dog-fouling and fly-tipping • Implement short-term let licensing regimes with the aim of securing safety within premises used for this purpose and safeguarding communities • Support the New Scots in the Resettlement Programmes (around 400 people) and asylum seekers in the dispersal programme to live in accommodation which is safe and has adequate facilities and services • Support vacant/ derelict and empty homes strategy aimed at encouraging improvements to properties in order to bring them back into housing use

5.	National priority	Minimise the risk to the public from Shiga toxin-producing <i>E.coli</i> (STEC) infection (previously called Verotoxin E.coli - VTEC)	<ul style="list-style-type: none"> • Implement any outstanding recommendations within the Verotoxin Escherichia Coli (VTEC) Action Plan for Scotland¹¹ • Promotion of safe practices and procedures where there is contact with livestock at animal parks and farms • Implement recommendations on the safe use of agricultural ground for recreational events • Improve the safety of private water supplies and ensure that public health interventions are taken for any failing drinking water supplies, whether public or private • Prevention of cross contamination in food handling premises • Promote good practice in food handling in domestic premises • Provide advice to raw cheese producers and dairy farmers • Investigate cases of STEC and implement appropriate control measures
6.	National priority	Food control	<ul style="list-style-type: none"> • Food control enforcement services as part of the statutory food authority role, provide a range of food interventions in respect of the national Food Safety Code of Practice¹² and deliver Council Food Safety Law Enforcement Work plan • Working with Food Standards Scotland (FSS), develop a new approach to food enforcement in Scotland (SAFER) whilst ensuring that food safety and public health is protected

¹¹ [VTEC/E. coli O157 Action Plan for Scotland, 2013-2017 - gov.scot \(www.gov.scot\)](http://www.gov.scot)

¹² [Food Law Code of Practice \(Scotland\) | Food Standards Scotland | Food Standards Scotland](#)

			<ul style="list-style-type: none"> • Continue an effective inspection programme based on a risk-based approach including adherence to inspection/ sampling/ audit programmes, provision of food hygiene and food safety training to business community. • Take a proactive and targeted approach to food safety in care settings and areas experiencing food poverty or inequality, • Collaborative working with NHS Dumfries & Galloway and Dumfries & Galloway Council to investigate and control food-borne infectious disease incidents and outbreaks. Council staff who are involved in investigating outbreaks and incidents are fully trained in infection control, risk assessment, hazard control and vectors of transmission, therefore risk of spread is low.
7.	National priority	Monitoring and improving drinking water quality	<ul style="list-style-type: none"> • Collaboration between Dumfries & Galloway Council and NHS Dumfries & Galloway in the monitoring and improvement of private water supplies • Collaboration between Dumfries & Galloway Council, NHS Dumfries & Galloway and Scottish Water in the monitoring and improvement of public water supplies • Work with Drinking Water Quality Regulator (DWQR) to deliver the requirements on Public and Private Water Supplies • Investigation of water related infections and contaminants of drinking water supply • Work with Dumfries & Galloway Council and

			<p>Scottish Water to ensure regular sampling and monitoring of supply and distribution system.</p> <ul style="list-style-type: none"> • Advise on risks to individuals and groups
8.	Local priority	Control Environmental exposures which have an adverse impact on health	<ul style="list-style-type: none"> • Continue to monitor air quality and work with SEPA to ensure farmers follow the Code of Good Practice for agricultural activities. • Review approaches to swimming pools and spas to ensure appropriate controls are in place regarding infection control • Blue-green algae (BGA) – promotion of safe usage of recreational waters where there is a risk of BGA, implementation of signage and responding to incidents that occur • Progress Contaminated Land strategies and ensure land is made suitable for use through development management • Monitoring of bathing water quality (designated beaches) and working with Scottish Environmental Protection Agency (SEPA) to ensure water quality • Management of gull colonies within urban areas to reduce faecal contamination and noise
9.	Local priority	Resilience to respond to incidents through effective multi-agency response	<ul style="list-style-type: none"> • Review business continuity plans and Pandemic plans • Ensure West of Scotland Resilience Partnership Scientific and Technical Advice Cell (STAC) plan is localised and exercised. • Ensure a robust programme is planned for exercising and testing emergency plans. • Health Protection are included in Strategic Advisory Group meetings to review a rolling

