

Meeting of:	<b>Shared Regulatory Services Joint Committee</b>
Date of Meeting:	<b>Tuesday, 27 September 2022</b>
Relevant Scrutiny Committee:	All Scrutiny Committees
Report Title:	Overview and Update on Shared Regulatory Services
Purpose of Report:	This report provides an update on the work undertaken by the Shared Regulatory Service (SRS)
Report Owner:	Director of Environment and Housing Services
Responsible Officer:	Head of Shared Regulatory Services
Elected Member and Officer Consultation:	No Elected Members have been consulted. The following officers have been consulted; Assistant Director, Cardiff Council, Chief Officer Legal, Regulatory and Human Resources, Bridgend County Borough Council
Policy Framework:	This is a matter delegated to the Joint Committee
Executive Summary:	<ul style="list-style-type: none"> <li>The report appraises the Committee of the work of the service and progress toward completing the actions contained in the SRS Business Plans.</li> </ul>

## Recommendation

The Committee is asked to:

1. Consider, note, and agree the contents of this report

## Reason for Recommendation

1. The report appraises the Committee of the work of the service and the progress toward completing the actions contained in the SRS Business Plans.

## 1. Background

- 1.1 SRS Business Plans are developed in consultation with stakeholders; they inform and direct the work of the service and contribute toward the corporate priorities of each partner Council. The service has five key aims, namely:

- Improving Health and Wellbeing
- Safeguarding the Vulnerable
- Protecting the Local Environment
- Supporting the Local Economy
- Maximising the Use of Resources

This report contains information outlining how the service is working to achieve better outcomes for residents and businesses within the region through a series of different actions and work programmes. The report provides an overview of activities undertaken in the period April to June 2022.

## 2. Key Issues for Consideration

### Human Resources

- 2.1 The sickness absence level at the end of Quarter 1 2022-23 was 3.38 days per FTE person overall.

	Short Term Days Lost per FTE	Long Term Days Lost per FTE	Total Days lost Per FTE
<b>Q1 2022-23</b>	<b>0.52</b>	<b>2.86</b>	<b>3.38</b>
Q1 2021-22	0.32	0.44	0.76
Q1 2020-21	0.37	1.34	1.71

When compared with the same time frame in 2021/22, Q1 saw an increase in the FTE absence figure for SRS. A significant element of the overall figure of 3.38 days lost per full time equivalent member of staff is the number of days lost through long term sickness. There are no immediate discernible trends in the short-term absence figures other than of course the ongoing impact of COVID 19 infections.

- 2.2** During Quarter 1, the service suffered the devastating loss of two members of staff, both highly regarded Environmental Health professionals, who died in-service after periods of illness. Needless to say, the impact on colleagues across the Service has been profound, on both a personal and a professional level.
- 2.3** Recruitment and retention continue to prove challenging, and in line with other regulatory services across Wales, SRS has experienced significant difficulty in recruiting into a range of key posts across the Environmental Health and Trading Standards functions. The problem has been exacerbated nationally by the limited pool of suitably qualified staff and an already ageing workforce. SRS continues to take the lead on development of the much needed, Regulatory Apprenticeship for Wales, and in another development, discussions are ongoing with a local academic institution with a view to their offering faster track qualification options.
- 2.4** A service-specific staff survey ran for the three weeks to the end of August and had as its focus two main themes. This was the first SRS staff survey since the early part of 2020, and thus the first post-COVID. As a result, one of the purposes of the survey was to carry out a well-being ‘temperature check’ on staff as they adjust to a hybrid model of working and a return to a more ‘normal’ way of life. Given the concerns highlighted above around recruitment and retention, it will come as no surprise that the survey’s other main area of interest sought views on what would make SRS as welcoming and as attractive a Service as possible. Early indications suggest that around two thirds of staff participated in the survey, and the detail of the responses will be scrutinised in the coming weeks.
- 2.5** Members will be aware that since the start of the COVID 19 pandemic, SRS recruited over 20 Environmental Health students to assist with the additional work demands that presented, notably around support for Test, Trace and Protect and for high-risk settings, and also in the enforcement of COVID restrictions on businesses. It has been pleasing so see that further students from this group have recently joined the permanent SRS establishment in the areas of Food, Housing and Licensing enforcement.
- 2.6** The Service continues to encourage SRS officers to engage in further study leading to recognised, higher level qualifications. For the last few years, support has been offered to a small number of staff who have successfully demonstrated the benefits their desired qualification would bring to the Service as well as to them individually. As a result of the match-funding provided, officers have studied for qualifications such as the MSc in Environmental Health and the MSc in Health and Safety and a number have now graduated. The Service has recently committed to further match funding for study at Master’s level, ahead of the new academic year.

## Financial Position Quarter 1

2.7 The financial monitoring report for the period 1st April to 30<sup>th</sup> June 2022 is attached at **Appendix 1**. It has been prepared from the consolidated figures gathered from each Authority for this period. The Service is forecasting an outturn position of a £211k overspend against the 2022/23 gross revenue budget. This is largely as a result of the proposed pay award currently under consideration which exceeds quite significantly the 2% that had been assumed as part of the budget setting process. The other main component of the anticipated overspend is the likely operational costs of a seizure of horses in Q2 (July).

## Performance Monitoring

2.8 Joint Committee members are provided with data on activity levels to help reassure local members at each council that SRS activity continues to tackle issues across the region. Performance data for Quarter 1 of 2022-23 is set out at **Appendix 2** and is reported to each Council in line with the legacy performance management regimes and existing service plans.

2.9 As outlined in the 2021-22 Annual Report, regulatory services in the four nations are currently following the Food Standards Agency COVID-19 Local Authority Recovery Plan shown in **Figure 1** below; and it is in this context that the Q1 food safety performance is presented. The current focus of the Recovery Plan is on the less than broadly compliant 'C' rated premises, and officers are finding significant problems during visits to these premises, the majority of which haven't been inspected since before the pandemic. Among the areas of non-compliance being found are poor hygiene practices, inappropriate storage, and pest infestations. As each such finding requires investigation and consideration of formal action, this is resulting in officers having to deal with these cases at the expense of further progress against the inspection programme.

**Figure 1: FSA COVID-19 Local Authority Recovery Plan**



**2.10** The Service updates below provide more detail and context for the Joint Committee on some of the key areas of work during the quarter.

### *Supporting Public Health*

**2.11** With the relaxation of the remaining COVID-19 restrictions and testing regimes for the general public, SRS **COVID-related work** was further stepped back at the end of Q1. From 30th June 2022, self-isolation payments and routine contact tracing ceased, meaning that the emphasis in Wales is now on the provision of testing and associated contact tracing for care home residents, hospital patients and symptomatic health and social care staff. In supporting this still crucial area of work, SRS continues to play a key role in safeguarding the wellbeing of the most vulnerable in our communities.

**2.12** At the same time, SRS along with its wider public health partners, is mindful of the possibility of a resurgence of the coronavirus in the coming autumn and winter, with the potential for new variants of concern that are more virulent, or infectious than those seen to date. Should this happen then the Service will ensure staff with the necessary skill sets are mobilised as quickly as possible to deal with the problem.

**2.13** The UK is currently facing the challenges of dealing with the **Monkeypox** outbreak. This is a communicable disease, requiring the implementation of the Wales Outbreak Plan in order to eradicate or control its spread. Monkeypox is a rare illness often associated with travel to Central and Western Africa. It is usually a mild illness that does not spread easily between people and usually gets better by itself, with most people recovering within a few weeks.

**2.14** While the risk to the general population is believed to be low, given that there are a number of UK cases not associated with foreign travel, health authorities, including Public Health Wales (PHW) continue to monitor and investigate the situation. At the time of writing, the most recent figures from PHW show there are 20 confirmed cases in Wales, and in excess of 113 contacts. They are spread across 5 Local Health Board areas across the country including Cardiff and Vale and Cwm Taff Morgannwg Health Boards.

**2.15** The SRS Communicable Disease team plays a vital role in assisting and investigating the outbreak of communicable diseases, and officers work according to an agreed National Outbreak Control Plan. Responsibility for managing outbreaks is shared by all the organisations who are members of the Outbreak Control Team (OCT). As we have recently experienced throughout the Covid 19 pandemic, isolation of individuals is a fundamental control method, employed historically in disease prevention work, to try to prevent further spread from infected or suspected infected persons.

- 2.16** Where it is deemed necessary for the protection of public health for a person to be requested to isolate, local authorities have an enforcement responsibility of serving Regulation 8 Requests for co-operation for health protection purposes and in more serious cases obtaining a Part 2A Order from the courts under The Health Protection (Part 2A Orders) (Wales) Regulations 2010. The service also has a discretionary power to compensate individuals for that period of isolation.

#### *Communicable Disease Plan 2022-23*

- 2.17** SRS publishes several operational plans to advise stakeholders of the work to be carried out in certain environments. The document attached at **Appendix 3** is the Communicable Disease Plan 2022-23, which sets out how the SRS will fulfil its role of protecting public health through the investigation of cases and outbreaks of communicable disease and the applications of control, preventative and enforcement measures.
- 2.18** It is important to note that the SRS commitments highlighted in 2.11 above in relation to COVID 19 do not form any significant part of the Communicable Disease Plan. Traditionally local authorities have not had a defined role in dealing with respiratory illness. The Communicable Disease Plan does however detail the challenges faced by the Service in dealing with legionella, listeria and campylobacter in the previous 12 months.

#### *Port Health Plan 2022-23*

- 2.19** The document attached at **Appendix 4** is the Port Health Plan, another of the SRS operational plans for the year. It sets out how the Shared Service will fulfil its role of protecting public health by carrying out a range of health controls.
- 2.20** The plan explains how the Port Health Team will fulfill its purpose of preventing and controlling infectious disease coming into Cardiff, Barry and the surrounding areas via the ports and airport to protect the health of the public. The Plan also details the delivery mechanisms for the statutory obligations in relation to food safety, imported food control, ship sanitation, disinsection, waste control and animal health.

#### *Homes for Ukraine*

- 2.21** As part of the response to the humanitarian crisis caused by the war in Ukraine, the UK and Welsh Governments developed a number of different schemes to assist refugees displaced by the conflict.
- 2.22** The primary scheme, 'Homes for Ukraine', relies on individuals in the UK, with at least six months leave to remain, acting as a sponsor and matching with Ukrainian individuals and groups. Local authorities have played a critical role in the support for people from Ukraine arriving in Wales. They are seen as best placed to provide

a 'wrap around service' to ensure refugees are provided with access to the full range of public services.

- 2.23** The SRS has played a critical role in assisting the three partner Councils to discharge their responsibilities by working with the teams set up to manage the crisis across Bridgend, Cardiff and the Vale. This has predominantly been through carrying out property checks to ensure that the accommodation that has been offered meets basic standards of safety and suitability. This work has been carried out by a team of SRS officers with expertise in Housing enforcement, as well as by utilising recent Environmental Health graduates whose previous roles were related to the pandemic. To date **over 450** such property checks have been carried out by SRS across the three Council areas.
- 2.24** Where required by the partner Council, Officers have also assisted with the required DBS checks on sponsors to ensure that anyone volunteering is of good character. The terms of the scheme mean that sponsors originally signed up for six months to provide accommodation. As refugees move on to more permanent accommodation this is inevitably placing increasing demand on our Housing Options teams and the private rented sector. SRS Housing teams are being called upon to review suitability of long term lets and we will continue to assist as the situation evolves.

#### *Animal Health and Welfare*

- 2.25** It was wonderful to see the hard work of the SRS Animal Health and Welfare team recognised in the recently announced South Wales Police Awards. The team was applauded for its seizure, in very challenging conditions, of 240 horses that were being kept in appalling conditions. The subsequent investigation led to the successful prosecution of the keepers under the Animal Welfare Act and their disqualification from keeping animals in the future. The Police and Crime Commissioner's Partnership Award acknowledged the collaborative working with South Wales Police, the RSPCA, equine charities and South Wales Fire and Rescue Service, that made the seizure possible.
- 2.26** The spring and summer have been extremely busy for the team, across a range of different issues. Unfortunately, there appears to have been a resurgence in horse straying and horse welfare problems, and a number of recent seizures have been necessary.
- 2.27** Following the unprecedented number of wild birds being lost to avian influenza last season, Welsh Government and the Department for Environment, Food and Rural Affairs (DEFRA) has recently published a Mitigation Strategy for Avian Flu in the Wild Birds in England and Wales - [Mitigation Strategy for Avian Influenza in Wild Birds in England and Wales \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/942227/Mitigation_Strategy_for_Avian_Flu_in_the_Wild_Birds_in_England_and_Wales.pdf). The strategy sets out the role of local authorities and partner agencies when avian influenza is diagnosed in the local wild bird population, recognising the significant differences

between these scenarios and the strictly regulated outbreak measures associated with captive and farmed birds. The document is wide ranging and from a local authority perspective, touches on the disposal of wild bird carcasses as well as on biosecurity measures.

- 2.28** There has been no let-up in complaints about illegal dog breeding and a number of investigations are ongoing. In one recent case for example, a concerned neighbour reported their concerns about the welfare of bulldogs apparently abandoned at a domestic property. When Officers arrived at the property the same day, they found 20 dogs unattended and in a very poor state. The dogs were removed to safety and given the necessary veterinary attention before being placed into care. Once the owner was identified, the dogs were signed over and a criminal investigation is underway.
- 2.29** Over a period of time, SRS has received numerous complaints about primates being kept as pets, and Officers have yet to visit a domestic premises where all of the specific needs of the primate had been achieved. Recognising the welfare concerns surrounding the keeping of primates as pets, SRS supports the RSPCA's campaign to stop the practice, details of which can be found at <https://www.rspca.org.uk/getinvolved/campaign/primates>
- 2.30** In so doing, SRS fully recognises that primates are not suitable companion animals owing to the fact that their welfare needs cannot be met in a domestic environment. The Service will watch with interest to see whether a licensing scheme is introduced for the keeping of primates whereby only zoological establishments would be able to meet the standards required to keep any primate in captivity.

### *Protecting the Vulnerable*

- 2.31** During the first quarter of the year, a survey was carried out to help establish the extent to which young people are being sold e-cigarettes (electronic nicotine delivery systems) before the required age of 18. With the assistance of a 16-year-old volunteer, some thirty test purchases were attempted at a range of different types of retail outlet. Of the 30 attempts to purchase e-cigarettes, 4 resulted in the young volunteer being sold the age restricted items (i.e., 13% of attempts to purchase resulted in illegal sales). Three of the four businesses that sold were convenience stores while the fourth was a toy shop. Investigations are ongoing.
- 2.32** As the cost of living crisis continues to take hold, the Wales Illegal Money Lending Unit has seen an uptick in loan shark cases being reported. Given the direction of travel with soaring food, energy, housing and fuel prices, it is a sad fact that more and more families could fall into the grip of loan sharks. The Unit is working with public facing partners, for example the Housing Associations and Food Banks, from across Wales to raise awareness of the problem, the signs to look out for, and where to seek support and report the problem.



**2.33** Contact details for the Wales Illegal Money Lending Unit are as follows:

- **By telephone – 0300 123 3311 (24-hour service)**

- **Email - [imlu@cardiff.gov.uk](mailto:imlu@cardiff.gov.uk)**

- **Social media**

Twitter - *@loansharkswales*

Facebook - *facebook.com/stoploansharkswales*

### **Enforcement Activity**

**2.34** Details of recent cases investigated by the SRS that have resulted in prosecution are set out in **Appendix 5** to this report.

## **3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?**

**3.1** The Well-being of Future Generations Act requires the SRS to underpin decision making by contributing to the seven well-being goals of the Act, following the five ways of working, and consequently undertaking actions that will have a positive impact on people living in the future as well as those living today. Consequently, SRS seeks to work in the following ways:

- Looking to the long term
- Taking an integrated approach;
- Involving a diversity of the population in the decisions affecting them;
- Working with others in a collaborative way to find shared sustainable solutions
- Acting to prevent problems from occurring or getting worse.

**3.2** The fundamental purpose of the SRS (here defined as Environmental Health, Trading Standards and Licensing) is to protect residents, consumers, businesses and communities. The broad range of responsibilities can make it difficult to demonstrate succinctly their impact and value in terms of the wellbeing; the SRS Business Plans provide members with greater detail and articulate how those statutory responsibilities, and subsequent activities, contribute toward wellbeing across the region. This update report reflects some of the activities undertaken in recent months to promote the sustainable development principle.

## **4. Climate Change and Nature Implications**

- 4.1** As set out in 1.1 above, one of the key strategic themes for the Shared Regulatory Service is *Protecting the Local Environment*.
- 4.2** The SRS Business Plan articulates the work carried out under this theme to deliver on the corporate priorities for the participant Councils, including their ambitions to minimise climate change and impacts on the natural environment.
- 4.3** In this context, the Joint Committee is regularly updated on the contribution of SRS to this agenda, for example through its work in the areas of animal health and welfare, air quality, contaminated land, energy efficiency in the private rented sector and investigating greenwashing claims or environmental fraud.

## **5. Resources and Legal Considerations**

### **Financial**

- 5.1** The Participants' contribution towards the Shared Regulatory Service is recharged on a quarterly basis, based upon the approved budgets for 2022/23. Accounting for the full year is reported to the Committee at the Annual General Meeting.

### **Employment**

- 5.2** There are no immediate employment implications associated with this report.

### **Legal (Including Equalities)**

- 5.3** There are no immediate employment implications associated with this report

## **6. Background Papers**

Appendices:

- Appendix 1 Quarter 1 Financial report
- Appendix 2 Quarter 1 Performance data
- Appendix 3 Communicable Disease Plan 2022-23
- Appendix 4 Port Health Plan 2022-23
- Appendix 5 Details of SRS prosecutions concluding during Q1.

Meeting of:	<b>Shared Regulatory Services Joint Committee</b>
Date of Meeting:	<b>Tuesday, 27 September 2022</b>
Relevant Scrutiny Committee:	Homes and Safe Communities
Report Title:	Q1 2022/23 Shared Regulatory Services Revenue Monitoring Report
Purpose of Report:	To Provide the Partner Authorities with the Financial Performance of Shared Regulatory Services
Report Owner:	Matt Bowmer - Head of Service/s151 Officer
Responsible Officer:	Miles Punter – Director of Environment & Housing Services
Elected Member and Officer Consultation:	Head of Service for Shared Regulatory Services
Policy Framework:	This is a matter for Shared Regulatory Services
<p>Executive Summary:</p> <ul style="list-style-type: none"> <li>• The £8.331m 2022/23 Shared Regulatory Services (SRS) Budget was agreed by Committee on the 14<sup>th</sup> December 2022, which included an assumed 2% pay award.</li> <li>• The revenue position for 2022/23 will continue to be challenging for the SRS both operationally and financially due to the ongoing implications of the Covid-19 pandemic, where in previous periods additional grants had been made available by Welsh Government to mitigate their impact.</li> <li>• Emerging pressures during 2022/23 are in relation to energy standing charges, general inflation price rises, cost of living and staffing pressures being experienced across the service which will need to be closely monitored throughout the financial year.</li> <li>• In July 2022 the National Employers for Local Government Services made an offer to employees that is in excess of the assumed pay award which if accepted, would result in an overspend.</li> <li>• The forecast £211K overspend is the result of consideration for the proposed pay award as detailed above, plus £100k of operational costs relating to the seizure of 80 horses during the period.</li> <li>• Use of the SRS reserve may be required to resolve part of the forecast overspend position.</li> </ul>	

## Recommendations

1. That the position with regard to the 2022/23 forecast outturn position is noted.

## Reasons for Recommendations

1. That the members are aware of the position with regard to the 2022/23 forecast outturn position pertinent to the Board and relevant Scrutiny Committee, and to achieve compliance with the requirement as set out in clause 5.1 for the SRS Joint Working Agreement.

## 1. Background

- 1.1 The 2022/23 Shared Regulatory Services (SRS) Gross Revenue Budget was approved on the 14<sup>th</sup> December 2021.
- 1.2 Three members of staff remain on secondments out of the Service. The associated cost of these secondments are being recovered from Welsh Government and Monmouthshire County Council. This has enabled staff to act up into more senior roles.
- 1.3 A small group of officers from across the Service continue to be seconded to support the regional Trace, Track and Process (TTP) teams to both Health Boards that cover the SRS region. From July 2022, this is reduced to supporting the Cardiff and Vale Health Board only.
- 1.4 The impact of the pandemic continues to have a visible bearing on the income generation ability of the Service.
- 1.5 The impact of cost pressures relating to cost of living price rises is increasing pressure on existing budgets. There remains ongoing issues in attracting suitable candidates to vacant posts as the appetite for work related traveling appears to be diminishing.

## 2. Key Issues for Consideration

- 2.1 The Gross Revenue Budget and forecast outturn position for 2022/23 are shown in the tables below, with the position in respect of each of the partners detailed to include both Authority Specific and Core expenditure positions. As at Q1, the Service is forecasting a £211k overspend against a gross revenue budget of £8,331m, as illustrated in the following table:

	Gross	Forecast	Outturn
	Budget	Outturn	Variance
Authority	£'000's	£'000's	£'000's
Bridgend	1,777	1,754	23
Cardiff	4,811	5,031	(220)
Vale	1,743	1,757	(14)
<b>Total Gross Expenditure</b>	<b>8,331</b>	<b>8,542</b>	<b>(211)</b>

- 2.2 Multiple recruitment drives have been undertaken, however the Service continues to experience significant issues in attracting appropriate candidates to particular disciplines within the Service, which may also be due to a national scarcity of resource being available. This position is then amplified further due to the cost of living price rises and the overall position of the economy.
- 2.3 The Service continues to work with local universities in the practical support of students who are enrolled on degree courses relevant to areas in the SRS where there are vacancies. The current student compliment are supporting the Homes for Ukraine initiative within the Housing Team.
- 2.4 Staff have continued to work from home, with only skeleton staffing levels at the hubs.
- 2.5 A full breakdown of the forecast outturn position is shown in **Appendix A**.

### Authority Specific Services

- 2.6 The approved gross budget of £2.414m in respect of Authority Specific (AS) Services has a forecast overspend of £230k, as detailed in the following table:

	<b>Gross Budget</b>	<b>Forecast Outturn</b>	<b>Outturn Variance</b>
<b>Authority</b>	<b>£'000's</b>	<b>£'000's</b>	<b>£'000's</b>
Bridgend	434	416	18
Cardiff	1,468	1,698	(230)
Vale	512	530	(18)
<b>Total AS Services</b>	<b>2,414</b>	<b>2,644</b>	<b>(230)</b>

- 2.7 The £18k underspend at Bridgend, relates directly to an underspend within Kennelling & Vets, which is very much consistent with activity levels realised in previous years. Recently, there has been an increase in the number of dogs signed over to the kennels with a smaller increase to the number of dogs being picked up as strays. This position will be monitored closely throughout the period.
- 2.8 The £230k overspend at Cardiff predominantly relates to a forecast £208k overspend within Taxi Licensing Section and is consistent with performance in previous years.
- 2.9 The £14k overspend within the designated HMO areas relates to increased staffing costs as a result of consideration for the July 2022 pay offer being built into the projections.
- 2.10 The recent employers pay offer has driven the combined forecast £8k deficit within Night Time Noise and Cardiff Port Health with both budgets being predominantly staff costs.
- 2.11 Overall, the Vale is forecasting a £18k overspend which is the result of increased staffing costs within Taxi Licensing to enable staff to successfully navigate an increased workload, plus smaller forecast overspends within both Pest Control and Burials. These are then partially offset by an anticipated underspend within Kennelling and Vets.