			programme of events in the region to ensure these are as safe as possible.
10.	Local priority	Enhance recovery planning for a major incident	<ul style="list-style-type: none"> • STAC training and plan • All category 1 and category 2 responders are required to co-operate via the local resilience partnership (LRP)
11.	Local priority	Effective and proportionate arrangements in place to protect public health	<ul style="list-style-type: none"> • Revise joint working procedures across both HPT and local authority. Joint working policy to be written. Health Protection and Environmental Health colleagues meet up on a quarterly basis • Review existing arrangements/ plans as a routine part of each incident that occurs • Undertake specific exercises for the purposes of training and evaluation of contingency plans i.e. pandemic plan and an exercise collaborating with HMP Dumfries • Consider key performance standards for the response, investigation and actions for public health incidents • Joint training in the management of outbreaks/ incidents and chairing these meetings, such as STAC • To investigate and take appropriate action in response to service requests that have the potential to impact adversely on the environment or to public health
12.	Local priority	Reducing the impact of tobacco, vaping, alcohol and other harmful substances on public health	<ul style="list-style-type: none"> • To regulate the supply of tobacco and vapes to young people • Continued regulation of the smoking ban in enclosed and public places including NHS premises

			<ul style="list-style-type: none"> • Continued work with licensing standards and the Licensing Boards in respect of age verification policy, responsible drinking and minimum pricing • Follow up of individual cases of infection connected with substance use • Assess alerts about contaminated alcohol and new drugs causing potential ill health – Rapid Action Drugs Alerts and Response (RADAR) • Process to be written around the health protection response in relation to an incident of mass casualties of high-potency drugs, this would be in collaboration with colleagues from Local resilience partnership and Alcohol and Drugs Partnership • Members of the Alcohol and Drugs Partnership have a role to play in delivering the ADP strategy, which includes licensing and protecting people from infectious disease risks associated with injecting drug use
13.	Local priority	Ensure we have strong and safe communities	<ul style="list-style-type: none"> • To investigate and implement effective controls to minimise the spread of suspected and confirmed cases of infectious and notifiable diseases in the community • Monitor and inspect services where there is an increased risk of BBV's, including skin piercing, tattooing, acupuncture and electrolysis • To investigate dog control complaints and issue dog control notices where public safety is at risk • To tackle dog fouling through enforcement and education. • Collaboration with colleagues to review the role that people can play in the prevention of infection

			<ul style="list-style-type: none"> • Collaborative working with Infection Prevention and Control, Occupational Health and other partners in order to protect the wellbeing of all staff and patients living and working in Dumfries & Galloway.
14.	Local priority	Education and advice programme	<ul style="list-style-type: none"> • Raising awareness of the Outdoor Code and infectious disease and controls through improved public information • Consider and coordinate seasonal promotions and awareness raising campaigns, e.g. a summer campaign highlighting the risk of ticks, barbecues and general gastrointestinal illness and a winter preparedness campaign highlighting coughs and sneezes etiquette • Raising awareness of the impact that littering has on the gull population and to deter people from feeding them
15.	Local priority	Preventing and minimising the spread of infection	<ul style="list-style-type: none"> • Investigation of suspected and confirmed cases of infectious disease and implementation of appropriate controls to prevent further spread • Monitoring trends in infectious disease by enhanced surveillance and reporting • Ensure all asylum seekers in contingency accommodation receive early Health Assessment and along with other New Scots are supported to access appropriate health services, immunisations and screenings • Ensure public health actions are taken to minimise risks from zoonotic infections reported by Animal and Plant Health Agency • To consider risks from imported dogs to the public

			<ul style="list-style-type: none"> • Pest control and advice on potential risk to humans from pests
16.	Local priority	Horizon Scanning and Emerging infections	<ul style="list-style-type: none"> • Be aware of new and emerging infections and plan with partners how to minimise their impact locally
17.	Local priority	Minimise the adverse impact of climate change	<ul style="list-style-type: none"> • Work together to mitigate the effects of climate change
18.	Local priority	Animal health and zoonoses	<ul style="list-style-type: none"> • To respond to complaints about farm animal welfare, prioritising cases where animals have died • To support the Animal and Plant Health Agency during outbreaks of notifiable diseases • To monitor and regulate animal transport activities, focussing on traceability and bio-security where large numbers of animals gather.
19.	Local priority	Workforce planning and resilience	<ul style="list-style-type: none"> • Training and support in incident management and response including STAC training • In collaboration with the Care Home Tactical Team and Infection Control Team, participate in workforce development and support for health and social care staff, which could include care home, 'care at home' or those on the BBV patient pathway • Consider bespoke learning in the event of an emerging threat if required
20.	National	Coordinated approach to public health	<ul style="list-style-type: none"> • Actively participate in the national Scottish Health Protection Network and associated governance groups to promote a coordinated approach to protecting the public health and developing new guidance and systems • Maximise the opportunity of the Public Health

			Scotland 'Test of Change' with the Community Planning Partnership to tackle health inequalities in our region
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4. Resources and Operational Arrangements

a. Resources available

Staffing information, including a note of designated Competent Persons, can be found at Appendix 2

The availability of adequate information and communications technology is essential for the day-to-day work of health protection and is detailed in Appendix 2.

During a larger incident or outbreak and as part of emergency planning procedures, the local resilience partnership may be called upon for assistance and facilities within Council buildings may be used as a 'control centre'. NHS Health Protection Team members who work with NHS have access to laptops and systems that allow them to work from home.

b. Collaborative arrangements

Organisational arrangements for collaborative working are in place between NHS Dumfries & Galloway, Dumfries & Galloway Council and other national agencies that contribute to broader health protection work.

These are:

- The Joint Health Protection Planning Group (JHPPG) - this group provides strategic oversight and is responsible for agreeing, documenting and delivering joint priorities for health protection activity in Dumfries & Galloway.
- Health Protection, Environmental Health and other NHS stakeholders (e.g. Infection Control) meet quarterly to feedback any ongoing issues or learning.
- The Local Resilience Partnership (LRP) is a high-level group consisting of Local Authorities, the NHS, Police Scotland, Scottish Fire and Rescue and the Scottish Ambulance Service.
- Weekly meetings are carried out with resilience partners and any concerns around health protection are raised at these meetings, partner agencies also feedback any concerns that they have in relation to public health and safety due to upcoming events, changes in legislation, planning activities, etc.
- The Resettlement Programme Board and the Health and Social Care Work stream in particular plans and oversees, on an interagency basis, appropriate access to services and other issues related to

health for New Scots in the Resettlement Schemes; and asylum seeker dispersal and those in contingency accommodation.

Other formal and informal arrangements are in place to facilitate good collaborative working including ad hoc meetings, phone calls, emails and shared learning sessions.

c. Out of hours response

In NHS Dumfries & Galloway, a senior member of the Health Protection team (Competent Person) is always available out-of-hours through DGRI switchboard 01387 246246. There is currently a one in five competent person-led rota for health protection. The NHS also operates a Director on-call directors' rota to support both the General Managers and health protection rota.

NHS Dumfries & Galloway Health Protection Team can be contacted by phoning 01387 272724, selecting option 6, during office hours.

There is no formal out-of-hours service for the Council's Environmental Health service, however the Council's call centre provides an out-of-hours service and has emergency contact details for the manager and principal officers at this time.