## Core Services

2.12 The approved gross Core Services Budget for 2022/23 is £5.917m, which at Q1 is forecasting an underspend of £19k. The Core Service's budget is allocated in line with the population split across the participating authorities, as illustrated in the following table:

Authority	%	Gross	Forecast	Outturn
		Budget	Outturn	Variance
		£'000's	£'000's	£'000's
Bridgend	22.70%	1,343	1,338	5
Cardiff	56.49%	3,343	3,333	10
Vale	20.81%	1,231	1,227	4
<b>Total Core</b>		<b>5,917</b>	<b>5,898</b>	<b>19</b>

2.13 The £159k overspend within Animal Services is the result of increased costs relating to a further horse seizure on welfare grounds, which will be heard in court in this autumn. As the action was anticipated, low cost external support was accessed, therefore minimising the overall cost of the seizure.

2.14 An aggregate overspend of £83k is forecast within Environmental, Housing, Health & Safety and Communicable Disease and Pollution Services which predominantly relates to the impact of the recent employers pay offer should it be realised.

2.15 The forecast underspend of £201K within Food relates to staff being diverted to support TTP activities together with ongoing staff retention issues and other recruitment concerns.

2.16 The £60k Trading Standards underspend relates to a small number of vacant posts together with an anticipated underspend within Supplies & Services.

## Net Position

2.17 In accordance with the Joint Working Agreement, income budgets remain the responsibility of each Partner Authority and are shown within this report for completeness. The following table illustrates the forecast overspend of £363k against a net budget of £6.159m:

Authority	Net	Forecast	Outturn
	Budget	Outturn	Variance
	£'000's	£'000's	£'000's
Bridgend	1,298	1,427	(129)
Cardiff	3,459	3,679	(220)
Vale	1,402	1,416	(14)
<b>Total Net Expenditure</b>	<b>6,159</b>	<b>6,522</b>	<b>(363)</b>

2.18 Bridgend are forecasting a £152k under-recovery of income, which has resulted in a forecast overspend of £129k, which is consistent with performance in previous periods.

- 2.19 Both Cardiff & the Vale are at this time forecasting achieving their income targets, therefore there is no change to the positions stated at point 2.1 of this report.

### **3. How do proposals evidence the Five Ways of Working and contribute to our Well-being Objectives?**

- 3.1 The revenue budget has been set in order to support services in the delivery of the SRS Well-being objectives. It is therefore important for expenditure to be monitored to ensure that these objectives are being delivered.
- 3.2 The revenue budget has been set and is monitored to reflect the 5 ways of working.
- 3.3 **Looking to the long term** – The setting of the revenue budget requires planning for the future and takes a strategic approach to ensure services are sustainable and that future need and demand for services are understood.
- 3.4 **Taking an integrated approach** – The revenue budget include services which work closely with other organisations to deliver services eg Health Boards via TTP.
- 3.5 **Involving partners in decisions** – As part of the revenue budget setting process there is open engagement between the SRS partners.
- 3.6 **Working in a collaborative way** – The SRS was created as a collaborative service in 2015, with the split of funding split in line with the population data and is updated on an annual basis.
- 3.7 **Understanding the root cause of issues and preventing them** – Monitoring the revenue budget is a proactive way of understanding the financial position of services in order to tackle issues at the source as soon as they become apparent.

### **4. Climate Change and Nature Implications**

- 4.1 The SRS Annual Business Plan details illustrates how the Service is working towards reducing the carbon footprint of the service with consideration also given to nature implications, such as investigating noise and air emissions through environmental monitoring which also includes regulating emissions from industrial processes.

### **5. Resources and Legal Considerations**

#### **Financial**

- 5.1 As detailed in the body of the report.

#### **Employment**

- 5.2 There are no employment implications

**Legal (Including Equalities)**

5.3 There are no legal implications.

**6. Background Papers**

None



	Bridgend 2022/23			Cardiff 2022/23			Vale 2022/23			Total Gross Expenditure 2022/23		
	Budget	Outturn	Variance	Budget	Outturn	Variance	Budget	Outturn	Variance	Budget	Outturn	Variance
	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's	£000's
<b><u>Authority Specific</u></b>												
Bridgend Licensing	348	348	0							348	348	0
Bridgend Empty Homes	40	40	0							40	40	0
Kennelling & Vets Fees (Bridgend)	46	28	18							46	28	18
Cardiff Licencing				709	917	(208)				709	917	(208)
HMO Cathays				205	205	0				205	205	0
HMO Plasnewydd				278	292	(14)				278	292	(14)
Student Liaison				66	66	0				66	66	0
Night Time Noise				63	67	(4)				63	67	(4)
Cardiff Port Health				147	151	(4)				147	151	(4)
Vale Licensing							385	412	(27)	385	412	(27)
Burials (Vale)							1	4	(3)	1	4	(3)
Pest Control Service (Vale)							106	109	(3)	106	109	(3)
Vets & Kennelling Fees (Vale)							20	5	15	20	5	15
<b>Authority Specific Sub total</b>	<b>434</b>	<b>416</b>	<b>18</b>	<b>1,468</b>	<b>1,698</b>	<b>(230)</b>	<b>512</b>	<b>530</b>	<b>(18)</b>	<b>2,414</b>	<b>2,644</b>	<b>(230)</b>
<b><u>Core Services</u></b>												
Animal Services	89	125	(36)	222	312	(90)	82	115	(33)	393	552	(159)
Environmental	51	54	(3)	127	135	(8)	47	50	(3)	225	239	(14)
Food Services	340	295	45	847	733	114	312	270	42	1,499	1,298	201
Housing Services	146	153	(7)	363	384	(21)	134	140	(6)	643	677	(34)
Health & Safety & Communicable Disease	135	141	(6)	336	352	(16)	124	130	(6)	595	623	(28)
Pollution Services	200	202	(2)	499	502	(3)	183	185	(2)	882	889	(7)
Trading Standards	382	368	14	949	915	34	349	337	12	1,680	1,620	60
<b>Core Sub total</b>	<b>1,343</b>	<b>1,338</b>	<b>5</b>	<b>3,343</b>	<b>3,333</b>	<b>10</b>	<b>1,231</b>	<b>1,227</b>	<b>4</b>	<b>5,917</b>	<b>5,898</b>	<b>19</b>
<b>Gross Expenditure Budget</b>	<b>1,777</b>	<b>1,754</b>	<b>23</b>	<b>4,811</b>	<b>5,031</b>	<b>(220)</b>	<b>1,743</b>	<b>1,757</b>	<b>(14)</b>	<b>8,331</b>	<b>8,542</b>	<b>(211)</b>



	2022/23 Expenditure Budget £000's	2021/22 Income Budget £000's	2021/22 Net Budget £000's	Jun-22 Profiled Net Budget £000's	Jun-22 Actual Expenditure £000's	Jun-22 Actual Income £000's	Jun-22 Net Position £000's	Jun-22 Net Variance £000's	Projected Outturn Variance £000's	Projected YE Variance Fav/(Adv) £000's
	A	B	C = A - B	D	E	F	G = E - F	H = D - G	I	J = C - I
<b>Bridgend</b>										
<b>Core</b>	1,343	(72)	1,271	318	262	(23)	239	79	1,278	(7)
<b>Authority Specific</b>										
Licensing	348	(407)	(59)	(15)	66	(67)	(1)	(14)	80	(139)
Empty Homes	40	0	40	10	5	0	5	5	41	(1)
Kenneling & Vets	46	0	46	12	3	0	3	9	28	18
	<b>1,777</b>	<b>(479)</b>	<b>1,298</b>	<b>325</b>	<b>336</b>	<b>(90)</b>	<b>246</b>	<b>79</b>	<b>1,427</b>	<b>(129)</b>
<b>Cardiff</b>										
<b>Core</b>	3,343	(183)	3,160	790	699	(24)	675	115	3,150	10
<b>Authority Specific</b>										
Cardiff Licencing	709	(884)	(175)	(44)	209	(323)	(114)	70	33	(208)
HMO Cathays	205	(55)	150	37	39	0	39	(2)	152	(2)
HMO Plasnewydd	278	(87)	191	48	66	(115)	(49)	97	203	(12)
Student Liaison	66	(17)	49	12	15	(4)	11	1	49	0
Night Time Noise	63	0	63	16	17	0	17	(1)	67	(4)
Cardiff Port Health	147	(126)	21	5	36	(32)	4	1	25	(4)
	<b>4,811</b>	<b>(1,352)</b>	<b>3,459</b>	<b>864</b>	<b>1,081</b>	<b>(498)</b>	<b>583</b>	<b>281</b>	<b>3,679</b>	<b>(220)</b>
<b>Vale of Glamorgan</b>										
<b>Core</b>	1,231	(11)	1,220	309	240	(1)	239	70	1,216	4
<b>Authority Specific</b>										
Vale Licensing	385	(290)	95	24	92	(52)	40	(16)	122	(27)
Burials (Vale)	1	0	1	1	1	0	1	0	4	(3)
Pest Control Service (Vale)	106	(40)	66	17	26	(20)	6	11	69	(3)
Vets & Kennelling Fees (Vale)	20	0	20	5	2	0	2	3	5	15
	<b>1,743</b>	<b>(341)</b>	<b>1,402</b>	<b>356</b>	<b>361</b>	<b>(73)</b>	<b>288</b>	<b>68</b>	<b>1,416</b>	<b>(14)</b>
<b>Grand Total</b>	<b>8,331</b>	<b>(2,172)</b>	<b>6,159</b>	<b>1,545</b>	<b>1,778</b>	<b>(661)</b>	<b>1,117</b>	<b>428</b>	<b>6,522</b>	<b>(363)</b>

# Shared Regulatory Services

## Quarterly Performance Report 2022/23

### Quarter 1



Gwasanaethau  
**Rheoliadol**  
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# High Risk Food Hygiene Inspections

Year	Team	Authority	Ref	Quarter	Title	No. carried out	No. due	Percentage achieved	RAG Status	Comment	Target
2022-23	Food Combined	Bridgend	SRS/FH/001	Qtr 1	The percentage of high risk businesses (Cat A & B) that were liable to a programmed inspection that were inspected for food	30	42	<b>71.43%</b>	Green	In line with the priorities of the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, all high risk businesses rated A and B due an inspection by the end of Qtr 1 have been completed at premises that were operating and available for inspection.	100%
2022-23	Food Combined	Cardiff	SRS/FH/001	Qtr 1	The percentage of high risk businesses (Cat A & B) that were liable to a programmed inspection that were inspected for food	25	132	<b>18.94%</b>	Green	In line with the priorities of the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, all high risk businesses rated A and B due an inspection by the end of Qtr 1 have been completed at premises that were operating and available for inspection.	100%
2022-23	Food Combined	Vale of Glam	SRS/FH/001	Qtr 1	The percentage of high risk businesses (Cat A & B) that were liable to a programmed inspection that were inspected for food	37	66	<b>56.06%</b>	Green	In line with the priorities of the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, all high risk businesses rated A and B due an inspection by the end of Qtr 1 have been completed at premises that were operating and available for inspection.	100%
2022-23	Food Combined	SRS	SRS/FH/001	Qtr 1	The percentage of high risk businesses (Cat A & B) that were liable to a programmed inspection that were inspected for food	92	240	<b>38.33%</b>	Green	In line with the priorities of the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, all high risk businesses rated A and B due an inspection by the end of Qtr 1 have been completed at premises that were operating and available for inspection.	100%

# High Risk Food Hygiene Inspections

Year	Team	Authority	Ref	Quarter	Title	No. carried out	No. due	Percentage achieved	RAG Status	Comment	Target
2022-23	Food Combined	Bridgend	SRS/FH/002	Qtr 1	The percentage of high risk businesses (Cat C) that were liable to a programmed inspection that were inspected for food hygiene.	7	564	1.24%	Red	The priorities outlined in the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, has required the inspection programme during Qtr 1 to be focussed on those businesses rated A and B together with new businesses. As a result, C rated premises were not prioritised. Non broadly compliant C rated businesses will however be prioritised for inspection during Qtr 2 in line with the plan.	90%
2022-23	Food Combined	Cardiff	SRS/FH/002	Qtr 1	The percentage of high risk businesses (Cat C) that were liable to a programmed inspection that were inspected for food hygiene.	28	1357	2.06%	Red	The priorities outlined in the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, has required the inspection programme during Qtr 1 to be focussed on those businesses rated A and B together with new businesses. As a result, C rated premises were not prioritised. Non broadly compliant C rated businesses will however be prioritised for inspection during Qtr 2 in line with the plan.	90%
2022-23	Food Combined	Vale of Glam	SRS/FH/002	Qtr 1	The percentage of high risk businesses (Cat C) that were liable to a programmed inspection that were inspected for food hygiene.	11	512	2.15%	Red	The priorities outlined in the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, has required the inspection programme during Qtr 1 to be focussed on those businesses rated A and B together with new businesses. As a result, C rated premises were not prioritised. Non broadly compliant C rated businesses will however be prioritised for inspection during Qtr 2 in line with the plan.	90%
2022-23	Food Combined	SRS	SRS/FH/002	Qtr 1	The percentage of high risk businesses (Cat C) that were liable to a programmed inspection that were inspected for food hygiene.	46	2433	1.89%	Red	The priorities outlined in the Food Standards Agency Recovery Plan, which aims to assist local authorities to tackle the backlog of inspections resulting from the pandemic, has required the inspection programme during Qtr 1 to be focussed on those businesses rated A and B together with new businesses. As a result, C rated premises were not prioritised. Non broadly compliant C rated businesses will however be prioritised for inspection during Qtr 2 in line with the plan.	90%

# New Businesses—Food Hygiene

Year	Team	Authority	Ref	Quarter	Title	No. carried out	No. due	Percentage achieved	RAG Status	Comment	Target
2022-23	Food Combined	Bridgend	SRS/FH/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment during the year for food hygiene.	42	133	31.58%	Red	Whilst new business inspections have been prioritised in line with the Food Standards Agency Recovery Plan, recruitment and retention pressures, staff being diverted to Test Trace, Protect, together with staff absences and the volume of applications received, has affected performance in this area. Notwithstanding this, the number of businesses due an inspection has reduced significantly since this time last year where the number of inspections due stood at 314 and has now reduced to 133. This is testament to efforts made in reducing the backlog.	90%
2022-23	Food Combined	Cardiff	SRS/FH/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment during the year for food hygiene.	133	512	25.98%	Red	Whilst new business inspections have been prioritised in line with the Food Standards Agency Recovery Plan, recruitment and retention pressures, staff being diverted to Test Trace, Protect, together with staff absences and the volume of applications received, has affected performance in this area. Notwithstanding this, the number of businesses due an inspection has reduced significantly since this time last year where the number of inspections due stood at 783 and has now reduced to 512. This is testament to efforts made in reducing the backlog.	90%
2022-23	Food Combined	Vale of Glam	SRS/FH/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment during the year for food hygiene.	52	156	33.33%	Red	Whilst new business inspections have been prioritised in line with the Food Standards Agency Recovery Plan, recruitment and retention pressures, staff being diverted to Test Trace, Protect, together with staff absences and the volume of applications received, has affected performance in this area. Notwithstanding this, the number of businesses due an inspection has reduced significantly since this time last year where the number of inspections due stood at 352 and has now reduced to 156. This is testament to efforts made in reducing the backlog.	90%
2022-23	Food Combined	SRS	SRS/FH/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment during the year for food hygiene.	227	801	28.34%	Red	Whilst new business inspections have been prioritised in line with the Food Standards Agency Recovery Plan, recruitment and retention pressures, staff being diverted to Test Trace, Protect, together with staff absences and the volume of applications received, has affected performance in this area. Notwithstanding this, the number of businesses due an inspection has reduced significantly since this time last year where the number of inspections due stood at 1449 and has now reduced to 801. This is testament to efforts made in reducing the backlog.	90%

# Broadly Compliant Food Premises

Year	Team	Authority	Ref	Quarter	Title	No. carried out	No. due	Percentage achieved	RAG Status	Comment	Target
2022-23	Food	Bridgend	PAM/23	Qtr 1	Percentage of food establishments which are 'broadly compliant' with food hygiene standards.	1341	1375	97.53%	Green	Target exceeded.	94%
2022-23	Food	Cardiff	PAM/23	Qtr 1	Percentage of food establishments which are 'broadly compliant' with food hygiene standards.	3229	3355	96.24%	Green	Target exceeded.	94%
2022-23	Food	Vale of Glam	PAM/23	Qtr 1	Percentage of food establishments which are 'broadly compliant' with food hygiene standards.	1311	1344	97.54%	Green	Target exceeded.	94%
2022-23	Food	SRS	PAM/23	Qtr 1	Percentage of food establishments which are 'broadly compliant' with food hygiene standards.	5881	6074	96.82%	Green	Target exceeded.	94%



# High Risk Trading Standards Inspections

Year	Team	Authority	Ref	Quarter	Title	No. carried out	No. due	Percentage achieved	RAG Status	Comment	Target
2022-23	TS combined	Bridgend	SRS/TS/001	Qtr 1	The percentage of high risk businesses that were liable to a programmed inspection that were inspected, for trading standards.	3	14	21.43%	Red	3 inspections remained outstanding at the end of Qtr 1. These represented two businesses, one that required both a food standards inspection and a consumer protection inspection and an animal feed business. In line with the Food Standards Agency Recovery Plan, high risk food standards inspections were prioritised however, one remained outstanding at the end of the quarter. This inspection was scheduled for the end of June but due to a large number of staff at the business being off work with covid, the inspection was re-scheduled to the following week.	100%
2022-23	TS Combined	Cardiff	SRS/TS/001	Qtr 1	The percentage of high risk businesses that were liable to a programmed inspection that were inspected, for trading standards.	10	27	37.04%	Red	3 inspections remained outstanding at the end of Qtr 1. These represented one food standards inspection and 2 consumer protection inspections. In line with the Food Standards Agency Recovery Plan, high risk food standards inspections were prioritised during Qtr 1 however, one remained outstanding at the end of the quarter. This inspection was re-scheduled as a result of the food business owner being away when the inspection was planned.	100%
2022-23	TS Combined	Vale of Glam	SRS/TS/001	Qtr 1	The percentage of high risk businesses that were liable to a programmed inspection that were inspected, for trading standards.	3	7	42.86%	Green	All inspections due in Qtr 1 completed. This was in line with the Food Standards Recovery Plan which required the prioritisation of high risk food standards inspections to be completed by 30 June.	100%
2022-23	TS Combined	SRS	SRS/TS/001	Qtr 1	The percentage of high risk businesses that were liable to a programmed inspection that were inspected, for trading standards.	16	48	33.33%	Red	6 inspections remained outstanding at the end of Qtr 1. These represented 2 food standards inspections and 3 consumer protection inspections and one for animal feed. In line with the Food Standards Agency Recovery Plan, high risk food standards inspections were prioritised however, 2 remained outstanding at the end of the quarter due to the need to re-schedule as a result of covid in one business and the food business owner being away on the second.	100%

# New business—Trading Standards

Year	Team	Authority	Ref	Quarter	Title	No. carried out	No. due	Percentage	RAG Status	Comment	Target
2022-23	TS Combined	Bridgend	SRS/TS/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment visit or returned a self-assessment questionnaire during the year, for food standards and animal feed.	35	194	18.04%	Red	The suspension of inspections and closure of businesses during 2020/21 resulted in significant backlog of new business inspections. Whilst additional support is provided by Food Safety Officers with the relevant competency, who undertake food standards inspections during food safety visits, the number of inspections carried out has been significantly reduced. This is due to recruitment and retention pressures, staff being diverted to Test, Trace, Protect, together with staff absences between both the Food Safety and Trading Standards teams during Qtr 1.	80%
2022-23	TS Combined	Cardiff	SRS/TS/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment visit or returned a self-assessment questionnaire during the year, for food standards and animal feed.	24	827	2.90%	Red	The suspension of inspections and closure of businesses during 2020/21 resulted in significant backlog of new business inspections. Whilst additional support is provided by Food Safety Officers with the relevant competency, who undertake food standards inspections during food safety visits, the number of inspections carried out has been significantly reduced. This is due to recruitment and retention pressures, staff being diverted to Test, Trace, Protect, together with staff absences between both the Food Safety and Trading Standards teams during Qtr 1.	80%
2022-23	TS Combined	Vale of Glam	SRS/TS/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment visit or returned a self-assessment questionnaire during the year, for food standards and animal feed.	24	344	6.98%	Red	The suspension of inspections and closure of businesses during 2020/21 resulted in significant backlog of new business inspections. Whilst additional support is provided by Food Safety Officers with the relevant competency, who undertake food standards inspections during food safety visits, the number of inspections carried out has been significantly reduced. This is due to recruitment and retention pressures, staff being diverted to Test, Trace, Protect, together with staff absences between both the Food Safety and Trading Standards teams during Qtr 1.	80%
2022-23	TS Combined	SRS	SRS/TS/003	Qtr 1	The percentage of new businesses identified which were subject to a risk assessment visit or returned a self-assessment questionnaire during the year, for food standards and animal feed.	83	1365	6.08%	Red	The suspension of inspections and closure of businesses during 2020/21 resulted in significant backlog of new business inspections. Whilst additional support is provided by Food Safety Officers with the relevant competency, who undertake food standards inspections during food safety visits, the number of inspections carried out has been significantly reduced. This is due to recruitment and retention pressures, staff being diverted to Test, Trace, Protect, together with staff absences between both the Food Safety and Trading Standards teams during Qtr 1.	80%

# Noise and Air Pollution

Year	Team	Authority	Ref	Quarter	Title	No. re- sponded to within tar- get	No. re- ceived	Percentage achieved	RAG Status	Comment	Target
2022-23	Pollution	Bridgend	SRS/LC/008	Qtr 1	Percentage of domestic noise and air complaints responded to within 3 working days.	124	142	87.32%	Amber	The shortfall against target represents just 4 complaints that failed to reach target. This is largely due to staffing pressures as a result of long term sick which has impacted on the capacity of the team to meet the required targets.	90%
2022-23	Pollution	Cardiff	SRS/LC/008	Qtr 1	Percentage of domestic noise and air complaints responded to within 3 working days.	419	446	93.95%	Green	Target exceeded.	90%
2022-23	Pollution	Vale of Glam	SRS/LC/008	Qtr 1	Percentage of domestic noise and air complaints responded to within 3 working days.	88	104	84.62%	Amber	The shortfall against target represents 6 complaints that failed to reach target. This is largely due to 3 full time vacancies within the team one of which was a Team Manager role. This role has now been filled and we are in the process of recruiting for the remaining 2 vacant posts.	90%
2022-23	Pollution	SRS	SRS/LC/008	Qtr 1	Percentage of domestic noise and air complaints responded to within 3 working days.	631	692	91.18%	Green	Target exceeded.	90%

# Noise and Air Pollution

Year	Team	Authority	Ref	Quarter	Title	No. re- sponded to within tar- get	No. re- ceived	Percentage achieved	RAG Status	Comment	Target
2022-23	Pollution	Bridgend	SRS/LC/009	Qtr 1	Percentage of commercial and industrial noise and air complaints responded to within one working day.	54	79	<b>68.35%</b>	Amber	The shortfall against target represents just 6 complaints that failed to reach target. This is largely due to staffing pressures as a result of long term sick which has impacted on the capacity of the team to meet the required targets.	75%
2022-23	Pollution	Cardiff	SRS/LC/009	Qtr 1	Percentage of commercial and industrial noise and air complaints responded to within one working day.	121	176	<b>68.75%</b>	Amber	The shortfall against target represents 11 complaints that failed to reach target. This is largely due to 3 full time vacancies within the team one of which was a Team Manager role. This role has now been filled and we are in the process of recruiting for the remaining 2 vacant posts.	75%
2022-23	Pollution	Vale of Glam	SRS/LC/009	Qtr 1	Percentage of commercial and industrial noise and air complaints responded to within one working day.	61	85	<b>71.76%</b>	Amber	The shortfall against target represents 3 complaints that failed to reach target. This is largely due to 3 full time vacancies within the team one of which was a Team Manager role. This role has now been filled and we are in the process of recruiting for the remaining 2 vacant posts.	75%
2022-23	Pollution	SRS	SRS/LC/009	Qtr 1	Percentage of commercial and industrial noise and air complaints responded to within one working day.	236	340	<b>69.41%</b>	Amber	The shortfall against target represents 20 complaints that failed to reach target. This is largely due to staffing pressures as a result of long term sick and 3 vacancies within the teams which has impacted on the capacity to meet the required targets. The team manager role in Cardiff has now been filled and we are currently recruiting for the remaining 2. vacancies.	75%

# Noise and Air Pollution

Year	Team	Authority	Ref	Quarter	Title	No. re- sponded to within tar- get	No. re- ceived	Percentage achieved	RAG Status	Comment	Target
2022-23	Pollution	Bridgend	SRS/LC/010	Qtr 1	Percentage of alarm complaints responded to within one day.	2	2	100.00%	Green	All complaints received responded to within target.	90%
2022-23	Pollution	Cardiff	SRS/LC/010	Qtr 1	Percentage of alarm complaints responded to within one day.	11	11	100.00%	Green	All complaints received responded to within target.	90%
2022-23	Pollution	Vale of Glam	SRS/LC/010	Qtr 1	Percentage of alarm complaints responded to within one day.	0	0	0.00%	Green	No complaints received.	90%
2022-23	Pollution	SRS	SRS/LC/010	Qtr 1	Percentage of alarm complaints responded to within one day.	13	13	100.00%	Green	All complaints received responded to within target.	90%

# Licensing

Year	Team	Authority	Ref	Quarter	Title	No deter- mined	No. re- ceived	Percentage achieved	RAG Sta- tus	Comment	Target
2022-23	Licensing	Bridgend	SRS/LC/004	Qtr 1	Percentage of licensed premises applications received and determined within 2 months.	34	34	100.00%	Green	Target achieved.	100%
2022-23	Licensing	Cardiff	SRS/LC/004	Qtr 1	Percentage of licensed premises applications received and determined within 2 months.	141	141	100.00%	Green	Target achieved.	100%
2022-23	Licensing	Vale of Glam	SRS/LC/004	Qtr 1	Percentage of licensed premises applications received and determined within 2 months.	24	24	100.00%	Green	Target achieved.	100%
2022-23	Licensing	SRS	SRS/LC/004	Qtr 1	Percentage of licensed premises applications received and determined within 2 months.	199	199	100.00%	Green	Target achieved.	100%

# Licensing

Year	Team	Authority	Ref	Quarter	Title	No deter- mined	No. re- ceived	Percentage achieved	RAG Sta- tus	Comment	Target
2022-23	Licensing	Bridgend	SRS/LC/005	Qtr 1	Percentage of licensed personal applications received and determined within 2 months.	22	22	100.00%	Green	Target achieved.	100%
2022-23	Licensing	Cardiff	SRS/LC/005	Qtr 1	Percentage of licensed personal applications received and determined within 2 months.	86	86	100.00%	Green	Target achieved.	100%
2022-23	Licensing	Vale of Glam	SRS/LC/005	Qtr 1	Percentage of licensed personal applications received and determined within 2 months.	19	19	100.00%	Green	Target achieved.	100%
2022-23	Licensing	SRS	SRS/LC/005	Qtr 1	Percentage of licensed personal applications received and determined within 2 months.	127	127	100.00%	Green	Target achieved.	100%

# Licensing

Year	Team	Authority	Ref	Quarter	Title	No deter- mined	No. re- ceived	Percentage achieved	RAG Sta- tus	Comment	Target
2022-23	Licensing	Bridgend	SRS/LC/006	Qtr 1	Percentage of Gambling Premises applications received and determined within 2 months.	0	0	0.00%	Green	No applications received.	100%
2022-23	Licensing	Cardiff	SRS/LC/006	Qtr 1	Percentage of Gambling Premises applications received and determined within 2 months.	0	0	0.00%	Green	No applications received.	100%
2022-23	Licensing	Vale of Glam	SRS/LC/006	Qtr 1	Percentage of Gambling Premises applications received and determined within 2 months.	0	0	0.00%	Green	No applications received.	100%
2022-23	Licensing	SRS	SRS/LC/006	Qtr 1	Percentage of Gambling Premises applications received and determined within 2 months.	0	0	0.00%	Green	No applications received.	100%



# Shared Regulatory Services

## Communicable Disease and Health Service Plan

2022-23



Communicable  
Disease



Shared  
**Regulatory**  
Services



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Appendix A – Corporate priorities of Bridgend, Cardiff and Vale of Glamorgan Councils.

# Introduction

Local Authorities have a responsibility to provide comprehensive health protection service to businesses, residents and visitors of Bridgend, Cardiff and the Vale of Glamorgan. This is largely achieved through the investigation of cases and outbreaks of communicable disease and the application of control, preventative and enforcement measures together with a number of other proactive activities. This Service Plan is produced to inform the business community and wider audience of the arrangements Bridgend, Cardiff and the Vale of Glamorgan has in place to discharge this duty.

The last 2 years has presented an unprecedented challenge to staff across Shared Regulatory Services (SRS), with officers having to rapidly and dynamically respond to the global COVID-19 pandemic. This period has seen officers being re-deployed into new roles to actively support the Test, Trace and Protect service; required staff to flexibly adapt their working hours throughout the week and across weekends in response to service demands; and engage with external stakeholders such as Public Health Wales; Local Health Boards and neighbouring Local Authorities in new ways of collaborative working. This has been particularly challenging for Shared Regulatory Services since the region spans 2 Local Health Board areas; each with slightly divergent operational protocols.

As we enter the new financial year, we do so mindful of the challenges presented by the COVID-19 pandemic and the uncertainty of what Variants of Concern could emerge during the winter of 2022/23. Whilst most officers have now returned to their substantive roles, the recovery plan is having to prepare for a rapid realignment of resource should this be necessary. We recognise the need for rapid adaptation as the situation evolves and are realistic in acknowledging that our priorities and plans may change as the year progresses.

This service plan therefore outlines our current arrangements and proposed interventions and actions to be delivered during the year. Whilst these may be subject to change, we remain committed to protecting and improving the health of people across the region.

**Christina Hill**  
**Operational Manager Commercial Services**

# 1. Service Aims and Objectives

## 1.1 Primary aims

The Communicable Disease Service is committed to protecting individuals from harm, preventing communicable disease and promoting health improvement and to demonstrate this; the service has adopted the following aims and objectives.

The overall aim of the service is:-

*The protection and improvement of the health of the people of Bridgend, Cardiff and the Vale of Glamorgan*

To achieve this, the service has adopted the following key delivery priorities:-

- The timely investigation, surveillance, control, and prevention of sporadic and outbreak cases of communicable disease, including the development and implementation of related public health intervention strategies.
- The enforcement of Health Protection legislation to minimise the spread of communicable disease and contamination from radiation and chemicals that threaten health.
- The provision of infection control and nutritional training.
- Leading and supporting the work of council services and external organisations including local communities and industry to protect and minimise the impact of public health risks to the population of Bridgend, Cardiff and the Vale of Glamorgan.
- In line with Cardiff's Healthy City status undertake targeted health promotion and intervention activities by acting upon the social, economic, environmental and biological determinants of health and wellbeing.

## 1.2 Links to Corporate Objectives and local plans

As a regional organisation providing regulatory services across three local authority areas, we place the **corporate priorities** and outcomes of the three councils at the heart of all that we do (Appendix A). In developing our own strategic priorities and outcomes for Shared Regulatory Services, we have considered the priorities of all the three authorities, together with the needs and aspirations of our partners and customers so they translate into priorities that meet local needs.



SRS priorities particularly relevant to the delivery of the communicable disease service are:

**Improving health and wellbeing** Amongst other factors impacting health, the service works with others to protect public health by controlling and preventing sporadic cases and outbreaks of communicable disease contributing to the reduction in ill health in people.

**Supporting the local economy** The provision of timely advice and engagement on health and infection control issues to businesses, stakeholders, and other local authorities and bodies can benefit the economic viability of businesses. The equitable enforcement of regulations helps to maintain a level playing field, allowing businesses to compete on equal terms.

**Safeguarding the vulnerable** Much of the reactive surveillance work forms the foundation for proactive evidence based interventions focused on vulnerable and 'at risk' sectors of our community. This work routinely involves working in partnership with the business community, Public Health Wales, Care Inspectorate Wales, Local Health Board, voluntary organisations and supporting other Council services such as schools and care sector commissioning teams.

Nationally the service also contributes to the **National Enforcement Priorities for Wales** for local regulatory delivery which highlight the positive contribution that regulatory services, together with local and national partners, can make in delivering better outcomes:-

- Protecting individuals from harm and promoting health improvement
- Ensuring the safety and quality of the food chain to minimise risk to human and animal health
- Promoting a fair and just environment for citizens and business
- Improving the local environment to positively influence quality of life and promote sustainability.

As a public body, SRS is required to implement the key principles of the **Well-being of Future Generations (Wales) Act 2015** which seeks to ensure the needs of the present are met in a sustainable way by using the following ways of working:

- looking to the long term so not compromising the ability of future generations to meet their own needs;
- taking an integrated approach;
- involving a diversity of the population in the decisions affecting them;
- working with others in a collaborative way to find shared sustainable solutions; and
- acting to prevent problems from occurring or getting worse.

Welsh Government expects public bodies in Wales to follow these five ways of working when preventing and managing communicable disease outbreaks.

**The Local Public Health (medium term) Plan 2020-2023**, published as part of the Local Public Health Strategic Framework, provides details of how local Public Health teams work in partnership to improve and protect the health and well-being of the local population. The Plan sets out several priority work areas and actions necessary to achieve improvement. A number of themes detailed in the public health work programme dovetail with work being undertaken by the Communicable Disease, Health and Safety service as part of its proactive and reactive work

*(e.g. delivering the Healthy Option Award scheme; providing appropriate infection control advice when interviewing confirmed cases of communicable disease; enforcement of current smoke-free legislation across the region).*

**“Move more, Eat Well Plan”** (2020-2023) is a regional response by Cardiff & Vale Local Health Board, Cardiff Council and Vale of Glamorgan Council which identifies 10 priority areas to improve health conditions across the region, including all Public Services Board organisations staff restaurants/canteens signing up to healthy food standards . [Move More Eat Well](#)

The Healthy Option Award also supports one of the national key priorities in the Welsh Government’s strategy to prevent and reduce obesity levels in Wales, “Healthy Weight: Healthy Wales”, which aims to improve life opportunities for future generations by delivering a whole system approach with a range of partners.



National Priority Area 1 - **Shape the food and drink environment towards sustainable and healthier options.**

**Aim - Ensure that our food environment is more targeted to healthier options to make the healthy choice, the easy choice.** We will ensure that foods High in Fat, Sugar, and Salt (HFSS) are not advertised to children and young people. We will promote healthier options on our public transport and within local communities to enable healthy eating to become the norm.

## 2. Overview of the Service

### 2.1 Area profile

**Shared Regulatory Services covers the Council areas of Bridgend, Cardiff and the Vale of Glamorgan and serves over 650,000 residents.** Extending from St Mellons in the East of Cardiff to Maesteg in the west, the area encompasses Cardiff, the capital City of Wales with its array of cultural, financial and commercial organisations and the rural areas of Bridgend and the Vale of Glamorgan with their vibrant tourist and agricultural economies.



**Bridgend is situated on the south coast straddling the M4 corridor.** It comprises an area of 28,500 hectares and a population of just over 140,000 residents. To the north of the M4, the area consists of mainly ex-coal mining valley communities with Maesteg as the main centre of population. To the south of the M4, the ex-market town of Bridgend is the largest town, the hub of the economy and its employment base. To the south west on the coast lies

Porthcawl, a traditional seaside resort, a traditional seaside resort with a high proportion of elderly residents, which is subject to a major influx of tourists during the summer period.

**Cardiff is the capital city of Wales and is continuing to grow faster than any other capital city in Europe.** In

population terms, it is the largest city in Wales with a population of 370,000. Measures of population however, belies Cardiff's significance as a regional trading and business centre. The population swells by approximately 70,000 daily with commuters and visitors. Cardiff is the seat of government and the commercial, financial and administrative centre of Wales. Cardiff boasts one of the most vibrant city centres in the UK and on a typical weekend, Cardiff's night time economy can attract over 40,000 people and sometimes more than 100,000 when the City's Millennium Stadium hosts international events.



**The Vale of Glamorgan is bounded to the north by the M4 motorway and to the south by the Severn Estuary.** It covers 33,097 hectares with 53 kilometres of coastline, and a population of over 130,000 residents. The area is predominantly rural in character, but contains several urban areas of note such as Barry, Penarth, Dinas Powys and the historic towns of Cowbridge and Llantwit Major. Barry is the largest town, a key employment area and

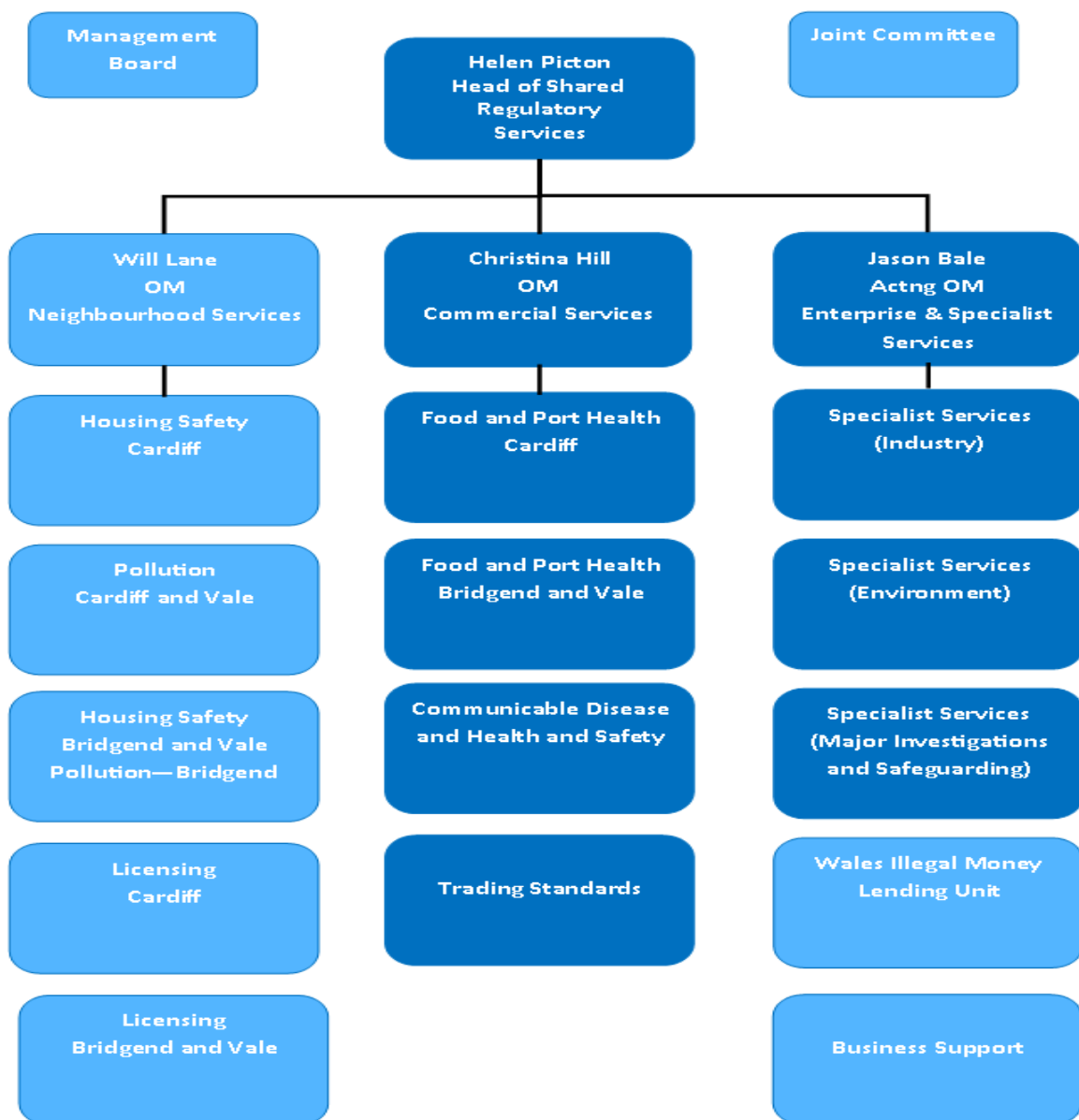
popular seaside resort. The rural parts of the Vale provide a strong agricultural base together with a quality environment, which is a key part of the area's attraction. The area includes Barry Docks area and Cardiff International Airport.

## 2.2 Organisational Structure

Communicable Disease Services are provided by the Commercial Services Team within Shared Regulatory Services. The Teams consists largely of Environmental Health Officers providing services across the three local authority areas. The Vale of Glamorgan Council act as the host authority for the Service with functions associated with this Plan delegated to the Shared Service Joint Committee.

Operational functions within the Service are illustrated in the following table with those that have responsibility for public health issues highlighted in darker blue.

Shared Regulatory Services Organisational Chart





## 2.3 Scope of the Communicable Disease Service

A comprehensive health protection and improvement service is delivered by combining surveillance, public health intervention, epidemiological studies, enforcement, advice, training and promotion. Much of the reactive surveillance work forms the foundation for proactive evidence based interventions focused on vulnerable and 'at risk' sectors of our community; in particular young people and the elderly. Examples of proactive interventions undertaken by the service will be detailed later on in this report. Outbreak and cluster investigations also form a significant part of our reactive role.

Shared Regulatory Services, and its Officers, continues to lead nationally on aspects of communicable disease and health protection, most notably since 2018, when the substantive Team Manager was seconded to Welsh Government to lead on the development of the Special Procedures Licensing regime in accordance with the Public Health (Wales) Act 2017. As a consequence of the COVID-19 pandemic, the Team Manager was re-assigned into the role of Senior Environmental Health advisor for COVID-19 in the Health Protection Policy & Legislation Branch of Welsh Government from March 2020 to March 2022.

The acting Team Manager was further able to actively contribute to the development of national COVID-19 guidance for the close personal contact industry during the pandemic, and assist Welsh Government understand the landscape of COVID in schools and care homes across the Cardiff and Vale region at the fortnightly National Care Home and National Schools and Childcare group meetings.

Other Officers from the service also contribute to the national 'task and finish' group for special procedures licensing which, to-date, has assisted in the development of the Level 2 Award in Infection Prevention and Control.

Key services delivered are:

- The investigation of confirmed sporadic and outbreak cases of communicable disease and all actions required as a result of those investigations.
- **During 2021/2022 this has also included the investigation and management of COVID-19 cases in the care and educational sectors, workplaces, returning international travellers and the investigation of clusters.**
- Responding to complaints of suspected food poisoning and infectious disease risks.
- **During 2021/2022 this has also included monitoring businesses to ensure they are operating in a COVID-19 compliant manner and taking enforcement action where duty holders are failing to take reasonable measures to mitigate the risk of transmission.**
- Enforcement of Health Protection legislation including the service of 'Requests for Co-operation', the application for Part 2A Orders and exclusion of infected cases or close contacts from place of work, education or leisure activities.
- **During 2021/2022 this has also included issuing 'Requests for Co-operation' where confirmed cases of COVID-19, or close contacts of confirmed cases, failed to self-isolate following instruction from Test, Trace and Protect.**
- Lead on local and national communicable disease initiatives, which involve proactive business engagement and partnership working commonly Public Health Wales, Business

Wales, Welsh Government and other Council services such as education and corporate health and safety.

- Undertake health promotion and public health interventions (*e.g. Healthy Option Awards; Healthy and Sustainable Pre-School Schemes; preparing educational videos*).
- Management and delivery of infection control and nutritional training.
- Assess client consultation and infection control arrangements in businesses registering to undertake skin piercing activities (*tattooing; cosmetic piercing; acupuncture; electrolysis; semi-permanent make-up*).

### Service delivery points

Communicable Disease Services are delivered from all 3 hubs: County Hall, Cardiff; Civic Offices in the Vale and Ravens Court in Bridgend on an agile basis. The Service generally operates office hours from Monday to Friday, with Lead Officers being contactable outside of office hours via the 24 hour emergency service for the investigation and control of communicable diseases of public health significance; such as E. Coli O157, Typhoid and Legionnaires’ disease. Officers will also conduct investigations and case interviews outside of normal office hours for significant pathogens so that the spread of communicable disease in the wider community is controlled as quickly as possible.

The Shared Regulatory Services website provides information on the services provided and the website address is [www.srs.wales/](http://www.srs.wales/)

## 2.4 Resources

### Financial allocation

The expenditure directly involved in providing the Communicable Disease Service for 2022/2023 is included in the Service budget and is considered adequate to ensure the effective delivery of the service under normal circumstances.

### Staffing allocation

The table below indicates the actual number of staff working on Communicable Disease Control and related matters (in terms of full time equivalents FTE).

Position	Function	FTE
Head of Shared Regulatory Services	Management of Shared Regulatory Service.	0.05
Operational Manager Regulatory Commercial Services x 1	Management of Commercial Services	0.10
Team Manager Communicable Disease, Health and Safety (also a nominated Lead Officer) x 1	Management and delivery of the Communicable Disease Service.	0.50
Lead Officers for Communicable Disease x 2 1 FT CSO has 50/50 split for H&S:CD work 1 FT CSO has a 30/70 split for H&S:CD work	All aspects of communicable disease investigation, enforcement, control and prevention.	1.2

Commercial Services Officer (Communicable Disease, Health & Safety) x 4 1 FT CSO has a 50/50 split for H&S:CD work 2 FT CSO posts with a 80/20 split for H&S:CD split 1 CSO works 4 days a week with an equal split in H&S:CD work	Assist with all aspects of communicable disease investigation, enforcement, control and prevention <i>(additional resource can be diverted to CD function as service demand dictates – as seen in COVID-19 pandemic)</i>	1.3
Commercial Services Technical Officer (Communicable Disease, Health & Safety) x 2 (equal split between health and safety and communicable disease work)	All aspects of communicable disease investigation and enforcement as dictated by training and experience	1.0
Student Commercial Services Technical Officers x1	Investigation of confirmed Campylobacter cases and suspected food poisoning cases.	0.6

The table below indicates the number of staff tasked with escalated COVID-19 related matters (in terms of full time equivalents FTE) across SRS from July 2022 to March 2023.

Position	Function	FTE
1 Senior Commercial Services Officer	Oversight of escalations via the Test, Trace and Protect (TTP) process and management of Clinical Lead and HPOs	0.5
1 Commercial Services Officer	Dealing with escalated referrals from TTP as a Clinical Lead	1.0
3 Health Protection Officers	Dealing with escalated referrals from TTP	3.0

The SRS recovery plan also factors in additional resilience to support the TTP escalation process from 5 Health Protection Officers and 2 part-time Environmental Health students. These posts will be distributed across Commercial Services to support wider work being undertaken by SRS in the first instance, but can be rapidly integrated into the TTP support mechanism as needed.

## 2.5 Staff Development and Competency

Shared Regulatory Service's approach to managing the competency of its employees is through the Workforce Development Plan which provides a structure for developing staff to ensure the right mix of experience, knowledge and skills, and to ensure we get the right number of the right people in the right place at the right time.