Contact during office hours is: 030 33 33 3000
Out of hours: 030 33 33 3000

d. Reviewing Health Protection Standard Operating Procedures (SOP) or guidance

NHS guidance and Standard Operating Procedures (SOPs) or action cards have been developed locally and are subject to regular review. These documents are stored securely locally and are accessible in and out-of-hours.

Other guidance and information documents can be accessed through the Scottish Health Protection Information Resource (SHPIR) website provided by Public Health Scotland (PHS). SHPIR is an on-line resource which provides NHS Board HPTs with access to the most up-to-date and relevant guidance which can be used in an outbreak or incident situation.

HPZone Scotland is a health protection information and case management information technology (IT) system, and is used for the management of health protection cases, situations and outbreaks by all HPTs across Scotland. Public Health Scotland also monitors HPZone across all Health Board HPTs to provide national oversight of relevant incidents.

The Council have SOPs and guidance covering food, occupational health and safety, animal health and public health enforcement activities. These have been developed based on national frameworks and adapted for local circumstances. These are subject to review and audit.

e. Staff Knowledge, Skills and Training

Within NHS Dumfries & Galloway there is an annual cycle of personal development planning (PDP), and review and performance appraisal for all staff. In addition to annual performance appraisal, nursing staff are required to undertake clinical supervision and consultants are required to undertake annual consultant appraisal.

All staff are required to demonstrate their maintenance of Continuing Professional Development (CPD records). Ongoing situations and cases are reviewed by the HPT and Competent Persons on a daily basis to ensure shared learning and adherence to national guidance. There is a monthly CPD session hosted by the HPT that all relevant partners are welcome to attend.

Staff have been trained and are supported to improve their skills and experience in relation to trauma-informed practice and use of new translation and interpretation approaches.

Under the Public Health etc (Scotland) Act 2008, NHS Dumfries & Galloway must designate sufficient numbers of Competent Persons for the purposes of carrying out the functions of the Act (see Appendix 2). A formal process to do this is in place, culminating with Board Management Team approval.

Dumfries and Galloway Council staff undertake performance and development reviews annually, with reference to the council's core competencies. Environmental Health staff are required to maintain minimum competency levels, recognised by the Royal Environmental Health Institute of Scotland. In addition, there is a mandatory competency framework for food law enforcement produced by Food Standards Scotland.

Continuous professional development is achieved through attendance at available training courses, in-house learning and during team meetings (weekly and monthly).

5. Health Protection Services: Capacity and Resilience

a. Assessment

There are no nationally set levels of staffing for Health Protection services in either the NHS or Local Authority. Within NHS Dumfries & Galloway, the capacity of the HPT to deal with service requirements is subject to ongoing assessment, while also following the principles outlined in the NHS Scotland Safer Staffing Act and has escalation processes in place.

All Consultants in Public Health participate in health protection activities and this provides resilience for the service. There is also a public health vaccination team, which also provides some flexibility with regards to staffing if the incident was in response to a vaccine-preventable disease.

b. Mutual aid arrangements

As part of the West of Scotland Regional Resilience Partnership (WoS RRP) health protection colleagues in NHS Ayrshire & Arran, NHS Dumfries & Galloway, Greater Glasgow and Clyde and NHS Lanarkshire have an agreement to support each other if a Scientific and Technical Advice Cell (STAC) is required due to seriousness of incident.

A similar Memorandum of Understanding exists between the thirteen Local Authorities of the West of Scotland Regional Resilience Partnership. This enables councils to support each other during emergencies if required.

There is also support from national and regional centres in relation to specialist advice and activities, such as testing in national reference laboratories. There was increased collaboration between NHS Boards, Health and Social Care Partnerships (HSPCs), Local Authorities, Public Health Scotland (PHS) and the Scottish Government during the pandemic, which has been retained and has resulted in new ways of working together.

6. Public Involvement and Feedback

The day-to-day work of the HPT involves contact with the public. The HPT are also involved with the acute hospital Infection Prevention and Control Team's public involvement group where they provide updates.

The Local Authority engages with its stakeholders (citizens, customers, staff, Elected Members and partners, including Community Councils and businesses) in line with its Community Participation and Engagement Strategy and Framework and Customer Services Strategy; and uses a range of methodologies including surveys, Community Conversations and Ward Events.

There is also a comprehensive programme of communications channels, in line with the Communication Strategy, including the Community Bulletin, Newsletters, direct mail, social media and press releases.

7. Monitoring and Review

The steering group comprising NHS Dumfries & Galloway and Dumfries & Galloway Council will keep the health protection priorities under review to ensure that they are implemented.

Appendix 1: Key Health Protection Plans for Dumfries & Galloway

NHS Dumfries & Galloway Plans	Last Review Date	Next Review Date
NHS Dumfries & Galloway Major Incident Plan	Dec 2023	Dec 2025
NHS Dumfries & Galloway Hazmat/ Chemical, Biological, Radiation and Nuclear (CBRN) plan	Dec 2023	Dec 2025
Major disturbance at Dumfries Prison Major Incident Plan	Jan 2024	Jan 2026
NHS Dumfries & Galloway Operational Pandemic Plan V16.5	Nov 2023	Nov 2024
National Plan - The Sexual health and Blood Borne Virus Framework	Nov 2023	Nov 2026
NHS Dumfries & Galloway Standard Operating Procedures and Action Cards for specific diseases, including meningitis and E.coli O157	ongoing	
WDG00 05 SA Flooding Arrangements	Resilience direct	
WDG00 09 SA Transport of Defence Nuclear Materials	Resilience Direct	

Appendix 2: Staffing levels (as of 3rd April 2024)

NHS Dumfries & Galloway Health Protection Team

Job title	Role and responsibility	WTE
Director of Public Health	Strategic and Operational Lead for Public Health activities in NHS Dumfries & Galloway	1
Nurse Consultant in Health Protection	Provide leadership and strategic oversight for health protection development and implementation in NHS Dumfries & Galloway. To co-ordinate the provision of an effective service for the control of infectious diseases and environmental health hazards on a 24/7 basis	1
Consultants in Public Health: distributed working involving 3 CPH	Provide leadership and strategic oversight for areas of the health protection work-plan. To participate in the provision of an effective service for the control of infectious diseases and environmental health hazards on a 24/7 basis	1
Health Protection Nurse Specialist	Coordinate, lead and deliver activities surrounding the prevention, investigation and control of infectious disease and environmental hazards on a 24/7 basis	1
Health Protection Nurses	Deliver activities surrounding the prevention, investigation and control of infectious disease and environmental hazards	2
Business Support	Provision of administrative and secretarial support	1

In addition, at times of high demand, support from other staff in the Public Health Department can be obtained by releasing them temporarily from non-essential duties. During significant public health incidents, staff from the wider NHS can also provide support if required.

Dumfries & Galloway Designated Competent Persons at April 2024

<i>Designated competent persons</i>	NHS	D&G Council
Consultant in Public Health	3 (+1 recent recruitment)	
Nurse Consultant in Public Health	1	
Health Protection Nurse Specialist	1	
Environmental Health Officers		6 (+1 vacancy)
Principal Environmental Health Officers		2

Other NHS Dumfries & Galloway staff involved in wider Health Protection work

Job title	Role and Responsibility	WTE
Service Manager Public Health		1
Lead Charge Nurse Immunisations		1
Major Incident Officer – NHS D&G - Acute	<p>Accountable for maintaining up-to-date Major Incident plans and exercising these within organisation.</p> <p>Develop and maintain statutory emergency planning, policies and procedures for NHS D&G</p> <p>Providing education and staff awareness around NHS resilience & preparedness.</p> <p>CBRN / HazMat Lead for Health Board</p> <p>Maintains LRP's Generic Arrangements, representing NHS D&G.</p> <p>Working closely with multiagency partners to provide a regional response to incident management.</p>	1