The Workforce Development Plan provides a framework to blend:-

- Organisational culture
- Leadership and management
- Core skills
- Recruitment, retention and progression
- Communication and employee engagement
- Employee performance management

To improve business resilience, and bolster the competency of staff in the Communicable Disease, Health and Safety Team, a number of additional Officers were up-skilled during 2019 so that they are now competent using the Tarian database and confident interviewing confirmed cases of illness. All new staff members into the Communicable Disease, Health and Safety Team are now routinely trained in the use of Tarian when they join SRS. This in-house training has, and continues to be, enhanced by Lead Officer and Support Lead Officer training courses as they become available from Public Health Wales.

Workforce development is enhanced through annual performance reviews where the Team Manager identifies personal objectives for each member of the team and assesses training needs for the year ahead. This management tool is further supported by periodic team meetings and regular team contact (*face-to-face discussions; Email communications; on-line TEAMS meetings and telephone calls*).

Professional Development (CPD) is actively encouraged and Officers continue to be offered the opportunity to attend a wide range of training courses and webinars, seminars, meetings and briefings to help maintain competency and improve technical, legal and administrative knowledge. Authorised officers are expected to achieve at least 20 hours of CPD each year, or at least 30 hours of CPD if a Chartered Member of the Chartered Institute of Environmental Health.

Officers within the Communicable Disease, Health & Safety Team additionally have access to the technical support and expertise of the local CCDC (Consultant in Communicable Disease Control) and Health Protection Team (AWARe) in Public Health Wales, particularly when dealing with outbreaks and clusters of communicable disease, and complex conditions that have a significant impact on the wider community (such as TB; COVID-19).

Lead Officers regularly attend regional communicable disease task group meetings and the all-Wales Expert Panel for Communicable Disease meetings.

The Service ensures that competency is secured by appointing appropriately qualified and experienced personnel to carry out the communicable disease function. There are specific job

descriptions and person specifications for all employees of Shared Regulatory Services and all appointments are made in accordance with the procedures for recruitment and selection.

## 2.6 Challenges for the year ahead

**Staffing of the service** – The incredible efforts of SRS staff throughout the COVID-19 pandemic over the last 2 years impacted the team greatly. Expectations of service delivery for the immediate future will need to recognise this as SRS looks to instigate its recovery plan.

The service continues to manage staff vacancies and the last year has seen a significant number of staff changes as colleagues retired, moved onto new challenges and temporary contracts came to a natural end. The forthcoming year will see new team members settling into their roles and for less experienced staff to develop their competency in the various aspects of the communicable disease service.

**Delivering the SRS in the future** - We continue to deliver the SRS with a reducing resource. We have to examine and introduce new ways of prioritising our services which may result in a reduction in service provision, or the charging for some services and difficult decisions about the level of service provision. These efforts will help reduce the impact of reduced funding, but maintaining performance in light of budget cuts may affect the service ability to maintain delivery at existing performance levels. We will however seek to measure activities and outcomes to ensure performance is managed effectively and in a meaningful way.

**Challenges presented by rare, emerging and re-emerging pathogens** - The service continues to be presented, both nationally and locally, with challenges associated with rare, emerging and re-emerging pathogens.

**COVID-19** – The trajectory of COVID-19 case rates for Autumn/Winter 2022/23 remains unclear but it is highly probable that other Variants of Concern will emerge and rapidly circulate throughout households and communities, particularly as restrictions on national and international travel are removed. It remains to be seen if the UK population will continue to ‘live with COVID’ and experience less severe health consequences as a result of the successful vaccination programme roll out. If the service is required to support external stakeholders navigate a period of escalating case numbers, this may impact the delivery of the planned interventions detailed in this report, even with the recovery plan factoring in a level of resilience for the rapid re-deployment of resource to support Test, Trace and Protect services.

**Salmonella** – The service has seen an increase in the number of reported confirmed Salmonella cases during 2021, particularly in the Cardiff area. Whilst this increase can be attributed to the cluster of cases from the Eid BBQ gathering in July 2021, a number of other samples from unlinked cases have produced genetically identical microbiological results. At the current time it remains unclear if this growth in case numbers can be attributed to handling practices in the home; hygiene practices at retail outlets; hygiene practices further back in the food chain; or other risk factors such as the increase in popularity of feeding domestic animals raw pet food. Officers from SRS continue to support stakeholders (*Public Health Wales; Food Standards Agency; APHA*) investigate potential sources of infection and disseminate key hygiene messages to communities in the region regarding high risk practices such as the washing of raw meat and consumption of raw offal products.

**Monkeypox** – During May 2022 the UK experienced the start of an outbreak of Monkeypox cases; a virus usually associated with West and Central Africa. The source of infection is commonly through contact with infected rodents; consuming undercooked meat from infected animals; or contact with other products from infected animals. Monkeypox is also transmissible from person-to-person through direct contact with skin blisters/scabs; contact with contaminated bedding, clothing and towels; or exposure to coughs/sneezes from a case with the Monkeypox rash. Whilst the illness is generally mild and self-limiting, it does require a case to self-isolate for 21 days. A significant proportion of cases linked to the outbreak are men who have sex with men (MSM), highlighting that sexual contact is a clear mode of transmission.

Whilst Public Health Wales is currently managing current cases in Wales, it is possible that Local Authorities will be called upon to assist with case interviews and contact tracing should case numbers significantly escalate. This will require additional training, and the provision of robust guidance, for Lead Officers for communicable disease.

**Refugees and re-settlers** – Whilst recent international humanitarian emergencies have enabled SRS to welcome, and support, refugees and re-settlers into the region, it has necessitated the introduction of measures to ensure that diseases endemic in other countries are not introduced in the UK. This is particularly poignant for the importation of pets by refugees from countries where Rabies, tick and tapeworm infections, and conditions such as *Brucella canis* are prevalent.

Many re-settlers and refugees are also re-locating from conditions with limited sanitation; poor access to clean food and water; and over-crowded conditions. This could result in an increase of reported cases of Giardiasis; Tuberculosis and Shigella across the region that will require the service to formally exclude cases from school or work until medical clearance has been achieved; support the funding of cases to remain off work if they are required to undergo prolonged and complex medical treatment; and potentially ensure risks to public health are mitigated through the 'request to co-operate' and Part 2A Order mechanisms.

**New legislation** - It is now predicted that implementation of the all-Wales licensing regime for special procedures (*tattooing, cosmetic piercing, acupuncture and electrolysis*) in accordance with the Public Health (Wales) Act 2017 will be delayed until mid-2023 / 2024 as a consequence of the COVID-19 pandemic.

This licensing regime will replace the existing registration scheme with a more robust system that will require a personal licence and premises approval to be renewed at 3 yearly intervals. Each applicant will be required to complete a level 2 infection control training course, and professional assessment, before a licence can be issued. The full impact of this new regulatory regime on resources has yet to be determined; however, officers will need to deliver the level 2 infection control course; carry out professional assessments with practitioners and undertake unannounced inspections at all premises subject to approval at least every 3 years. Whilst costs will be recoverable, at the present time it is challenging to forecast how current resources will be able to match the demands of this piece of work until further details are made available by Welsh Government.

Since SRS has the largest number of registered skin piercing practitioners and premises throughout all of the Welsh Authorities, it will likely experience the greatest impact from this new legislative regime.

Part 3 of the Public Health (Wales) Act 2017 enacted the Smoke-Free Premises and Vehicles (Wales) Regulations 2020 which came into force on 1<sup>st</sup> March 2021. The legislation widens the range of smoke-free premises to include outdoor care settings for children; school grounds; hospital grounds and public playgrounds. SRS has already been in discussion with Local Health Board partners concerning smoke-free strategies in hospital settings across the region, with officers currently identifying what interventions can be realistically effected to positively impact the level of compliance.

**Cardiff's City Status** - Cardiff is the capital city of Wales, and the largest Local Authority in the country; its population of 370,000 swelling by approximately 70,000 each day from commuters, students and visitors. The popularity of the city as a leisure, entertainment and sporting event destination continues to grow and it's anticipated that visitor numbers throughout 2022/23 will significantly increase as COVID-19 restrictions become fully removed.

**Cost of living crisis** – The cost of living crisis currently being experienced across the UK will inevitably impact the health of our nation and exacerbate inequalities in health. As household finances become squeezed, the opportunity to maintain a healthy diet and lifestyle will become more challenging for a larger number of households across the SRS region, potentially impacting life opportunities for future generations.

Financial pressures on the commercial sector could also create an increase in illicit activities (*e.g. food fraud; supply and sale of illegal tobacco; substitution of ingredients that are cheaper*) that could negatively impact the health and safety of our communities. This could cause a significant increase in the number of confirmed cases of illness; complaints and accidents being reported to SRS in the short to mid-term.

## 2.7 Action Plan 2022/2023

The following action plan is evidence based and has been developed for 2022/2023 and outlines how through reactive and proactive work the Service will:

1. Improve health and well being
2. Safeguard the vulnerable
3. Support the local economy and
4. Maximise the use of resources

The Communicable Disease and Health Protection Service also contributes to the Section 18 Health and Safety Enforcement Plan, and the Food Law Enforcement Plan, and details of this contribution are contained within those respective documents.

## Communicable Disease Action Plan 2022/2023

Relevant Strategic Priorities	Objective
	Investigate and control sporadic and outbreak notifications of communicable disease and undertake public health interventions to prevent increased incidence of illness and minimise onward transmission
1, 2, 3, 4	<b>Q1</b> Commence work on the Communicable Disease service plan for 2022/2023.
1, 2, 3	Undertake timely investigations of sporadic cases of communicable disease; outbreaks and suspected food poisonings, and apply appropriate control and preventative measures.
1, 2, 3	Continue to support businesses and legacy authorities across SRS with infection control training and advice during outbreaks.
1, 2, 4	Actively support the regional Test, Track and Protect regional response where required.
1, 2, 4	Complete the desk top review of legionella management controls in privately operated residential care homes to identify high risk settings that require a more focused intervention.
1, 3, 4	Complete a mail shot to hospitality businesses selling shisha, or with designated smoking areas, to confirm requirements of the current smoke-free legislation (2020 Regulations)
1, 2, 4	Contact C&V and CTM Health Boards to review their smoking policies and identify strategies used to communicate key messages to staff and visitors who access their hospital sites across the SRS region.
1, 2, 3, 4	Prepare the service for the introduction of the special procedures licensing scheme outlined in Part 4 of the Public Health (Wales) Act 2017.
1, 2, 3, 4	<b>Q2</b> Complete the Communicable Disease service plan for 2022/2023.
1, 2, 3	Undertake timely investigations of sporadic cases of communicable disease; outbreaks and suspected food poisonings, and apply appropriate control and preventative measures.
1, 2, 3	Continue to support businesses and legacy authorities across SRS with infection control training and advice during outbreaks.
1, 2, 4	Actively support the regional Test, Track and Protect programme where required.
1, 2, 4	Agree an achievable and proportionate joint approach with C&V and CTM Health Boards for the enforcement of smoke-free requirements at their hospital sites, and commence site visits to assess levels of non-compliance.
1, 2, 3, 4	Prepare the service for the introduction of the special procedures licensing scheme outlined in Part 4 of the Public Health (Wales) Act 2017.
1	Commence proactive intervention to assess how the risk of Legionella is being managed in premises displaying/using hot tubs and spas across the SRS region.



1, 2, 3	Q3	Undertake timely investigations of sporadic cases of communicable disease; outbreaks and suspected food poisonings, and apply appropriate control and preventative measures.
1, 2, 3		Continue to support businesses and legacy authorities across SRS with infection control training and advice during outbreaks.
1, 2, 4		Actively support the regional Test, Track and Protect programme where required.
1, 2		Carry out unannounced visits to monitor compliance with smoke-free legislation in shisha lounges across the SRS region.
1, 2		Carry out monitoring visits to hospital sites across C&V and CTM health board areas.
1, 2, 3, 4		Prepare the service for the introduction of the special procedures licensing scheme outlined in Part 4 of the Public Health (Wales) Act 2017.
1		Complete proactive intervention to assess how the risk of Legionella is being managed in premises displaying/using hot tubs and spas across the SRS region.
1,2, 3		Provide infection control advice to operators of indoor soft play facilities.
1, 2, 3	Q4	Undertake timely investigations of sporadic cases of communicable disease; outbreaks and suspected food poisonings, and apply appropriate control and preventative measures.
1,2, 3		Continue to support businesses and legacy authorities across SRS with infection control training and advice during outbreaks.
1, 2, 4		Actively support the regional Test, Track and Protect programme where required.
1, 2		Carry out unannounced visits to monitor compliance with smoke-free legislation in shisha lounges across the SRS region.
1, 2		Carry out monitoring visits to hospital sites across C&V and CTM health board areas.
1, 2, 3, 4		Prepare the service for the introduction of the special procedures licensing scheme outlined in Part 4 of the Public Health (Wales) Act 2017.
1, 2, 3		Provide infection control advice to operators of indoor soft play facilities.

## 3. Service Delivery and Performance 2021/22

### 3.1 Introduction

The Communicable Disease Service is supported by an active surveillance system managed through the national database, Tarian, which is utilised by all Welsh Local Authorities and Public Health Wales. All information pertaining to communicable disease incidents (*e.g. Norovirus issues in a school or residential care setting*); sporadic cases of notifiable illness and outbreaks are logged on Tarian. Since its introduction Tarian has facilitated more effective communication

between stakeholders; supports effective case management; enables early detection of outbreaks and enabled the Authority to more readily identify trends in infectious disease cases.

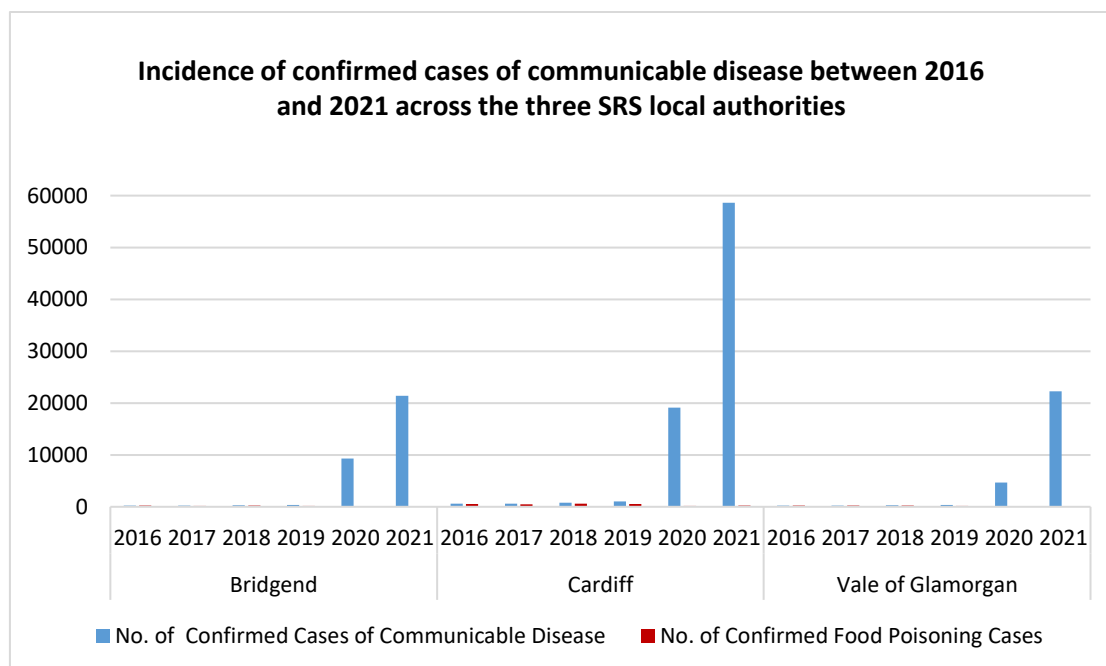
In 2021, 102,562 cases of communicable disease were notified to SRS. Lab confirmed cases accounted for 99.7% of these (102,272 cases), whilst unconfirmed (suspected) food poisoning accounted for only 0.3% (290 cases). When compared to previous years, this is a huge increase. In 2020 there were 33,297 cases, of which 33,108 (99%) were laboratory confirmed, in 2019 there were 2149 cases, of which 1786 (83%) were laboratory confirmed and in 2018, there were 1707 cases, of which 1389 (81%) were laboratory confirmed. The dramatic increase in cases that can be seen in 2020 and 2021 is a result of positive cases of COVID-19 that were reported to SRS during the COVID-19 pandemic.

The table below shows the number of cases of confirmed and unconfirmed communicable diseases per local authority within SRS.

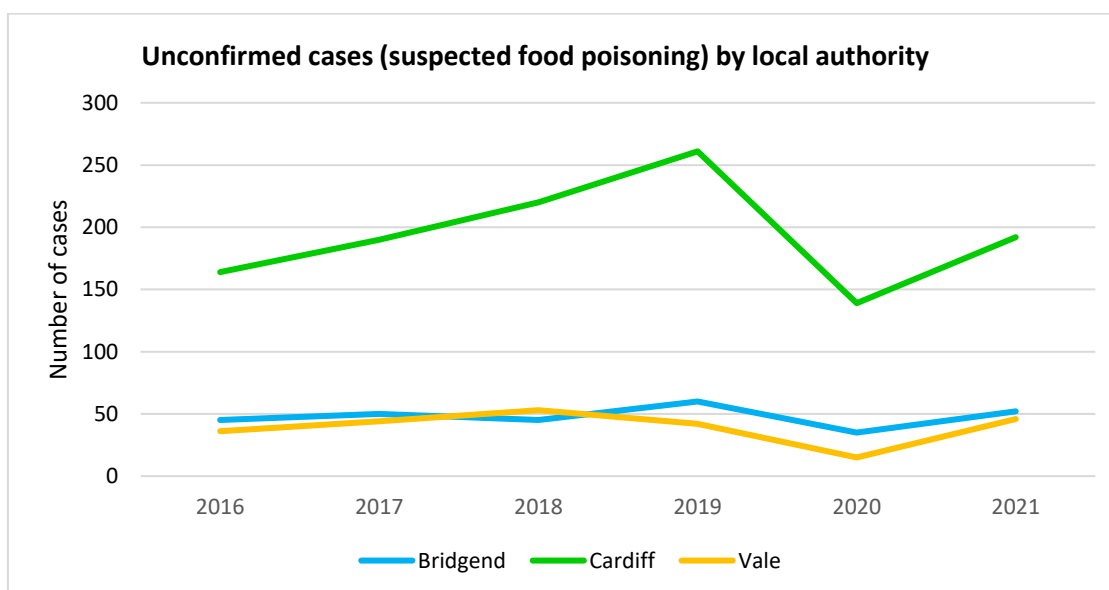
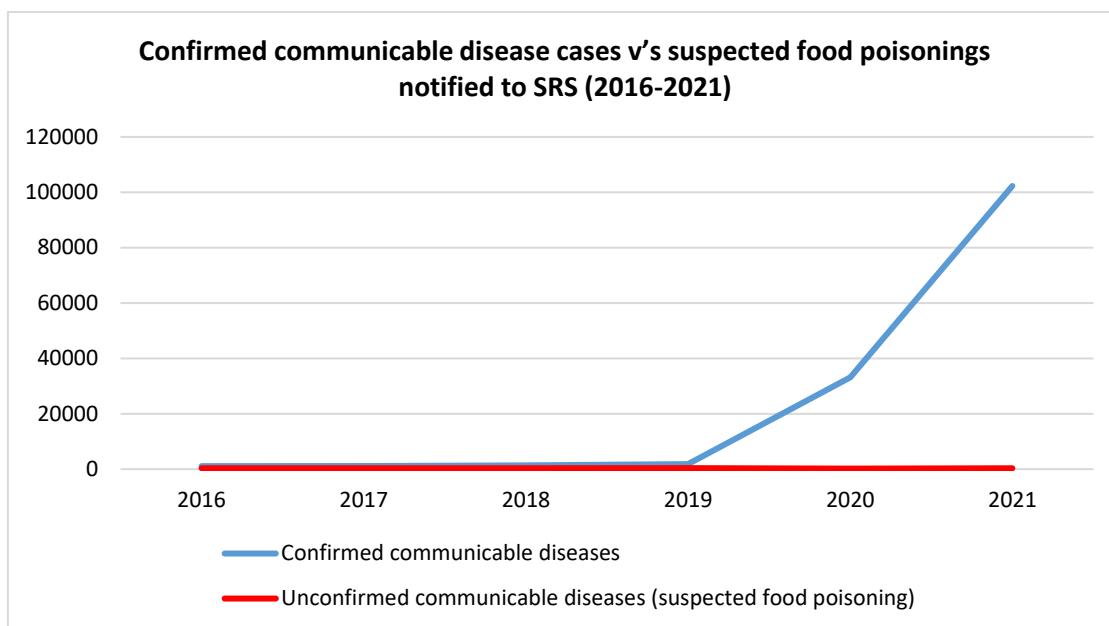
	<b>Confirmed (CFP<sup>1</sup>)</b>	<b>Unconfirmed</b>	<b>Total</b>
<b>Bridgend</b>	21427 (102)	52	21479
<b>Cardiff</b>	58603 (223)	192	58795
<b>Vale of Glamorgan</b>	22242 (73)	46	22288
<b>Total</b>	<b>102272 (398)</b>	<b>290</b>	<b>102562</b>

CFP<sup>1</sup> = Confirmed food poisoning as applied in the 'Disease' tab in Tarian

The graph below illustrates the incidence of notified cases of communicable disease across Bridgend, Cardiff and Vale of Glamorgan between 2016 and 2021. The introduction of PCR testing in the microbiology laboratories since June 2018 has resulted in an upward trend in cases, however, the substantial increase in case number throughout 2020 and 2021 is due to the large number of COVID-19 cases reported across the region.



Confirmed food poisoning cases = as applied in the 'Disease' tab in Tarian.



The graphs above illustrate that the reporting of confirmed cases of communicable disease across SRS continued to remain high in 2021 as a direct result of the COVID-19 pandemic and the emergence of several Variants of Concern (VOC). Peaks in case numbers were observed in January 2021 due to rapid spread of the Beta VOC which saw schools closed until after the February half term. Wave 3 of the pandemic started in June 2021 following the identification of the original Delta VOC, and its subsequent mutations, which were more transmissible than previous incarnations of the COVID-19 virus. December 2021 until March 2022 saw a further rapid upsurge in confirmed case numbers due to the emergence of the Omicron VOC. Whilst the rollout of the successful COVID-19 vaccination programme throughout 2021 resulted in fewer deaths and hospitalisations, a relaxation of restrictions; increase in national, and international, travel; and increased transmissibility of the emerging VOC contributed to the rapid

spread of COVID-19 across communities and in households. Further details on COVID case numbers will be illustrated later on in this report.

In 2021 the unconfirmed (suspected) food poisoning cases began to rise again and reached levels previously seen in 2017 and 2018. The nature of these cases usually involves a complainant visiting a commercial food business and subsequently alleging that business has caused them illness. This increase in reported complaints was not unexpected as 2021 saw the roll-out of the COVID-19 mass vaccination programme and the relaxation of COVID restrictions during the summer months which enabled customers to eat out more frequently.

## 3.2 Performance activities

The investigation of confirmed sporadic and outbreak cases of communicable disease require a reactive service and our performance indicator therefore reflects this by measuring response times to notifications.

### Sporadic cases

The Notification Guidance ('expert rules') made under the Health Protection (Notification) (Wales) Regulations 2010 dictates the response times required to be taken by Local Authorities investigating cases of communicable disease. All cases of confirmed communicable disease notified to SRS are responded to and every effort is made to undertake a full investigation by carrying out case interviews. The target response time for contacting the case is dependent on the public health significance of the pathogen concerned; as detailed in the table below.