Local Authority staffing

Job title	Role and Responsibility	WTE
Community Protection Manager	Leadership and strategic oversight of the Environmental Health and Trading Standards services. To ensure the services are adequately resourced, delivered within budget and to report on performance against service and other plans.	1
Principal Environmental Health Officer	Management and delivery of the environmental health service within Dumfries & Galloway region. Provide specialist advice and expertise around environmental health issues.	2
Environmental Health Officer	Full range of environmental health duties including public health, food safety, environmental protection and health and safety	5

Community Health and Social Care staffing

Job title	Role and Responsibility	WTE
Business & Quality Manager – Community Health & Social Care	<ul style="list-style-type: none"> • Vice Chair of Local Resilience Partnership • Accountable for maintaining up to date Business Continuity Plans including capacity support plans for CHSC • Represents CHSC and, if required, other Directorates during situational awareness and live incidents • Supports / covers Resilience Advisor (Organisational) and Major Incident Officer (Acute) if unavailable • Provides resilience related advice to CHSC and to other areas if required • Contributes to organisations Major Incident Plans • Provides education and staff awareness for NHS & CHSC staff resilience & preparedness. • CBRN / HazMat knowledge • Maintains LRP's Generic Arrangements, representing NHS D&G / CHSC. • Working closely with multiagency partners to provide a regional response to incident management. • Key role in Adverse Event Management at response at CHSC and organisational level 	1

Local Resilience Partnership staffing

Job title	Role and Responsibility	WTE
Resilience and Community Safety Manager	Chairs Local Resilience Partnership Co-chairs D&G Water Safety Forum Chairs D&G Safety Advisory Group (for major festivals and event) Chairs D&G Serious Organised Crime and Counter terrorism Group Manages Shared Health Resilience Service Attends Scottish Wildfire Forum Represents resilience practitioners on the National Centre for Resilience Steering Group	1
Principal Resilience Advisor	Maintains LRP's Generic Arrangements Maintains the Corporate Resilience Work Plan Maintains the LRP's Severe Weather arrangements Maintains 5 x Major Accident Hazard Pipeline Plans	1

Senior Resilience Advisor	Develop, maintain and implement the Council's Resilience Policies. Represent the Council within external Multi-Agency Resilience structures. Support and advise the Council Officers in discharging their roles in an emergency. Support the co-ordination and delivery of the LRP Work Schedule and contribute to the LRPs contribution to the WoS RRP work plan is fulfilled.	1
Senior Organisational Resilience Advisor	Contributes to the Council's preparation, response and recovery to any emergency. Implements programmes that will enhance community and organisational resilience in order to mitigate the impact of widespread community risks. Support and advise Council Services in order to develop, maintain and implement the Council's Business Continuity Policies.	1
Programme Co-ordinator Shared Health Resilience Service	Plan and deliver the delivery, development and improvement of a range of statutory and non-statutory emergency planning including NHS Resilience Co-ordination to ensure that NHS Dumfries and Galloway is prepared for effective response to disruptive challenges	1

The Local Resilience Partnership maintains their Generic Planning and Response Arrangements which sets out an all-hazards management framework for co-ordinating the response to a major incident or civil emergency impacting D&G.

Appendix 3: Significant Public Health incidents or outbreaks 2020-2023

Although there were a total of 516 recorded situations on the Health Protection electronic system, most would be considered as routine type outbreaks or incidents that are managed by Health Protection. Table 4 below highlights some of the more significant incidents or outbreaks and a summary of what went well or learning identified.