#### L.A. target response times for common communicable disease pathogens

Pathogen	Response time
Campylobacter	Within 48 hours (unless part of a cluster or outbreak)
Cryptosporidium	Within 24 hours (same day if an outbreak)
Giardia	Within 24 hours (same day if part of an outbreak)
Salmonella spp.	Within 24 hours (same day if part of an outbreak, or case is a food handler/works in a closed community such as a care home) Salmonella typhoid or paratyphoid – Within 4 hours
E. coli O157	Within 4 hours
Hepatitis A	Within 4 hours
Hepatitis E	Within 48 hours
Shigella	Shigella sonnei – Within 24 hours; other Shigella sp. - Within 4 hours
Legionella spp.	Within 4 hours

*Response times were reviewed in October 2018*

A review of the response rates of cases (% of notified cases that were interviewed) across the 3 local authorities for Campylobacter were reviewed and compared to the previous 4 years.

#### Campylobacter response rates 2021 (2020 figures shown in red as a comparison)

	Bridgend	Cardiff	Vale	SRS Total
Cases interviewed	165 (153)	344 (315)	137 (126)	646 (594)
Total cases	258 (183)	526 (413)	196 (163)	980 (759)
Response rate	64% (84%)	65% (76%)	70% (77%)	66% (78%)

## A comparison of response rates from 2017 to 2021

	2021	2020	2019	2018	2017
<b>Bridgend</b>	64%	84%	86%	92%	96%
<b>Cardiff</b>	65%	76%	86%	91%	93%
<b>Vale</b>	70%	77%	88%	92%	97%
<b>SRS</b>	<b>66%</b>	<b>78%</b>	<b>87%</b>	<b>91%</b>	<b>95%</b>

The response rate for Campylobacter cases continued to fall again in 2021 and reflected the gradual declining trend in response rate over the last 5 years. Throughout 2021 Officers in the Communicable Disease, Health and Safety Team continued to prioritise COVID-19 work across the care and homeless sectors alongside key substantive duties. Due to capacity constraints this resulted in Campylobacter cases being sent advice sheets and postal questionnaires in place of a telephone interview. As a methodology for data capture, postal questionnaires return a lower response rate to telephone surveys which has contributed to the lower response rate seen throughout 2020-2021 (*BMC Medical Research Methodology, August 2012 – telephone survey response rate 30.2%; personalised postal questionnaire response rate 10.5%*).

It should be noted that 2021 saw the highest number of Campylobacter cases reported to SRS over the last 10 years.

## Confirmed Cases of Communicable Disease

The following table details the incidence of confirmed cases of communicable disease across SRS between 2017 and 2021

	BRIDGEND					CARDIFF					VALE OF GLAMORGAN				
	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021	2017	2018	2019	2020	2021
<b>Campylobacter</b>	164	198	187	183	258	400	491	576	413	526	177	174	191	163	196
<b>Salmonella</b>	23	22	13	13	10	50	56	54	14	64	27	11	17	6	7
<b>Cryptosporidium</b>	5	11	17	7	6	22	35	52	37	20	11	17	9	15	10
<b>Giardia</b>	0	23	28	11	13	34	41	69	35	50	5	12	36	11	19
<b>E. coli O157</b>	1	0	2	3	3	1	0	4	1	3	1	0	0	1	4
<b>E. coli non O157*</b>		16	24	10	20		27	46	21	28		6	18	10	8
<b>Hepatitis E</b>	2	2	5	1	0	5	5	3	1	2	3	2	2	1	1
<b>Hepatitis A</b>	0	3	0	0	1	5	2	1	4	1	1	1	7	1	0
<b>Listeria</b>	1	0	1	1	0	1	0	1	2	1	0	0	0	0	0
<b>Legionella</b>	3	2	3	3	4	4	3	8	2	4	2	8	5	3	2
<b>Shigella</b>	1	2	1	0	3	4	12	15	3	3	0	7	4	3	0
<b>COVID-19 **</b>				9021	21066				18530	57822				4461	21967
<b>Other</b>	11	43	98	29	42	81	118	201	58	81	25	39	88	30	32
<b>Total</b>	<b>211</b>	<b>322</b>	<b>379</b>	<b>9282</b>	<b>21426</b>	<b>607</b>	<b>790</b>	<b>1030</b>	<b>19121</b>	<b>58605</b>	<b>252</b>	<b>277</b>	<b>377</b>	<b>4705</b>	<b>22246</b>

\*June/July 2018 onwards (due to changes in laboratory testing methods this is now being reported to SRS)

\*\* May 2020 onwards COVID-19 cases were reported to SRS

NB. 'Other' includes Entamoeba histolytica/dispar, Borrelia burgdorferi (Lyme disease), Leptospira, Vibrio cholera, Taenia, Cyclospora, Clostridium perfringens, Mycobacterium chelonae and Norovirus. In 2021, diseases in 'Other' include Norovirus, Borrelia burgdorferi Clostridium perfringens and Brucella.

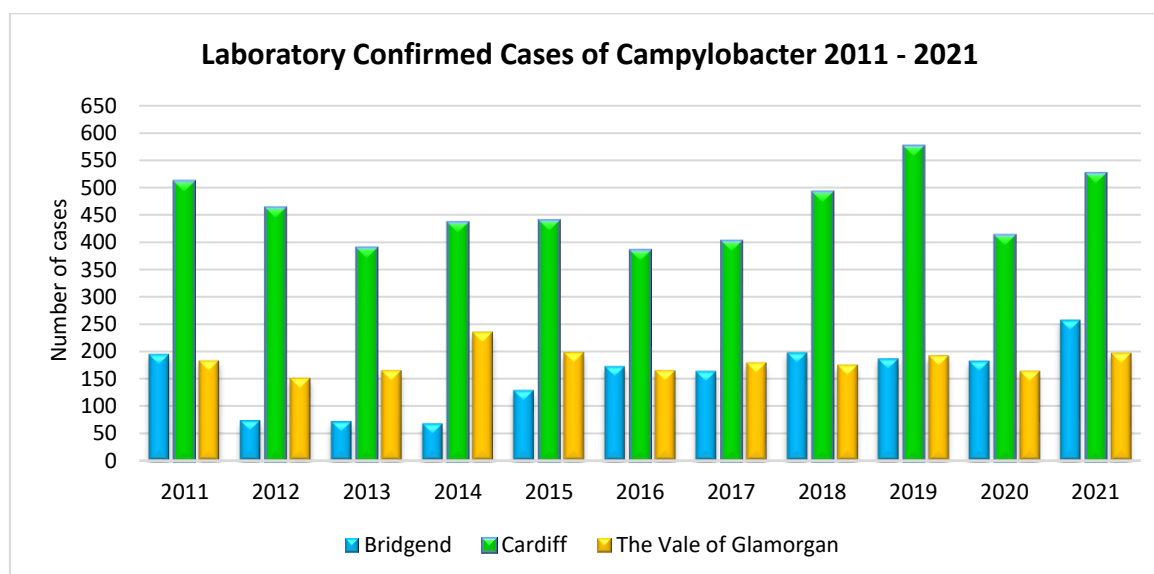
## Campylobacter Infection

The incidence of Campylobacter infection throughout SRS far exceeds other notifiable diseases (with the exception of COVID-19), as illustrated in the previous table, which reflects the national trend observed across the UK. The reason for such high numbers of cases is the wide range of risk factors associated with Campylobacter, including: foreign travel; consumption of undercooked poultry and poultry offal (*i.e. 'pink' chicken livers*); consumption of unpasteurised dairy products; consumption of contaminated drinking or leisure water; contact with animals/birds and their faeces; domestic sewerage problems and close contact with an infected person (*i.e. changing nappies of an infected child*) and subsequent poor hand hygiene. Campylobacter also has a low infective dose, meaning a person only has to ingest very small quantities to induce illness.

More recently identified risk factors associated with cases of Campylobacter have included: cross-contamination associated with the growing popularity of feeding pets a raw meat diet; the accidental consumption of raw/part-cooked chicken products and the practice of washing raw chicken packaging for recycling (*where the bacteria becomes splashed onto adjacent surfaces and subsequently transferred onto hands, ready-to-eat foods or other equipment*).

Campylobacter remains an important public health risk. The pathogen has multiple risk factors in addition to having a low infective dose, meaning that a person only needs to be exposed to a small amount of the bacteria to become ill. It is therefore critical that the communicable disease service retains the requisite level of resource to be able to effectively investigate all confirmed cases in a timely manner.

Reported cases of Campylobacter from 2011 to 2021 are detailed in the following graph.



Last year saw the highest number of Campylobacter cases being reported to SRS since the 3 local authorities merged into a shared service in 2015. As a whole, SRS received **980 confirmed cases of Campylobacter in 2021** compared with 759 in 2020; 954 in 2019; 863 in 2018; 741 in 2017

and 722 in 2016. This resumes the upward trend that was observed before the start of the COVID-19 pandemic, which was anticipated because of the following factors:

- More symptomatic cases were able to present to their GP in person and submit faecal samples in 2021;
- Relaxed restrictions on national and international travel significantly increased the movement of households and communities;
- More people eating at commercial food premises as COVID-19 restrictions relaxed;
- Public perception that hand hygiene was less important after receiving COVID-19 vaccination removed the protection in place for other communicable diseases.

This general, year-on-year, increase is not unique to the UK. Some studies have linked weather and climate factors (particularly increases in temperature and precipitation) to an increased prevalence of *Campylobacter* cases. Other suggested casual factors have included levels of infection in poultry; changing populations; changing exposure patterns and microbial features such as antimicrobial resistance (K. Khun *et al.*, 2020).

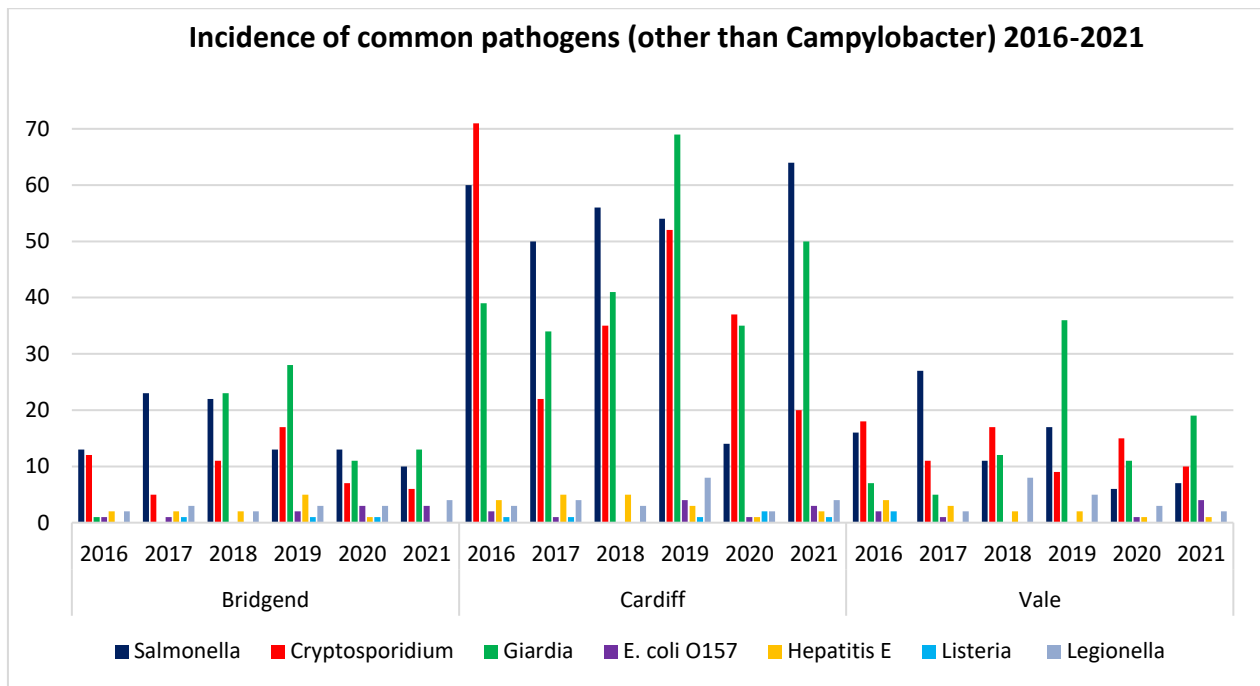
### **Pathogens of Public Health Significance Investigated by SRS**

Pathogens of public health significance (other than *Campylobacter*) commonly require more detailed investigation; either because the pathogen can be more readily spread throughout households and the wider community, or because of the seriousness of the infection. The need to complete enhanced interview questionnaires to identify close contacts of a case; determine potential sources of infection and potentially instigate wider public health interventions is particularly true for pathogens such as: *Shigella*; Hepatitis A; *E.coli* O157; *Legionella*; *Giardia* and *Listeria*.

*e.g. Vaccination of close contacts of Hepatitis A cases; Ensuring confirmed cases of Giardiasis receive appropriate antibiotic treatment from their GP; Ensuring confirmed cases working with food or vulnerable people only return to work after satisfying the relevant microbiological clearance requirements; Liaison with other relevant stakeholders to identify contaminated foodstuff on the market.*

Contrary to the general public perception, most communicable diseases are not necessarily caused from consuming contaminated food; despite the case having traditional 'food poisoning' symptoms. Risk factors are often associated with the consumption of (or exposure to) contaminated water; direct contact with animals and/or their faeces; close contact with an infected person (including sexual contact).

The graph below illustrates the incidence of common pathogens (other than *Campylobacter*) that have caused illness across SRS between 2016 and 2021.



Compared to previous years, SRS observed a decrease in the number of reported Salmonella cases in Bridgend and Vale of Glamorgan during 2021. Cardiff, however, experienced an increase in confirmed cases during 2021 which was largely attributed to an outbreak of Salmonella typhimurium following an Eid celebration gathering within the Sudanese community. Further information about this will be discussed in Section 3.3 of this report.

A decline in reported cases of confirmed Cryptosporidium was also seen in 2021, but that may be an artefact of the COVID-19 pandemic (e.g. swimming pools not used as frequently; hygiene measures in place; decrease in visitor numbers to animal handling establishments), or positive outcome of Officer visits to open farm/animal handling and petting establishments between June and September 2021 to ensure the robust implementation of adequate hygiene and infection control measures.

An increase in reported Giardia cases was observed in 2021, a number of which related to endemic infection in Afghan re-settlers who had recently been housed in the SRS region.

Reporting levels for 2021 for the remaining pathogens on the previous graph remained largely stable.

Officers were also required to investigate some significant, but less commonly reported, cases of communicable disease during 2021. Of note this included a case of Brucellosis associated with travel to India and consumption of unpasteurised milk, and 2 confirmed cases of Legionella longbeachae which is often associated with contact with compost.

## COVID-19 Virus (SARS-CoV-2)

Throughout 2021 SRS continued to support the Test, Trace Protect (TTP) regional response for managing cases and contacts of COVID-19 across the Cardiff & Vale and Cwm Taff Morgannwg Health Board areas. For Officers in the Communicable Disease, Health and Safety Team focus was on positive cases, and their contacts, in early years and school settings between January and



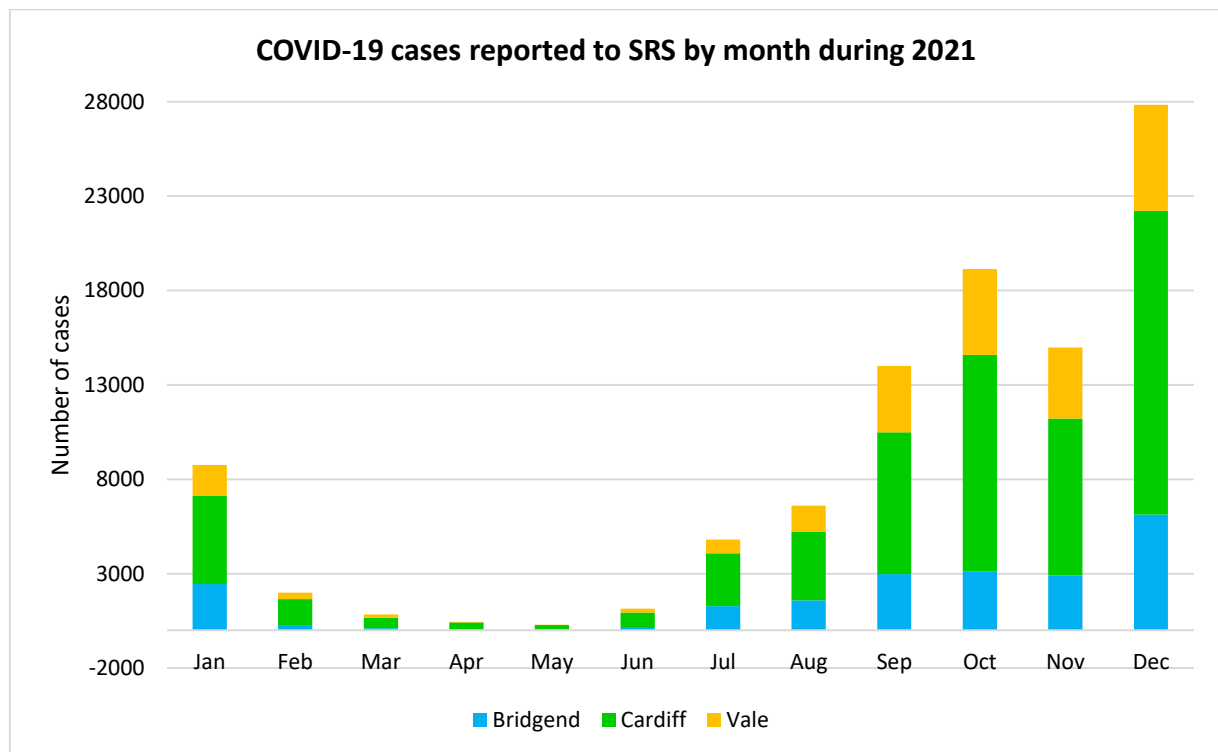
April 2021. From April 2021 onwards the team prioritised cases in care homes, supported living settings, domiciliary care provision and the homeless sector.

Following up confirmed cases of COVID-19 in other healthcare settings, workplaces and returning travellers was the remit of the Clinical Lead team which comprised of Environmental Health Officer re-deployed from other teams and a number of upskilled contact tracers.

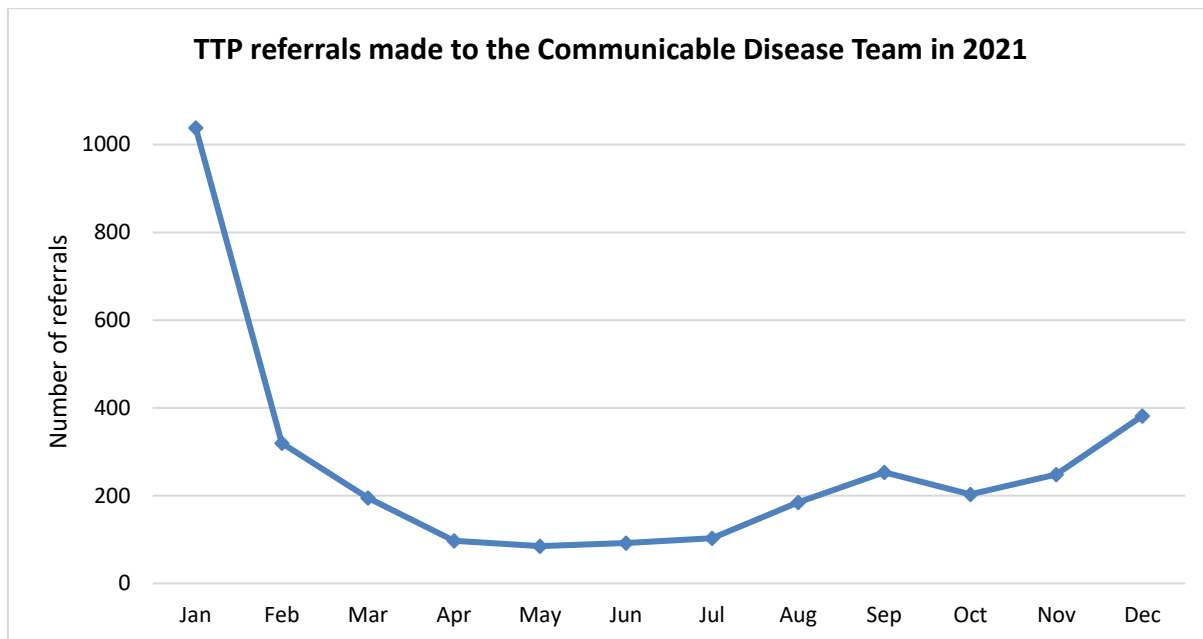
Case numbers at the beginning of the year were very high and correlated with the peak of the 2<sup>nd</sup> wave of infection (Beta/Kent variant). Cases subsequently decreased with increasing immunity and commencement of the COVID-19 vaccination programme. Further increases were observed during July which was aligned with the start of the 3<sup>rd</sup> wave of the pandemic and emergence of the Delta variant of concern. Case referrals continued to accelerate throughout the autumn period, and escalated quickly during December with the introduction of the more infectious Omicron variant in the UK. Whilst a significant proportion of cases had been fully vaccinated by the end of 2021, and were not requiring hospitalisation for severe morbidities, re-infection was becoming more commonplace.

Further details of the COVID-19 work completed by SRS is detailed in Section 3.3.

The graph below illustrates the number of COVID-19 cases reported to SRS by month.



Referrals made to the Communicable Disease service by Test, Trace and Protect (TTP) throughout 2021 are illustrated the graph below.

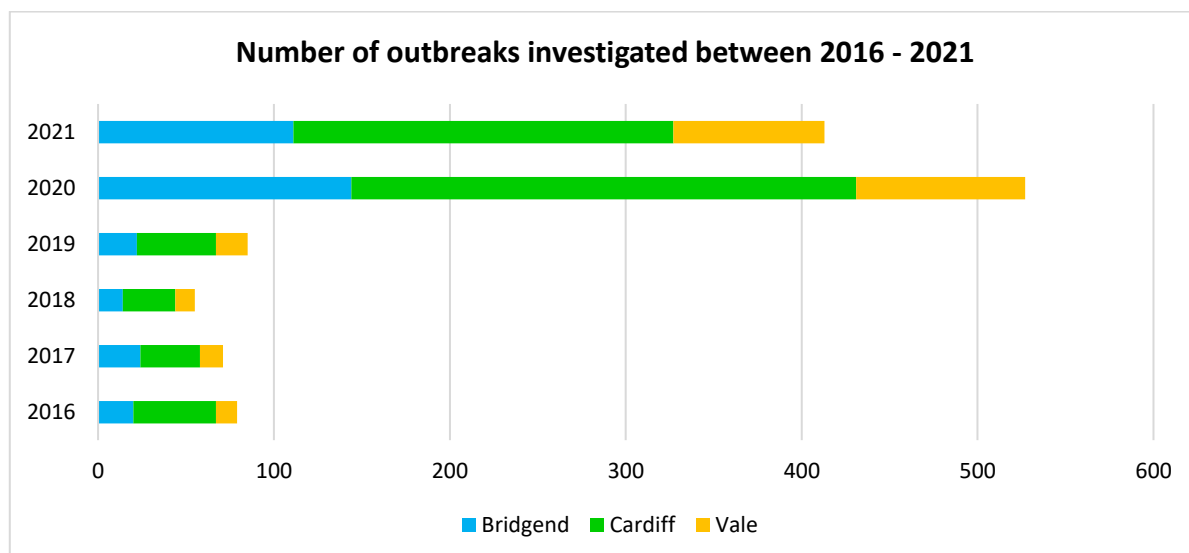


*From July 2021 numbers are reflective of cases in the Cardiff & Vale health board area only due to a change in how work was being allocated.*

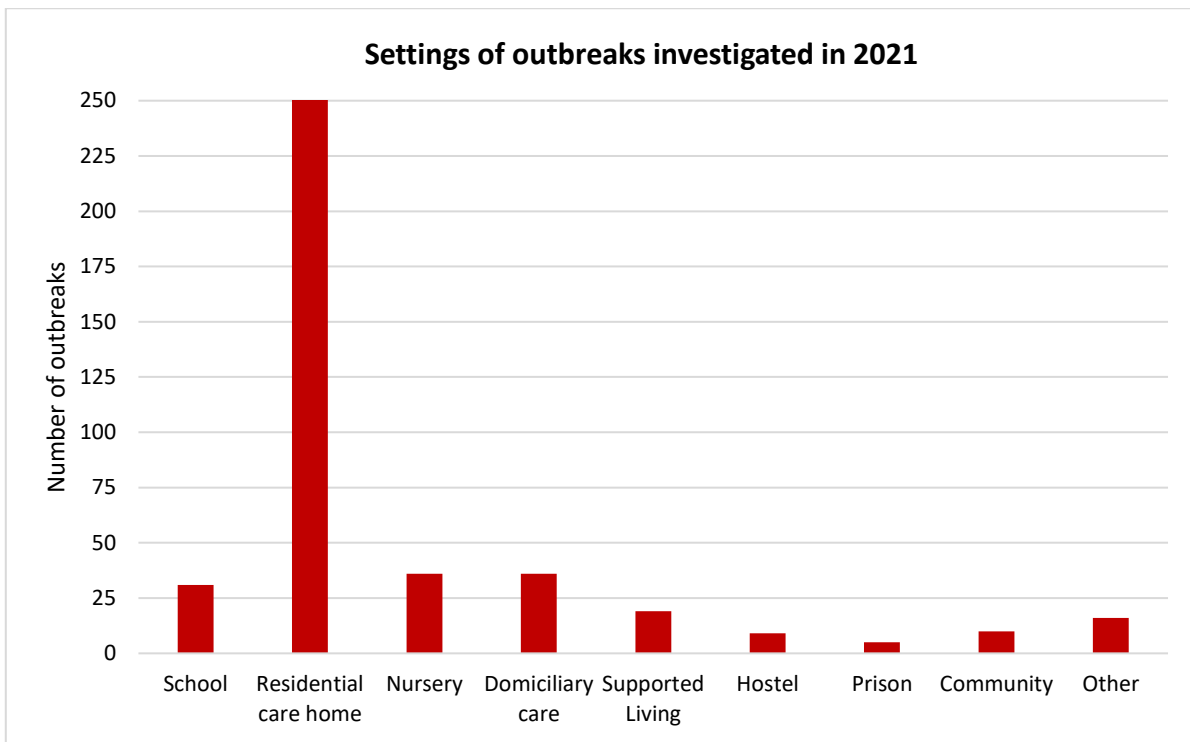
### Outbreaks in 2021

**413 outbreaks were investigated by SRS in 2021**, compared with 527 in 2020 and 85 in 2019. Unexpectedly 91% of outbreaks identified and investigated were due to COVID-19.

Just over half of the reported outbreaks were in Cardiff (216, 52%), over a quarter were in Bridgend (111, 27%) and less than a quarter were in the Vale of Glamorgan (86, 21%). The graph below compares the number and distribution of outbreaks across the SRS region between 2016 and 2021.



The type of setting where outbreaks were experienced is illustrated in the graph below.



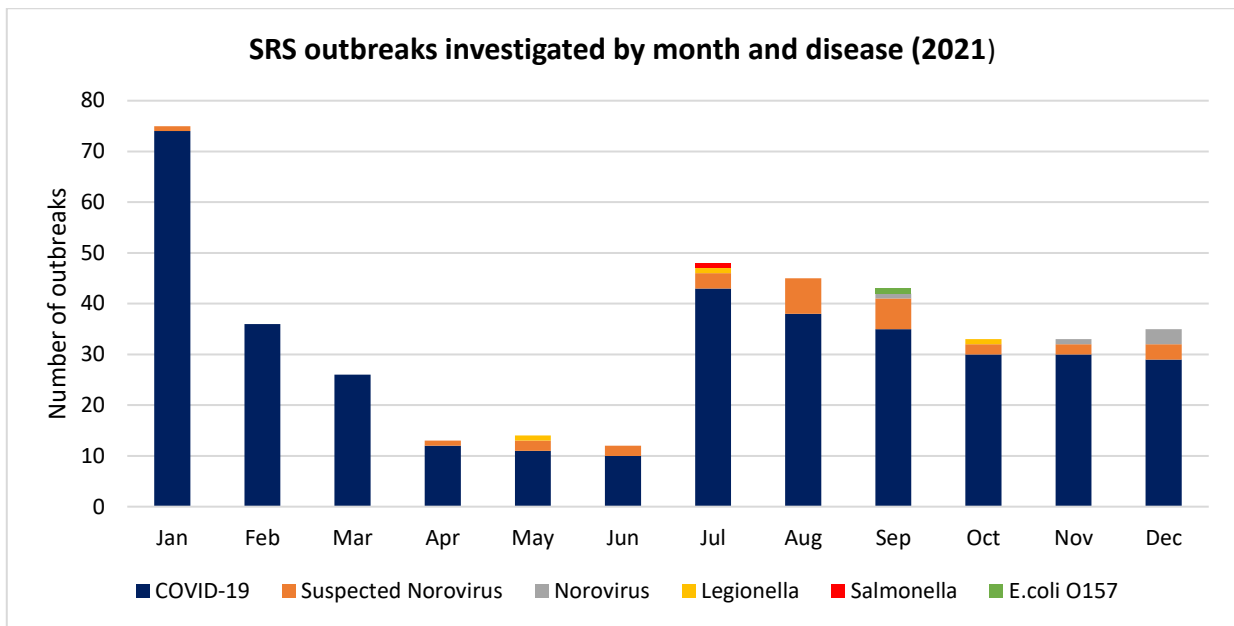
'Other' includes pubs and restaurants, day care centres, businesses, hotels and a food festival.

Unsurprisingly the largest number of outbreaks were seen in residential care home settings (251, 61%), followed by early years settings (nurseries) and domiciliary care agencies; both with 36 (9%). COVID-19 accounted for 91% (374) of all outbreaks. Suspected Norovirus accounted for 7% (29) of all outbreaks and confirmed Norovirus was responsible for 1.2% of all outbreaks (5). The remaining 5 outbreaks were confirmed as Salmonella, Legionella and E.coli O157.

The E.coli O157 incident concerned a 1 year old child who had attended nursery during his infectious period. The likely source of infection was the domestic setting; a small holding with a private water supply, dogs, cows and sheep. Sampling of the private supply returned positive results for presumptive E. coli which enabled the Officer to provide infection control advice for both the short and long-term. The case had to be formally excluded from nursery pending microbiological clearance. An additional 37 children and 1 staff member were classed as contacts and had to be screened to determine if transmission had occurred in the early years setting. The Officer also worked closely with the nursery provider and colleagues in Public Health Wales to ensure that risks to public health were being effectively mitigated.

The graph below compares the monthly outbreaks investigated by SRS throughout 2021. The increase in COVID-19 outbreaks correlates with the timings of the 2<sup>nd</sup> and 3<sup>rd</sup> waves of the virus and the key Variants of Concern circulating in the community at the time.

The number of confirmed and suspected Norovirus outbreaks increased during the second half of 2021 which coincided with a rise in overall case rates across Wales as COVID-19 restrictions progressively eased, greater levels of mixing took place and children returned to schools in September. Higher levels of Norovirus would normally be anticipated during the winter months due to higher levels of indoor mixing and poorer levels of ventilation.



Between 1<sup>st</sup> April 2021 and 31<sup>st</sup> March 2022, Lead Officers for Communicable Disease attended a total of 43 cluster/incident/outbreak meetings for a range of significant pathogens.

- COVID-19 6
- Salmonella linked to cluster at community Eid BBQ during July 2021 18
- Tuberculosis cases in a closed setting & linked cases in Gwent 9
- Legionella cases 2
- Hepatitis B case 3
- E.coli O157 case linked to early years setting 5

Further details about the Salmonella Typhimurium incident is detailed in Section 3.3 of this report.

### 3.3 Achievements & Public Health Interventions

#### Managing the Risk of Legionella in Water Systems – Improving health and wellbeing; safeguarding the vulnerable; maximise the use of resources

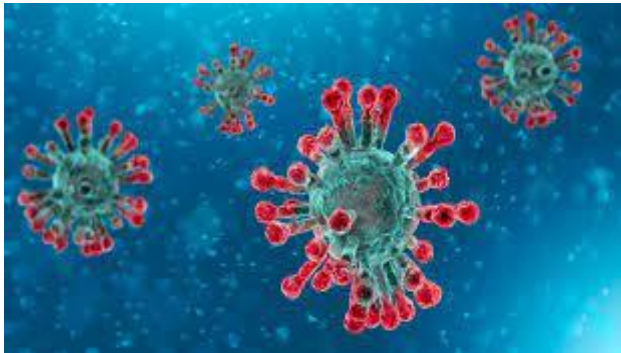


The first year of the pandemic dramatically affected care homes across the SRS region with many settings experiencing almost concurrent outbreaks of COVID-19. Not only did this impact the resilience of the substantive workforce in the care home sector, but also limited the opportunity for third party contractors to access settings for carrying out routine maintenance and cleaning; including the hot and cold water systems. Due to the vulnerability of residents in residential care homes, there was concern that the risk of respiratory illness from Legionella would significantly increase as the pandemic continued.

During 2021/22 SRS committed to undertake a desk top review of Legionella assessments; written schemes of control and monitoring records for all private residential care homes across Bridgend, Cardiff and the Vale of Glamorgan to ensure that control measures remained robust during the COVID-19 pandemic. A total of **32 desk top assessment were completed**; 10 in Bridgend, 15 in Cardiff and 7 in the Vale of Glamorgan. Where duty holders were unable to evidence the implementation of adequate control measures, Officers undertook site visits to ensure that the risk of Legionella was being effectively mitigated. In total **Officers carried out 5 site visits**; 1 in Bridgend and 4 in Cardiff. Escalated enforcement action did not need to be taken following these visits as appropriate action was instigated by the Responsible Individuals concerned.

Officers also carried out a desk top review of completed self-assessment questionnaires from 4 cooling tower operators across the Cardiff area during 2021/22 year. Only 2 of the 4 systems were operational at the time and the completed assessment forms indicated that control measures being implemented with aligned with HSE Approved Code of Practice L8 and HSE guidance HSG 274 Part 1. One of the systems had been decommissioned and was running as a dry system only whilst the remaining system had been temporarily taken out of use for refurbishment. The operator of the latter system will be followed up during the 2022/23 business year once the cooling towers are recommissioned and operational.

#### **Stakeholder Engagement – Infection Control Advice to Duty Holders during the COVID-19 Pandemic**



Shared Regulatory Services continued to support owners/operators of care facilities (including homeless accommodation) across the region during 2021/22 when confirmed or suspected cases of COVID-19 were reported. In addition to providing advice via telephone and email communications, Officers also attended multi-agency support meetings alongside PHW and local health board colleagues; Care Inspectorate Wales and Local

Authority commissioning teams for adult and children services. These forums enabled care providers to ask questions and seek advice about their IP&C measures; COVID-19 testing; visits into and out of the setting; and clarification on the in-take of new admissions or return of residents from hospital. **Between 1<sup>st</sup> April 2021 and 31<sup>st</sup> March 2022 Officers from the Communicable Disease service attended a total of 40 care home support meetings** with providers across the SRS region.

#### **Business Engagement – Nutritional Training and Healthy Options Award**



The Healthy Option Award (HOA) continues to be offered across the 3 authority areas and is administered by the Communicable Disease, Health and Safety Team.

The HOA aims to encourage food businesses to provide healthier options to customers via the introduction of healthier catering practices; increasing the amount of fruit, vegetables and starchy carbohydrates on the menu; decreasing saturated fat, sugar and salt content in the food offered. The scheme also recognises

the provision of healthy options for children; rewards staff training; and the promotion and marketing of healthier options.

Whilst visits were undertaken during the 2021/22 business year, no new awards were issued. However, businesses were able to receive advice about the scheme and the criteria that had to be met to achieve a successfully application.

Nutritional training supports the uptake and sustainment of the healthy option award in food businesses across the 3 authority areas, and consequently SRS continues to provide level 1 community food and nutritional skill training courses on request. The aim of the training is to increase knowledge and skills in food and nutrition, particularly about the components of a balanced diet and how good nutrition can influence a person's health status.

SRS is a member of, and continues to support, the Cardiff, Vale and Bridgend Healthy and Sustainable Pre-School Schemes (CHaSPS) and Gold Standards Health Snack Award advisory group. The communicable disease service provides infection control advice and support to its members as necessary, and reinforces the infection control message via attendance at events the group organises.

#### **Oversight of Exhumations in SRS.**

Between 01/04/2021 and 31/03/2022, Officers from the Communicable Disease, Health and Safety Team were required to attend **1 exhumation** across the SRS region (Vale 1). In accordance with the provisions of the Burial Act 1857, Environmental Health was notified of the exhumation, via a Ministry of Justice licence, to take any necessary actions in the interests of public health and decency. This required Officer attendance at the time of the exhumation.

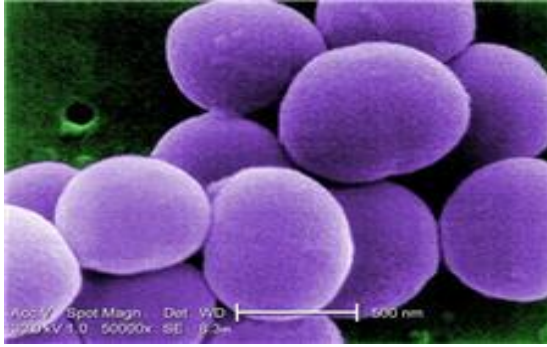
#### **Skin Piercing Registrations – Improving health and wellbeing**

Officers from the Communicable Disease, Health and Safety Team routinely carry out skin piercing registration visits, for both premises and practitioners, in accordance with the Local Government (Miscellaneous Provisions) Act 1982 and bye-laws made thereunder. The legislation requires all duty holder carrying on the business of tattooing; semi-permanent skin colouring; cosmetic body piercing; acupuncture and electrolysis to be registered with their respective Local Authority and to operate in compliance with bye-laws specifically sanctioned by that Local Authority.

These visits focus on procedural infection control provisions; assess client consultation arrangements to ensure that the risk of contraindications is minimised; and ensure that the structure of all treatment areas will facilitate effective cleaning and disinfection.



Between 01/04/2021 and 31/03/2022 Officers carried out **91 skin piercing registration visits** across SRS: Bridgend (24); Cardiff (48); Vale of Glamorgan (19).



### **Skin Piercing Activities – Investigation of a case of Staphylococcus aureus Infection**

During 2021 the team was notified of a confirmed case of Staphylococcus aureus who had been admitted to intensive care with sepsis and multi-organ failure. The locus of the infection was the lower arm which had been tattooed by a commercial artist operating in the SRS area 4 days earlier.

Staphylococcus aureus is a gram-positive, round shaped bacterium frequently found on the skin or in the upper respiratory tract. Transmission can occur through direct contact with an infected person; sharing contaminated objects; or inhaling infected droplets dispersed by sneezing or coughing. Carriers of Staphylococcus (Staph.) aureus can also contaminate food if they touch/prepare it without following adequate hand hygiene practices.

Cases of Staph. aureus can present with traditional food poisoning symptoms (diarrhoea and vomiting); mild skin infections; or the bacteria can spread through the bloodstream and infect joints, bones and organs. Whilst treatable with antibiotics, some strains of Staph. aureus do have antibiotic resistance.

Investigations confirmed that the case had completed a medical questionnaire and consent form prior to the tattoo being done and was fit and well on the day the procedure. The tattoo artist was similarly fit and well on the day and did not exhibit evidence of any cuts or wounds on the skin. Review of the tattooing procedure identified that tap water was being used in the rinse cup (instead of distilled water), but subsequent sampling did not identify the water supply to be a likely source of infection. Equipment and materials had been sourced via reputable suppliers, were pre-sterilised and within their expiry dates. Microbiological sampling of inks used on the case were not found to be a source of Staph. aureus contamination. Products and equipment used to disinfect and sterilise surfaces and equipment were found to be appropriate for use and maintained in accordance with relevant legislative requirements. Hand wash facilities were found to be appropriately maintained and suitable, and sufficient, PPE was readily available for use. In general, the practices observed (and discussed) with the practitioner, along with the condition and cleanliness of the treatment area, did not suggest that breaches of the bye-law conditions for carrying on the business of tattooing had occurred.

The practitioner could evidence what aftercare information had been provided to the case, and confirmed that no aftercare product had been supplied, however it could not be determined how robustly the case had followed the after-care advice.

### **Requests to Co-operate under Health Protection Legislation – Improving health and wellbeing; safeguarding the vulnerable**

In accordance with Regulation 8 of the Health Protection (Local Authority Powers) (Wales) Regulations 2010, Local Authorities have the power to request individuals or groups to co-operate with the Authority for health protection purposes. The 'request to co-operate' is to prevent / protect against / control / provide a public health response to an incidence or spread of infection, or contamination which presents / could present significant harm to health. From

an operational perspective this power would be used to exclude an infected person from returning to work with food or vulnerable persons (*i.e. under 5's; over 65's; immunocompromised persons*); to prevent the continuation of an activity that could result in the infection of other people; or to restrict the activities of an infected person so that the risk of spread to the wider community is controlled.

During the 2021/2022 business year, the Communicable Disease, Health and Safety Team issued **2** 'requests to co-operate' under Regulation 8: **1** was served in relation to COVID-19 where a case residing at a homeless hostel was refusing to self-isolate, and **1** confirmed case of Shigella flexneri was excluded from work as a food handler until the requisite microbiological clearance had been achieved.

### COVID-19 Enforcement Work – Improving health and wellbeing; safeguarding the vulnerable; maximise the use of resources

SRS staff continued to play a pivotal role in the monitoring and enforcement of the Health Protection (Coronavirus Restrictions) (Wales) Regulations throughout 2021/22 (including returning travellers); investigated workplace clusters of COVID-19 across the SRS region; participating in regional TTP work across 2 Local Health Board regions; and provided businesses with support and advice to ensure they were COVID-secure and operating in accordance with rapidly evolving Welsh Government legislation and guidance. **A total of 115 Premises Improvement Notices, 6 Closure Notices and 9 Compliance Notices were issued; 1517 service requests were investigated, and 5876 inspections/visits were undertaken.**

COVID Inspections and Visits	Bridgend	Cardiff	Vale of Glamorgan	Total
Inspections and visits	3514	860	1502	5876

COVID Notices	Bridgend	Cardiff	Vale of Glamorgan	Total
Premises Improvement Notice	44	45	26	115
Premises Closure Notice	0	5	1	6
Compliance Notice	0	0	9	9
<b>Totals</b>	<b>44</b>	<b>50</b>	<b>36</b>	<b>130</b>

COVID Service Requests	Bridgend	Cardiff	Vale of Glamorgan	Total
Service requests	624	365	528	1517

### COVID-19 Regional Work Supporting the Test, Trace and Protect Scheme – Improving health and wellbeing; safeguarding the vulnerable; maximise the use of resources

The Test, Trace and Protect (TTP) service in Wales was set up in each Health Board region in June 2020. During the initial waves of the COVID-19 pandemic, a significant number of staff across the Shared Regulatory Service structure were redeployed to support the regional Test, Trace and



Protect (TTP) response across 2 Local Health Board (LHB) areas. Whilst early Spring 2021 witnessed a declining number of confirmed cases of COVID-19 across the SRS region, which was reflected in the easing of Welsh Government restrictions, a significant number of factors subsequently impacted the projected delivery of the Section 18 work plan throughout the remainder of the financial year. In July 2021, Public Health Wales (PHW) ‘pulled back’ resources from the management of COVID-19 outbreaks in care homes and handed this function over to Local Authority partners. SRS had to quickly review its work plan and resources for the remainder of the year to prioritise the safeguarding of this vulnerable cohort in the community.

Whilst it was hoped that COVID-19 cases would abate as the year progressed, the Autumn and Winter months of 2021/22 saw the emergence of more transmissible Variants of Concern, namely Delta and Omicron, which caused confirmed case numbers to soar, even in fully vaccinated populations in the care sector. SRS staff continued to provide support and infection prevention and control advice to care sector settings and manage the oversight of outbreaks of COVID-19 in care homes, as a priority during this period so opportunity to complete any substantive work was very limited. **A total of 5,710 confirmed cases of COVID-19 in the care and homeless sectors were followed up during the 2021/22 business year.**



#### **Managing the Risk of Infection from Campylobacter, Cryptosporidium and E. coli at Open Farms / Animal Petting Establishments – Improving health and wellbeing; safeguarding the vulnerable**

A total of 6 visits were undertaken to open farm / animal petting establishments across the SRS region between June and September 2021 to identify how the risk of infection was being managed. Full details on this

intervention are contained within Appendix 2 of the 2022/23 Health and Safety Service Plan.

#### **Investigation of a Salmonella typhimurium Cluster in Cardiff – Improving health and wellbeing; stakeholder engagement**

Salmonellosis is characterised by acute onset of fever, abdominal pain, nausea, vomiting, and diarrhoea that can be bloody. The onset of symptoms typically occurs 6–72 hours after ingestion of food or water contaminated with Salmonella, and illness lasts 2–7 days. The majority of human infections are caused by two types of Salmonella: Typhimurium and Enteritidis. Salmonella infection is usually caused by **eating raw or undercooked meat, poultry, eggs or egg products or by drinking unpasteurised milk**. Secondary infection from person-to-person is not uncommon in households, particularly when a case is experiencing acute diarrhoea.

During July 2021 SRS was notified of a number of confirmed cases of Salmonella that had presented at UHW with severe diarrhoea; 2 of which had been admitted. All cases reported attended a community BBQ within their incubation period. A meeting was urgently arranged with the weekend consultant at Public Health Wales to establish what was known about the cases so that detailed interviews could take place to identify all possible risk factors and likely contacts during the period of infectivity.

Initial communications with cases confirmed that a number of households across the Sudanese community had arranged an informal BBQ at Bute Park to celebrate the Eid festival. All households prepared a selection of foods to be shared at the gathering, including a range of

salad dishes; home-made sauces; meat stew; desserts; fresh lamb carcasses to be cooked on the BBQ and a traditional raw liver dish. The lamb carcasses and offal had all been sourced from local halal butchers and had been washed at home prior to the BBQ. The raw liver had been washed in lemon and vinegar, and seasoned with salt, onion and green chilli for consumption in its raw state on the day of the gathering. Food was largely eaten with hands whilst at Bute Park.

A total of 33 people attended the BBQ at Bute Park; the final number of positive cases notified to the Authority linked to this event was 22 (13 male; 9 female; age range 1-61 years). Most of the primary cases had an onset of symptoms within 12-48 hours of the gathering; 17 cases had consumed the raw liver dish in varying quantities. Those cases who ate large portions of the raw liver were more severely ill and required medical intervention. Three of the male cases reporting not attending the actual BBQ.