Table 4: Significant Public health Incidents or outbreaks 2020-2023

Incident summary	Summary of what went well
Asylum seekers in contingency accommodation - health screening Assessments and follow up	There have been around 117 new entrants to Dumfries & Galloway from various countries, with a maximum of 75 staying here at any one time, since August 2023. This has generated a large amount of work, often at short notice, ensuring that new entrants are screened for BBV and TB, have access to a GP practice and any referrals are made. There has been a particularly high demand for mental health care which is expected to continue to August 2024.
Cluster of cryptosporidium linked with a farm park	Good signage and hand washing opportunities. Advice shared with group bookings
Cluster of Salmonella linked by whole genome sequencing (WGS)	None – linked to national incident
COVID-19 outbreaks and incidents	COVID continues to be the cause of outbreaks. The Health Protection Team manages outbreaks as per national guidance. The public inquiry requires some information from Health Protection and this work is ongoing.
National look-back programme affecting blood donor recipients	Local multidisciplinary team managed situation and offered a bespoke service as numbers affected were very low
Possible exposure to Carbon monoxide in a venue (with a large number of people affected)	Good multidisciplinary team working particularly in investigation stage when multiple people exposed.
Multiple lead exceedance in water events	Multidisciplinary team working. Processes written and advice

	<p>provided to residents.</p> <p>Close working relationships with Environmental Health colleagues</p>
FSS/ARHAI alert re contaminated baby milk product	Prompt problem assessment group (PAG) meeting ensured prompt resolution and awareness raising
Small increase in local HIV infection	A small number of new cases of HIV infection were identified, which represented a notable increase in Dumfries & Galloway. Collaborative working with local council, 3 rd sector and other healthcare colleagues worked very well.
Increase in local TB cases	There has been an increase in the number of active tuberculosis cases in Dumfries & Galloway, although this increase is 200%, the numbers are very small. This increase has identified some gaps in TB services in Dumfries & Galloway, and recommendations are being discussed.
Bovine TB	Bovine TB requires contact with affected farmers to risk-assess each situation, with the potential that some people associated with the farm may require screening. Action card and letter templates to be prepared.
Scabies outbreak in a community setting	There was a scabies outbreak that affected a specific setting within the community. There was a lot of very useful learning around ensuring that the type and layout of the setting was understood. A site visit was arranged with Environmental Health and Health Protection and this was very welcomed by the setting and was very useful for the teams. Communication was identified as very good.

Appendix 4: Acronyms used

JHPP	Joint Health Protection Plan
JHPPG	Joint Health Protection Plan Group
HPT	Health Protection Team
DGC	Dumfries & Galloway Council
PHS	Public Health Scotland
SEPA	Scottish Environmental Protection Agency
BBV	Blood Borne Virus
MCN	Managed Clinical Network
HMP	His Majesty's Prison
PVA	Potentially Vulnerable Area
LRP	Local Resilience Partnership
SFRS	Scottish Fire and Rescue Service
PARD	Person at Risk System
ISR	Incident Support Room
CBRN	Chemical Biological Radiological and Nuclear Awareness
COSLA	Convention of Scottish Local Authorities
LTBI	Latent Tuberculosis Infection
SHBBV	Sexual Health Blood Borne Virus
HCV	Hepatitis C Virus
HMO	House of Multiple Occupancy
VTEC	Verotoxin E. coli
STEC	Shiga toxin-producing E.coli
FSS	Food Standards Scotland
SAFER	Scottish Authority Food Enforcement Re-Build
DWQR	Drinking Water Quality Regulator
BGA	Blue Green Algae
STAC	Scientific and Technical Advice Cell
ADP	Alcohol and Drug Partnership
WGS	Whole Genome Sequencing
DGRI	Dumfries and Galloway Royal Infirmary
SOP	Standard Operating Procedure
SHPIR	Scottish Health Protection Information Resource
PDP	Personal Development Plan
CPD	Continuing Professional Development
EHO	Environmental Health Officer
PAG	Problem Assessment Group
ARHAI	Antimicrobial Resistance and Healthcare Associated Infection
DGVOST	Dumfries & Galloway Virtual Operations Support Team
HSPCs	Health and Social Care Partnerships
RADAR	Rapid Action Drugs Alerts and Response