During the initial phase of the investigation, Officers focused on interviewing all families attending the Eid gathering, providing hygiene advice and arranging stool samples to be taken from anyone in the households reporting symptoms. Further information about where meat and offal products had been sourced was also obtained, with left-over meat samples from 3 carcasses being available for sampling. Nine (9) of the human stool samples were subsequently genome sequenced at the reference laboratory and found to be identical; genome sequencing results from raw lamb samples sent to laboratory matched the human isolates. All tested positive for *Salmonella* Typhimurium.

Whilst the acute incident from the BBQ gathering was closed by the end of August 2021, SRS continues to support colleagues in Public Health Wales and the Food Standards Agency investigate cases of *Salmonella* found to be genetically identical, or similar, to that found at the Eid BBQ to facilitate the rapid escalation of potential food chain failures and support the dissemination of key public health messaging to communities across the SRS region.

### 3.4 Customer Evaluation Forms

Once officers have interviewed a confirmed case of communicable disease, the customer is routinely sent an evaluation questionnaire, alongside an advice sheet about what has made them ill, in order to gauge their opinion of the service provided and identify likely changes in behaviour after discussing their illness with an officer.

#### **Feedback from all cases:**

The response rate for returned evaluation forms was extremely low in 2021 at 2%. This was much lower than the numbers observed in 2020 (11%); 2019 (13%) and 2018 (20%).

With officer work continuing to be re-prioritised throughout 2021 because of the COVID-19 pandemic, fewer evaluation forms were sent out compared to previous years.

A total of 13 completed evaluation forms were received.

- 13/13 (100%) cases reported being 'satisfied' with the service, of which 10/13 (77%) reported being 'very satisfied'.

- 13/13 (100%) cases reported that the advice given by officers was useful and 13/13 (100%) reported it was easy to understand.
- 9/13 (69%) cases reported changing their food preparation practices or choices as a result of the interview.
- 13/13 (100%) cases reported that the officers performance was good, of which, 12/13 (92%) reported that the officers performance was very good.
- 13/13 (100%) of cases said that they were better able to prevent future infections
- 13/13 (100%) said that the officer could not have done any more to improve the quality of the interview.

## References

Kuhn, K. et al. (2020) 'Campylobacter infections expected to increase due to climate change in Northern Europe', *Sci Rep* 10, 13874. <https://doi.org/10.1038/s41598-020-70593-y>

# Appendix A - Corporate priorities of partner local authorities

**Bridgend County Borough Council**

**Priorities**

**Outcomes/Aims**



- Supporting a successful sustainable economy
- Helping people and communities to be more healthy and resilient
- Smarter use of resources

- Support local people develop skills and take advantage of opportunities to succeed.
- Create conditions for growth and enterprise
- Create town centre and communities that improve the quality of life for citizens
- Give people more choice and control over what support they receive ...
- Reduce demand through more targeted early help and intervention programmes
- Develop more active, healthy and resilient communities...
- Ensure the Council is financially sustainable over the longer term.
- Improve efficiency and access to services...
- Work collaboratively to make the most of natural and physical assets
- Develop the culture and skills required to meet the needs of a changing organisation

**City of Cardiff Council**

**Priorities**

**Outcomes/Aims**



- Cardiff is a great place to grow up
- Cardiff is a great place to grow older
- Supporting people out of poverty
- Safe, confident and empowered communities
- A Capital City that works for Wales
- Cardiff grows in a resilient way
- Modernising and integrating our public services

- Cardiff is a great place to grow up
- Cardiff is a great place to grow older
- Supporting people out of poverty
- Safe, confident and empowered communities
- A Capital City that works for Wales
- Cardiff grows in a resilient way
- Modernising and integrating our public services

**Vale of Glamorgan Council**

**Priorities**

**Outcomes/Aims**



- To work with and for our communities
- To support learning, employment and sustainable economic growth
- To support people at home and in their community
- To respect, enhance and enjoy our environment

A Vale that is:

- Inclusive and Safe
- Environmentally Responsible and Prosperous
- Aspirational and Culturally Vibrant
- Active and Healthy

# Shared Regulatory Services

## Port Health Service Plan

2022/23



Port Health



Shared  
**Regulatory**  
Services



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# 1. Introduction

The Seaports of Cardiff and Barry, and Cardiff International Airport, provide entry points into the UK and require Shared Regulatory Services to carry out a range of health controls. These controls are provided by Port Health Officers from Shared Regulatory Services who enforce regulations on behalf of central government.

The responsibilities of these officers include; monitoring the safety of imported food and feed at the point of import, undertaking ship inspections, enforcing food safety and hygiene standards and general public health law. The control of infectious disease is managed jointly by the Port Health Officers and Lead Officers in Communicable Disease.

This Operational Plan is produced to inform interested parties of the arrangements Shared Regulatory Services have in place to regulate Port Health. It explains how the Port Health Team will fulfill its purpose of preventing and controlling infectious disease coming into Cardiff, Barry and the surrounding areas via the ports and airport to protect the health of the public. The Plan also details how the statutory obligations in relation to food safety, imported food control, ship sanitation, waste control and animal health will be delivered.

The impact of the Covid pandemic and the commencement of the Russian conflict with Ukraine have meant a constant changing landscape in international travel. This has required partnership working with different organisations to ensure the suitable implementation of national restrictions and guidance.

It is hoped that the UK vaccination programme will remain effective against new Covid strains in the future, preventing the implementation of further restrictions and permitting resources to continue to be utilised for other emerging issues such as change in trade patterns and processes as a result of EU Exit.

**Christina Hill**

**Operational Manager Commercial Services**

## 2. Background

### 2.1 Profile of Cardiff Port

The district of Cardiff Port Health Authority extends from Sully Island to the River Rhymney, from low water mark to a point three miles seaward, including all docks, harbours and vessels within these limits

Cardiff Port Health Authority was originally established by a Provisional Order in 1882, becoming permanently constituted by the Cardiff Port Order (1894) and consolidated by the Cardiff Port Order (1938) and the Port Health Authorities (Wales) Order (1974).

The history of Cardiff docks began in 1794 with the completion of the Glamorganshire Canal which linked Merthyr to the small town of Cardiff. A small basin was built which linked the canal to the Bristol Channel and this provided a means for exporting the rich coal and iron reserves present in the South Wales Valleys.

The export of coal and iron grew rapidly during the early 19<sup>th</sup> century and led to the construction of West Bute Dock (1839), East Bute Dock (1859), Roath Dock (1887) and the Queen Alexandra Docks (1907). By 1913, Cardiff had become the biggest coal exporting dock in the world.

A fall in the demand for Welsh coal, the Great Depression in the 1930s and the outbreak of World War II contributed to the gradual decline of the port. Today, however, the port of Cardiff remains active and is a mixed cargo port.

Last year the port received 225 ships from all over the world: mainly handling cat litter, steel, forestry products, and dry and liquid bulks.

## 2.2 Profile of Barry Port

The Port of Barry is nine miles west of Cardiff. In the second half of the 19<sup>th</sup> century the Port of Cardiff, the main coal exporting port in Wales became too small to handle all exports other than those of the owners. In 1883 a group of mine owners, sought permission to build a dock at Barry, serviced by a new railway. Work began on the new dock at Barry on 14 November 1884, along with the construction of the new railway link. Everything was completed in double quick time and the dock opened for trade in 1889.

In due course, further docks were added and while exports in the first year were just one million tons, by 1903 they had multiplied to over nine million. By 1913, the year before the outbreak of World War One, Barry had surpassed both Cardiff and Penarth to become the largest coal exporting port in the country.

The collapse of the Welsh coal trade after the war left Barry Port struggling for survival. In 1959 bananas were imported from the West Indies but moved out in the 1980s.

The docks, whose road links were dramatically improved with the opening of the Docks Link Road in 1981, now have direct road access with the M4 motorway. The docks can handle vessels up to 23,000 tones and the first-class tidal position close to the deep-water channel of the Severn Estuary, allows for scheduled sailings

Last year the port received 55 ships from all over the world. Most vessel movements are associated with handling liquid bulks for the local chemical industry Dow Corning. In addition,



the commencement of construction of the new Hinckley Point Power Station has resulted in an increase in vessel movements from work boats transporting materials to and from it. There is no longer any routine container activity associated with this port.

## 2.3 Profile of Cardiff Airport

Cardiff International Airport is a relatively small international airport located on the outskirts of the village of Rhoose, in the Vale of Glamorgan, approximately 12 miles (19km) south-west of the Welsh capital, Cardiff. The airport is a major facility for the area serving all business and tourist traffic for south and mid Wales. The nearest comparable international airport is at Bristol. The airport is multi-purpose and versatile, being served by scheduled, low-fare and charter carriers and also supporting corporate and general aviation as well as having maintenance facilities.

Cardiff is the only airport in Wales offering international scheduled flights. The maintenance hangar is one of the largest in the world (at 250m x 175m / 820ft x 574ft) and provides heavy airframe and engineering maintenance for the British Airways fleet and third-party carriers.

In early 2019, after investing in additional facilities to safely support aircraft during an emergency landing, the airport gained divert status .

***None of the ports described above have Border Control Post (BCP) status and therefore products of animal origin (POAO) and higher risk products not of animal origin (PNOAO) are not permitted to enter via these ports.***

## 2.4 Aims and objectives

The Port Health Team as part of the Communicable Disease and Food Safety Service is committed to preventing and controlling the import of infectious and animal disease into the UK, ensuring ships and aircraft comply with international agreed public health standards and maintaining the safety and quality of the food chain.

The overall aim of the Service is:-

***Protect the citizens of Cardiff, Penarth, Barry and the surrounding areas from the import of infectious disease and ensure the health and wellbeing of crew and passengers aboard ships and aircraft entering the Ports of Cardiff, Barry, Penarth Marina and Cardiff Airport***

To support this, the Port Health Service has adopted the following 5 delivery priorities:-

- Check and identify the food and feed imported through the ports to ensure it is permitted to enter at the point of entry and that it meets legal requirements.
- Control and investigate cases of notifiable communicable disease including food poisoning and other infectious disease on-board ships and aircraft.
- Investigate and respond to incidents of international public health concern to safeguard public health.
- Protect the public health and wellbeing of crew present on ships.
- Prevent the spread of animal health diseases from vessels entering the ports.

## 2.5 Links to Corporate Plan

As a regional organisation providing regulatory services across three local authority areas, we place the corporate priorities and outcomes of the three councils at the heart of all that we do. (Appendix A). In developing our own strategic priorities for Shared Regulatory Services, we have considered the priorities of all the three authorities, together with the needs and aspirations of our partners and customers so they translate into priorities that meet local needs.



The SRS priority particularly relevant to the delivery of the port health function is 'Improving health and wellbeing':-

**Improving health and wellbeing** Amongst other factors impacting on health, the quality of the food we eat, the standards to which it is produced and the environment in which it is prepared, are central to people's health.

Food hygiene and food standards enforcement strives to ensure that food and drink is accurately described and labelled, meets the required food standards and is prepared in a safe environment. Food hygiene controls and inspections seek to minimise the risk to consumers of food borne infection.

The work of the Port Health Officers prevents the import of infectious and animal disease into the UK and ensures ships and aircraft comply with internationally agreed public health sanitation standards and that the safety and quality of the food chain is improved.

Nationally, the service also contributes to the Welsh National Enforcement Priorities for Wales for local regulatory delivery which highlight the positive contribution that regulatory services, together with local and national partners, can make in delivering better outcomes:-

- Protecting individuals from harm and promoting health improvement
- Ensuring the safety and quality of the food chain to minimise risk to human and animal health
- Promoting a fair and just environment for citizens and business
- Improving the local environment to positively influence quality of life and promote sustainability.

## 2.6 Enforcement Policy

Fair and effective enforcement is essential to protect the economic, environmental and social interests of the public and business. Decisions about enforcement action and in particular the decision to prosecute, has serious implications for all involved and for this reason, the Shared Regulatory Service has adopted a Compliance and Enforcement Policy.

The Compliance and Enforcement Policy sets out the standards that will be applied by the Service when dealing with issues of non-compliance, and what residents, consumers and businesses can expect. Such a policy helps to promote efficient and effective approaches to regulatory inspection and enforcement and balances the need for improvement in regulatory outcomes with minimising unnecessary burdens on business.

Traditionally based upon the principles of the Enforcement Concordat and the Regulators Compliance Code, local authority Enforcement Policies must now reflect the Regulators Code of 2014 and the regulatory principles required under the Legislative and Regulatory Reform Act 2006

The Regulators Code is based upon six broad principles:

- Regulators should carry out their activities in a way that supports those they regulate to comply and grow;
- Regulators should provide straightforward ways to engage with those they regulate and hear their views;
- Regulators should base their regulatory activities on risk;
- Regulators should share information about compliance and risk;
- Regulators should ensure clear information, guidance and advice is available to help those they regulate meet their responsibilities to comply;
- Regulators should ensure that their approach to their regulatory activities is transparent

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## **4. Service Delivery**

### **4.1 Responsibilities**

The key responsibilities of Shared Regulatory Service's Port Health Team is to prevent the import of infectious disease via the ports and to protect the health and wellbeing of the crew and citizens of the surrounding areas by carrying out statutory obligations in relation to food

safety, imported food control, ship sanitation, aircraft disinsection and animal health. This encompasses the following activities:-

- Close monitoring of ship (vessel) and aircraft movements within the port authorities for the purposes of preventing the spread of infectious human and animal disease, ship and aircraft inspection and imported food controls.
- Responding to reports of food poisoning and infectious disease and implementing required control measures to safeguard public health.
- Checking ship manifests and aircraft cargo to identify imports of food originating from within and outside the EU.
- Identifying food and feedstuffs which are not permitted to enter through the ports and arranging for their destruction, re-export, re-direction as necessary.
- Undertaking documentary, identity and physical checks of imported food as necessary to ensure fitness and compliance with EU and UK legislation.
- Sampling foodstuffs for chemical and microbiological examination.
- Protecting animal health by ensuring vessels and aircraft correctly dispose of International Catering Waste.
- Inspecting the Port Health Authority areas and boarding ships and aircraft to check on sanitary conditions and take action in accordance with the International Health Regulations and domestic legislation.
- Issuing Sanitation control or exemption certificates following a thorough inspection of a ship and extending a ship sanitation certificate if appropriate.
- Checking the water quality on board vessels and aircraft to ensure there are no risks to health.
- Undertaking food hygiene inspections of the galley and implementing any required measures to safeguard food safety.
- Checking the water quality standards of quayside and airport water supplies used by ships and aircraft.
- Act as Category 1 responders under the Civil Contingencies Act 2004.
- Liaising with other port health authorities, Food Standards Agency; Maritime & Coastguard Agency; Border Agency; cargo and baggage handling agents, cleaning services, airline operators, Welsh Government; port operator, airfield operations manager and shipping agents to ensure the efficiency of the service.

## 4.2 Organisational structure

Responsibility for delivering port health falls within the Food and Port Health Teams of Commercial Services Team within Shared Regulatory Services.

## Shared Regulatory Services Organisational Chart



## 4.3 Interventions

### 4.3.1 Shipping Ports of Cardiff and Barry and Penarth Marina

The lifting of Covid-19 restrictions on 30<sup>th</sup> May 2022 has meant that the procedures operated by Port Health can return to “normal”. Unfortunately, this has been delayed in some areas due to staff resource issues and training needs. The Service continues to remain vigilant for

any changes to guidance that may require implementation due to the identification of a new variant of concern and maintain close working partnerships with other relevant organisations.

### **Control and Investigation of Outbreaks and Infectious Disease**

Masters have a statutory duty under the Public Health Ships Regulations to notify the authority when illness and mortality occur on board their vessel using a Maritime Declaration of Health. In such instances, health clearance is required, "Free Pratique", in order for the crew to disembark.

Port Health Officers will respond urgently to any notification of illness and will consult a Port Medical Officer as necessary to ensure health controls are implemented to protect public health.

Sea farers find difficulty in attaining Covid-19 vaccination due to the transient nature of their vocation. The Port Health Team, in accordance with national guidance, will continue to facilitate the vaccination of crew by liaison with the Cardiff and Vale University Health Board.

International cruise travel has reopened, and vessels continue to implement Covid-19 Management Plans. The Port Health Team participates in a national group organised by the Port Health Association entitled, "Cruise Restart". This hosts a platform for sharing advice, guidance and evaluation of the Covid-19 Management Plans created by the various operators within the Cruise sector. It promotes a consistent approach to infection control measures required to be implemented by port health authorities across the UK. Cardiff Seaport is visited by small cruise vessels each year and the Port Health Team will ensure that appropriate Covid-19 Management Plans are in place for any cruise vessel that intends to berth at Cardiff.

### **Vessel Boarding**

Officers board vessels arriving within its district to undertake boarding checks and inspections under the Public Health (Ships) Regulations prioritising those that have arrived from outside the European Union. A boarding check will involve recording the ships particulars, ensuring adequate provisions for the welfare of the crew, checking public and animal health related documentation and reviewing the potable water management system. Vessels arriving from foreign ports will also need to show a valid sanitation certificate.

Boarding visits of vessels have been reintroduced since the 1<sup>st</sup> June 2022 to complete inspections with a view to the issue of a valid sanitation exemption certificate, address sampling requests and investigate any concerns of public health that have been notified to the Service. It is hoped that from the 1<sup>st</sup> October 2022 adequate resources will be in place to reinstate routine boarding checks, prioritising vessels that have arrived from outside the EU.

### **Sanitation Inspection**

The authority has a legal requirement to carry out a sanitation inspection and issue a certificate upon request by a Master. Cardiff and Barry Port Health Authorities are listed by

the World Health Organisation as ports authorised for issuing sanitation control certificates, sanitation exemption certificates and extending sanitation certificates.

A sanitation control certificate will be issued when the inspection reveals dangers to public or a risk of infection. The controls required to remove the risk to health will be clearly written on the certificate and the Master will be requested to undertake the work as quickly as possible. The progress of work will be monitored and the next port of call will be notified if the vessel leaves before the work can be completed.

The Master will be charged for the issue of a certificate based on the Association of Port Health Authorities Ships Inspection Charges. The Association of Port Health Authorities reviewed the tariff for ship sanitation charges and set the following national scale for 2022/23:

**Ship Sanitation Inspection Charges 2022/23\***  
(with effect from 1 April 2022)

Gross Tonnage of Vessel	Old Rate (2021/22)	New Rate (2022/23)*
	£	£
Up to 1000	105	110
1001 – 3000	140	150
3001 – 10000	210	220
10001 – 20000	270	285
20001 – 30000	345	365
Over 30000	405	425
Vessels with 50–1000 Persons	405	425
Vessels with over 1000 Persons	690	725
Extensions	75	80

\* Extra charges, based on actual costs, may be added for expenses incurred. These include launch hire; out-of-hours duty; travel and extended or re-inspections of ships due to 'Control Measures' etc.

The sanitation inspection involves a comprehensive inspection and covers the following matters:

- Ships Particulars
- Cargo information
- Potable Water Systems
- Food Safety
- Swimming & Spa Pools
- Waste Disposal & International Catering Waste
- Accommodation and Crew Welfare
- Pollution Control
- Animal Health
- Vermin and Pest Control



- Infectious Disease Controls

### **Ship Food Hygiene Inspections**

The Food Safety (Ships & Aircraft) (Wales) Order 2003 amended the definition of food premises to include ships and therefore require ship galleys to comply with food hygiene and temperature control legislation.

A full hygiene inspection of the galley and related food areas will be undertaken as part of a Sanitation Inspection. A full inspection will also be carried out when a boarding visit reveals concerns about food hygiene on board.

The ports of Cardiff and Barry primarily receive merchant vessels and occasionally passenger vessels. Shared Regulatory Services is unable to develop an annual ship hygiene inspection programme as it is not possible to determine when a ship will next return to the port.

Food hygiene inspections will be undertaken in-accordance with the relevant FSA and APHA guidance.

Fishing boats and land-based premises within the port health district will form part of the Shared Regulatory Services Food Hygiene Intervention Programme.

### **Complaints**

The port health service occasionally receives complaints, for example, a crew member may be concerned about water quality on board a ship. Port Health Officers will respond quickly to complaints in order to protect public health and will ensure the complainant is kept regularly updated about the progress of their complaint and final outcome.

### **Advice to Businesses**

Shared Regulatory Services will provide advice and information for masters, agents, port operators, food importers, shipping companies, merchant navy welfare members and other stakeholders.

Shared Regulatory Services will proactively disseminate information to shipping agents and the port operator, marina management and other relevant parties when health protection controls need to be implemented to prevent the entry of infectious disease or in response to public health emergencies of international concern.

### **Food and Feedstuff Inspection**

There have been no container ships arriving at the Port of Barry for a considerable length of time and none other than empty containers arriving at the port of Cardiff since September 2017. This means that the future importation of food through these ports is unlikely. Products of Animal Origin and Higher Risk Foods not of Animal Origin are not permitted to enter through either port and so Port Health Officers will take action to detain any such products. In the case of Products of Animal Origin the Border Agency will be notified. Food not falling into either of these categories will be monitored, inspected and sampled on a risk basis. Any action taken

will have due regard to guidance issued by the Food Standards Agency and European Commission.

A recent project directed by the Food Standards Agency identified that there was no feedstuff currently being imported into the ports. With no prior notification of the importation of feed not of animal origin required, continued liaison will be maintained with the port operators and detailed monitoring of manifests from arriving vessels to identify any changes in the situation.

### Food Incidents and Hazards

Shared Regulatory Services will respond to any warnings regarding imported food which is unfit for human consumption and requires action to ensure it is removed from the food chain.

### Water Quality

Every port must be provided with a supply of potable water and this should be potable and comply with International Standards for drinking water. Suitable controls should be in place to prevent contamination and ensure adequate disinfection of tanks, distribution systems and hoses.

Vessels must have a water management plan in place not only to ensure that a suitable supply of potable water is available at all times, but also to identify and manage the risks of Legionella bacteria by removing or reduce possible sources of contamination through risk assessment, routine maintenance and regular cleaning, to reduce the chance of infection.

Sampling will be done on board vessels only by request or if the Port Health Officer has concerns about the suitability of the supply, or as part of a ship sanitation inspection. Requested samples will be charged as detailed below and an invoice raised for the shipping agent:

Type of sample	Analysis	No. of Sampling points	Sample Cost 2022-23	Labour Cost (per visit)* 2022-23
<b>Drinking Water</b>	Aerobic Colony Counts, E.coli & Coliforms	2	£25.00	£67.00
<b>Legionella</b>	Legionella sp	2	£60.00	£67.00
<b>Chemical analysis</b>	Various physio/chemical parameters	1	£146.00	£67.00

*\*Labour cost not applied if ship already being visited.*

*Extra charges may be added for exceptional costs such as launch hire*

A sampling plan has been devised to check the quality of water at shoreside as detailed in Appendix B. If water quality fails to meet legal requirements suitable remedial action will be taken if required.

### Insects capable of transmitting disease

Increased global travel and trade means there is a greater chance of disease vectors entering the country through accidental importation. Climate change may also mean there is a greater risk that imported tropical species could colonise and establish local populations.

In previous years Shared Regulatory Services has undertaken a commitment to participate in a national survey co-ordinated by Public Health England (now United Kingdom Health Security Agency) to establish the distribution and type of mosquito found in and around the ports and to prevent any potential mosquito vectors of disease from entering and establishing populations within the UK. However, due to the Covid-19 pandemic response and the redirection of resources this project has currently been suspended but is hoped to be reinstated as soon as possible.

### **4.3.2 Cardiff Airport**

Cardiff Airport was adversely affected by the Covid-19 pandemic due to lockdown prohibiting international travel for non-essential purposes. It has seen a gradual return of flights and passengers as the international travel restrictions have been lifted.

#### **Investigation of incidents of infectious disease**

The Commander of an aircraft has a statutory duty to inform the airport if there is someone on board who may have, or may have been exposed, to an infection. In addition, the Commander has the power to request a medical officer examine a person if there is good reason for believing that a passenger is suffering from an infectious disease or has been exposed to an infectious disease and the flight did not start within an expected area that is exempt from the controls of the Aircraft Regulations.

In such an instance the Port Health Officer will liaise with their colleagues in the Communicable Disease Team and the Port Medical Officer, Public Health Wales, to ensure appropriate action is taken in relation to the treatment of the patient/s, minimising the risk of the spread of infection and investigating the likely cause in accordance with Port Health Procedure for Cardiff International Airport. This may include:

- The collection of names, addresses and seat numbers of all passengers on board the aircraft
- Assist in arrangements to transfer of patient to clinical room and/or transfer to hospital
- Provision of faecal sample pots,
- Sampling food and water from aircraft
- Ensuring appropriate disposal or decontamination of soiled articles and sanitisation of aircraft

In the event that the Port Medical Officer deems that there is a threat to public health; the Port Health Officer will liaise with the Duty Manager of the Airport and the airline about detaining all other passengers and possibly the aircraft.

#### **Insects capable of transmitting disease**

The World Health Organisation (WHO) has introduced regulatory requirements for disinsection of aircraft travelling from designated countries in which there is a risk of disease being spread by insects, e.g. Malaria, yellow fever, zika virus and dengue fever.

A Port Health Officer may require the Commander to assist in such steps as in the opinion of the Port Medical Officer are reasonably necessary for preventing the spread of infection, for disinsection and the destruction of vermin, and for the removal of conditions on the aircraft likely to convey infection, including conditions the existence of which might facilitate the harbouring of insects or vermin.

As for the seaports, in previous years Shared Regulatory Services has undertaken a commitment to participate in a national survey co-ordinated by Public Health England (now United Kingdom Health Security Agency) to establish the distribution and type of mosquito found in and around the airport and to prevent any potential mosquito vectors of disease from entering and establishing populations within the UK. However, due to the Covid-19 pandemic response and the redirection of resources this project has currently been suspended.

### **In-flight Death**

Deaths that occur during a flight must be reported to Port Health unless the death was accidental or the voyage commenced within the Expected Area and the aircraft did not touch down outside it.

If the death seems likely to be due to a communicable disease then liaison with the Port Medical Officer will be made to investigate the cause and ensure appropriate controls are put in place to prevent the spread of infection.

### **Food Safety on Aircraft**

Aircraft are treated as food businesses for the purposes of food hygiene regulations and officers have a power of entry to carry out interventions. Port Health Officers may inspect aircraft and will take action in accordance with the Shared Regulatory Services Enforcement Policy if standards of food hygiene are not satisfactory.

### **Food and Feed Imports**

Cardiff Airport is not a Border Control Post (BCP) so cannot receive products of animal origin or higher risk products not of animal origin from third countries. Products of animal origin arriving at the airport cannot be redirected to an approved BIP, they will be treated as an illegal import and refused entry into Europe. Currently there are no cargo flights entering Cardiff Airport that could facilitate such imports due to Qatar Airlines having suspended their operations until 2023 as a result of the Covid-19 pandemic.

### **Potable Water**

Every port must be provided with a supply of potable water and this should be potable and comply with International Standards for drinking water. Suitable controls should be in place to prevent contamination and ensure adequate disinfection of tanks, distribution systems and hoses.

It is proposed that in the coming year an intervention is undertaken to verify that the water supplied to aircraft continually meets legal requirements by sampling and assessing the suitability of the control measures in place.

### **3.4 Liaison with other organisations**

Shared Regulatory Services will co-operate with its partners, organisations, working groups and associations to ensure the provision of an effective port health service. This will include:

The Food Standards Agency (FSA)  
Welsh Government (WG)  
Test Trace and Protect  
Department of Environment, Food and Rural Affairs (DEFRA)  
Public Health Wales (PHW)  
UK Health Security Agency  
Cardiff and Vale University Health Board  
Association of Port Health Officers (APHA)  
Maritime and Coastguard Agency (MCA)  
Border Force (Customs/Revenue and Immigration Services)  
Port Health Authorities  
Water Utility Companies  
Port Operator  
Shipping Agents  
Merchant Navy Welfare Board

A representative of the Port Health function will attend the Directors of Public Protection Port Health Expert Panel. This panel consists of representatives from other local authorities, Welsh Government and Public Health Wales and provides a forum for promoting consistency of approach and discussing matters of a technical nature.

Port Health Officers also attend meetings of Merchant Navy Welfare Board and the Cruise Restart Group organised by the Association of Port Health Authorities

## **5. Resources**

The Port Health Team forms part of Commercial Services for which overall responsibility lies with the Operational Manager Commercial Services. An organisation chart can be found within Section 3 of this Plan.

It consists of a small team of officers taken from both Food Safety and Port Health Teams. Each officer is qualified to carry out the port health functions and educated to Degree or Diploma standard in environmental health and possesses the relevant competency as required by the Food Standards Agency Food Law Code of Practice.

Officers are provided with on-going learning and development to ensure they are equipped with sufficient knowledge and skills to perform their duties which will include:-

- Port Health Induction Training
- Port Operator Induction Training
- Training needs identified through employee appraisal and team meetings
- Professional and technical training to satisfy CPD requirements

The competency of the Port Health Officers is continually assessed in accordance with the Internal Monitoring Procedure.

## External Factors Impacting on the Service

**Covid-19 Recovery** – The impact of the Covid -19 pandemic has meant that many services within Shared Regulatory Services were suspended over a long period of time with the redirection of resources to address the pandemic. With the lifting of restrictions there is now a subsequent backlog of work required to be completed to meet statutory duties. This has required prioritisation of work according to risk and for Food Safety and Port Health particular attention to ensure compliance with the Food Standards Agency Recovery Plan. Consequently, the return to the proactive work of Port Health such as routine boarding and sampling has been delayed.

**Staff Retention and Recruitment** - The Service has been adversely affected by the loss of staff to alternative employment opportunities, placing additional needs for training of new members of staff. The need to address the issues of staff retention and recruitment remains a priority for the Service moving forward.

**Designated Point of Entry** - Cardiff International Airport has “Designated Point of Entry” Status under the International Health Regulations (2005). This requires an annual assessment of the core capacities at the airport to ensure a safe environment for travellers using the facilities, including potable water supplies, eating establishments, flight catering facilities, public washrooms, appropriate solid and liquid waste disposal services and adequate facilities and procedures for dealing with a public health emergency of international concern.

**EU Exit**- Border controls that were due to be introduced from 1 July were postponed until 31<sup>st</sup> December 2022. This has left significant uncertainty around what future border controls we should prepare for. Whilst biosecurity is devolved, a coherent approach for imports into the UK is required. The UK Government will publish a Target Operating Model in the Autumn and is targeting the end of 2023 as the revised introduction date for the new border controls regime.

## Service delivery points

Port Health related services are delivered from 2 service delivery points and while the service primarily operates office hours from Mondays to Fridays, weekend and out of business hours duties are carried out as the need arises. Shared Regulatory Services also operates an out of hours duty officer scheme for emergency situations on 02920 871650.

Contact Information		
Locations	Service Area	Office Hours
<p><b>Cardiff Seaport</b>  <u>Contact:</u> Alexa Pieris, Team Manager Food Safety &amp; Port Health  <u>Address:</u> Shared Regulatory Services, Room 108, County Hall, Cardiff CF10 4UW  <u>Tel:</u> 07970739588  <u>Out of hours:</u> 029 2087 1650  <u>Email:</u> <a href="mailto:porthhealth-srs-wales@valeofglamorgan.gov.uk">porthhealth-srs-wales@valeofglamorgan.gov.uk</a></p>	<p>Food and Feed Imports            Food Hygiene Inspections &amp; Ratings            Food incidents and Hazards            Potable Water Issues            Vermin and Pest Control            Waste Disposal            Pollution Control            Swimming Pools and Spas            Sanitation Certificates            Water Ballast</p>	<p>Mon - Thurs            08:30 - 17:00            Friday            08:30 - 16:30</p>
<p><b>Barry Docks/ Cardiff Airport</b>  <u>Contact:</u> Jane Peatey, Team Manager Food Safety &amp; Port Health  <u>Address:</u> Shared Regulatory Services, Civic Offices, Holton Road, Barry CF63 4RU  <u>Tel:</u> 03001236696/07590006445  <u>Out of hours:</u> 029 2087 1650  <u>Email:</u> <a href="mailto:porthhealth-srs-wales@valeofglamorgan.gov.uk">porthhealth-srs-wales@valeofglamorgan.gov.uk</a></p>		
<p><b>Cardiff Seaport/Barry Docks/Cardiff Airport</b>  <u>Contact:</u> Sarah Swaysland, Team Manager Communicable Disease and Health and Safety  <u>Address:</u> Shared Regulatory Services, Room 108, County Hall, Cardiff CF10 4UW  <u>Tel:</u> 02920 873819 / 02920 873832/07970738999  <u>Out of hours:</u> 029 2087 1650  <u>Email:</u> <a href="mailto:porthhealth-srs-wales@valeofglamorgan.gov.uk">porthhealth-srs-wales@valeofglamorgan.gov.uk</a></p>	<p>Death            Infectious Disease</p>	

The Shared Regulatory Services website provides information on the services provided and the website address is [www.srs.wales](http://www.srs.wales)

# 6. Assessment and review

## 5.1 Assessment and Review mechanisms

Shared Regulatory Services recognises the need to measure the effectiveness of its services and strongly supports the ethos of continuous improvement. The Service therefore participates and undertakes a number of activities to ensure that work is of a high standard and opportunities to identify and implement improvements are taken.

### Documented procedures

To ensure the quality and consistency of our activities, processes and procedures identify responsibility for the work carried out and ensure that all changes identified through audit are completed in accordance with improvement procedures.

### Food Standards Agency

The Food Standards Agency has powers to audit the Port Health Service in relation to food hygiene inspections and imported food. Port Health imported food data is supplied to this agency every year as part the Local Enforcement Monitoring System (LAEMS).

### Complaints

The port health service is also covered by the Vale of Glamorgan Council's corporate process. Last year no adverse comments were received in relation to the port health service provided by the legacy authorities of the City of Cardiff and Vale of Glamorgan Councils.

### Performance Measurement

A range of performance measures have been in place to monitor port health activity across the port health functions of Shared Regulatory Services. These can be found in Section 5.3.

### Assessment and audits

The monitoring of the quality of our policies and procedures is assessed in a number of ways, namely:-

- Audits undertaken by the Food Standards Agency
- Feedback from shipping agents and port operator and airline operators and airport manager.
- Corporate complaints and compliments about the service

### Review

In order to ensure continuous improvement, it is essential that performance is regularly monitored. Shared Regulatory Services has developed an effective performance management infrastructure for delivering, monitoring and reviewing which is achieved through the following mechanisms:-

- The Port Health Plan and associated statistical information is reviewed on an annual basis to ensure the service remains effective. Where variation is identified, reasons are investigated and improvements put in place.



- The Shared Regulatory Services Joint Committee are provided details of this Service Plan which sets out the work programme for the service and reviews performance against the programme on an annual basis.
- Performance of the service is reviewed quarterly.
- Performance of individuals is further strengthened through the Personal Performance and Development Scheme recently rebranded to #it's about me.

## 5.2 Summary of Achievements from the previous year

### International travel restrictions

In response to the Covid-19 pandemic new legislation was introduced to reduce the risk of importation of new variants of concern that could prejudice the vaccination programme and to minimise the spread of infection if infection was identified in a traveller entering any of the ports. These measures were altered substantially throughout the year of 2021 to 2022 to meet the changing challenges posed by the Covid variants in circulation and the progression of the vaccination programme.

In March 2021 a gradual return to international travel for essential purposes only, resumed in Wales. A colour system for categorisation of countries dependent on risk of importation of Covid infection was in place. Travellers returning from a red country were required to enter through a designated port of which there were none in Wales and be housed in a managed quarantine facility for which there was a charge. International travellers (other than those exempt) returning from other countries were required to complete a passenger locator form, self isolate on entry and take PCR tests to demonstrate negative from infection. The list of red countries expanded in November 2021 to prevent the importation of the more virulent Omicron strain, but by 12<sup>th</sup> December 2021 it was evident that the variant was widely spread in the UK and the Alert level in Wales was raised to level 4.

Close collaboration with Border Force ensured that anyone entering Cardiff Airport on an indirect flight from a red country was identified. One such passenger was directed to a nearby hotel for isolation and appropriate advice given to the hotel to ensure the risk of spread of infection was minimised. The same hotel was also found to house a number of employees of a local large employer who were exempt from isolation due to their skillset. It was ensured that suitable measures were put in place to effectively manage a positive case identified in one of them and minimise the spread of transmission of infection.

Seafarers were exempt from international travel restrictions and welfare issues were identified with countries prohibiting the ability for crew changes. This was subsequently requested to be permitted by all ports by a direction from the World Health Organisation. Changes in crew of four international vessels were managed carefully to ensure that they posed minimal risk to the local population; being adequately housed in local hotels with suitable facilities and control measures in place.

Ambulance flights for persons requiring urgent medical attention were also exempt from international restrictions and required liaison with the air operator and Cardiff and Vale University

Health Board to ensure that suitable resources were in place in the case of the deterioration of the passenger on the flight. Three ambulance flights involved the transfer of a positive covid case.

Port Health worked closely with the Test Trace Protect Regional Teams and National Returning Traveller Team to identify the contacts of any positive Covid case in an international traveller entering Wales. This required information to be requested from the air operators to identify all fellow passengers travelling in the same compartment as the positive case. A total number of 236 flights entering Cardiff were identified as carrying a positive passenger which required follow up. In January 2022 the removal of the need to be fully vaccinated, have a predeparture test, day 2 test and the lifting of essential international travel only, saw a huge escalation in the number of positive cases identified with 97 flights requiring further investigation from January 1<sup>st</sup> to 31<sup>st</sup> March 2022.

### **Vaccination Assistance**

Due to the transient nature of seafarers' vocations little opportunity presented itself for them to be part of the Covid 19 vaccination programme. In collaboration with the Cardiff and Vale University Health Board measures were put in place to enable vaccinations to be offered. This was taken up by crew of eight vessels during the year and held as a flagship process for other port health authorities across Wales.

### **Covid Testing Centre**

To assist the recommencement of international travel, Cardiff International Airport worked with a private provider to introduce a Covid testing centre within the terminal building. This required significant input from the Port Health Team to ensure that the siting, layout, facilities, and risk management plan were suitable to minimise the risk of spread of infection.

### **Enhanced Port Health Procedures**

During 2021 to 2022 The Department of Transport required surveillance of all vessels and flights entering ports within the UK to identify any positive cases of Covid-19 infection. The surveillance was achieved by the need for all vessels emanating outside the Common Travel area to submit a Maritime Declaration of Health requesting for "free pratique" to be granted and all flights, a General Aircraft Declaration prior to anyone disembarking. This continued until the 31<sup>st</sup> December 2021 for the Maritime Declarations of Health and the 19<sup>th</sup> April 2022 for the General Aircraft Declarations. A total of 1659 General Aircraft Declarations were checked and 216 Maritime Declarations of Health.

### **Advice**

The Covid Management Plan for the port operators of Cardiff and Barry Ports, The Association of British Ports was reviewed and advice on improvements to the cleaning agents to be used for routine cleaning and in response to the identification of a positive case given.

With the reinstatement of national cruises in July 2021, a small cruise ship advised of its intention to berth at Cardiff as part of its itinerary. It was ensured that a suitable risk assessment had been completed and an appropriate plan put in place to manage any case, or outbreak of Covid on the vessel.

Appropriate advice was also given to vessels on a few occasions where a positive case was identified to be on board. This was in collaboration with the Consultant in Communicable Disease Control.

## **FSA Feed project**

A project for EU enhanced imported feed controls was completed under the direction of the Food Standards Agency Wales. This was completed to identify any feed movements in or out of the ports as such movement is not always obvious due to the different forms that it can be transported in. No such movements were identified but surveillance will be continued of manifests to identify any changes.

## **Communications**

Regular meetings were held by the Port Health Team to facilitate updates by the Lead Officer. The updates included changes to legislation, working practices and developments taking place at Port Health Expert Panel and Association of Port Health (APHA) meetings

Biannual meetings were held with appropriate representatives from Cardiff International Airport to ensure new procedures were agreed and effective lines of communication maintained.

## **5.3 Performance during previous year**

The risk of spread of infection and introduction of Covid-19 restrictions has limited the ability for routine interventions to be completed during this period. During the Covid-19 pandemic the routine boarding of vessels was withdrawn due to the imposition of lockdown measures and risk of transmission of infection to port health officers and crew due to the enclosed spaces on board the vessel that would require inspection.

## **Shipping Ports of Cardiff and Barry and Penarth Marina**

### **Monitoring of Ships and Manifest checks**

The provision of an effective port health service is dependent on closely monitoring the arrival and departure of ships within the port health district. The type of vessel, cargo and previous port visited, helps port health officers decide which vessels to board based on risk assessment. In 2021/22 there were 225 arrivals in the Port of Cardiff and 55 arrivals in the Port of Barry

The manifest identifies the cargo being carried which may include imported food and animal feed from countries outside the European Union. It is a requirement that the Port Health Team checks this document prior to a ship's arrival in port. The CIEH Wales Best Practice Standards require manifests to be checked within one working day if best practice is to be achieved and the team endeavour to meet this requirement where possible.

During 2021/2022 no consignments of imported food were identified. No container ship arrived into the port of Cardiff. No container ships arrived into the port of Barry.

## Boarding of vessels

The tables below illustrate the vessel movements through the ports of Barry and Cardiff over recent years and the estimated vessel movements for the coming year of 2022/23.

Between 1<sup>st</sup> April 2021 and 31<sup>st</sup> March 2022 due to risks posed from the Covid -19 pandemic a decision was made to suspend the routine boarding of vessels for health and safety purposes unless there was a significant issue of public health concern. Samples were taken by providing the bottles to the vessel and giving instructions on how to take them and ship sanitation exemption certificates were issued by remote assessment until 1<sup>st</sup> January 2022

Cardiff Vessel Movements & Boarding Visits	2019/2021		2020/21		2021/22		Estimated Numbers	
	Arriving	Boarded	Arriving	Boarded	Arriving	Boarded	Arriving	To be boarded
Arriving from UK	131	5	144	0	128	2	134	2
Arriving from EU Countries	81	6	82	0	77	0	80	2
Arriving from Third Countries*	16	10 (63%)	9	0	20	0	15	3
<b>TOTALS</b>	<b>228</b>	<b>21</b>	<b>235</b>	<b>0</b>	<b>225</b>	<b>2</b>	<b>229</b>	<b>7</b>

\*Target for boarding visits for vessels arriving from Third Countries is 75%

Barry Vessel Movements & Boarding Visits	2019/20		2020/21		2021/22		Estimated Numbers	
	Arriving	Boarded	Arriving	Boarded	Arriving	Boarded	Arriving	To be Boarded
Arriving from UK	21	1	12	0	25	0	19	0
Arriving from EU Countries	39	0	42	0	30	0	37	0
Arriving from Third Countries*	0	0	0	0	0	0	0	0
<b>TOTALS</b>	<b>60</b>	<b>1</b>	<b>54</b>	<b>0</b>	<b>55</b>	<b>0</b>	<b>56</b>	<b>0</b>

\*Target for boarding visits for vessels arriving from Third Countries is 75%

Currently the ships boarded are selected on a risk-based approach taking into account the priorities below and e.g. previous history, last destination and if first time in port.

Priority	Status of Vessel
High	<ul style="list-style-type: none"> <li>Vessel has arrived from 3<sup>rd</sup> Country not within the EU (if not boarded in last 6 months)</li> <li>Food Safety Concerns</li> </ul>

	<ul style="list-style-type: none"> <li>• Vessel requires chargeable water testing or ship sanitation certificate</li> <li>• Complaint received alleging significant health risk</li> </ul>
Low	<ul style="list-style-type: none"> <li>• All other vessels</li> <li>• Complaint received that does not involve a significant health risk</li> </ul>

## Sanitation Exemption Certificates

It is a requirement under the Public Health (Ships) Regulations 1979 (as amended) and the International Health Regulations, that any ship arriving from a foreign port must have a valid Sanitation Exemption Certificate which is issued by an authorised Port Health Authority for a period of 6 months. When a request is made, the authority is required to carry out a full inspection and issue a Sanitation Exemption Certificate. Where the inspection reveals dangers to public health a Sanitation Control Certificate will be issued. An officer may also decide to carry out a Sanitation Inspection if a valid certificate cannot be produced or dangers to public health exist on board.

Due to the Covid pandemic up until 1<sup>st</sup> January 2022 in replacement of a ship sanitation certificate an extension to a ship sanitation certificate, or, a ship sanitation “lite” certificate was offered from the ports at Cardiff and Barry. This required a remote assessment of criteria prior to being issued to ensure that risk to public health was minimised

From the table below it can be seen that during 2021/22, 2 sanitation exemption certificates were issued and 14 ship sanitation exemption “lite” certificates.

Cardiff Sanitation Certificates	2018/19	2019/20	2020/2021	2021/2022
Sanitation exemption certificates issued	11	13	0	2
Sanitation control certificates issued	1	0	0	0
Ship sanitation exemption lite certificates issued	N/A	N/A	0	9
TOTALS	12	13	0	11

Barry Sanitation Certificates	2018/19	2019/20	2020/21	2021/2022
Sanitation exemption certificates issued	3	0	0	0
Sanitation control certificates issued	0	0	0	0
Ship sanitation exemption lite certificates issued	N/A	N/A	0	5
TOTALS	0	0	0	5

## Ships and Shore-side Water Quality Checks

Water on board ships must be wholesome and comply with international standards. Port Health Officers will routinely check the microbiological water quality on board vessels and submit samples to the laboratory. The officer will require the Master to carry out remedial measures if the quality of the water is found to be unsatisfactory.

In the last year 21 visits were made to a vessel to take 76 samples. 16 of the vessels were in Barry and 5 in Cardiff. During these visits samples were taken for checking the suitability of the potable

water supply and/or the presence of legionella. All of the potable water samples were satisfactory but three samples for legionella failed and appropriate advice and re-sampling was undertaken to ensure that suitable action was taken to remedy the poor result.

It is a requirement of the International Health Regulations 2005 that every port is provided with supply of pure drinking water. The sampling programme detailed below was unfortunately not fulfilled due to the redirection of resources to address the Covid-19 pandemic..

Sample location	Number of samples taken		Unsatisfactory Results	
	Bacteriological	Chemical	Bacteriological	Chemical
Cardiff Bay Yacht Club	0	0	N/A	N/A
Cardiff Marina	0	0	N/A	N/A
Cardiff Dock	0	0	N/A	N/A
Penarth Quay	0	0	N/A	N/A
Barry Docks	0	0	N/A	N/A
Penarth Pier	0	0	0	N/A

## Cardiff International Airport

### Insects capable of transmitting disease

Between April and November, the Service usually participate in the surveillance organised by United Kingdom Health Security Agency (previously known as Public Health England) to monitor for the presence of the Aedes mosquito that causes the transmission of Zika Virus. This involves the placement of 2 traps at Cardiff Docks and 4 traps at Cardiff Airport. Due to the covid pandemic the resources were not available during this time to participate in the survey.

### Food Safety on Aircraft

No inspections of food safety on aircraft were completed during 2021/22 due to the adverse impact of the Covid pandemic.

### Food and Feed Imports

As a result of the Covid pandemic the freight flights operated by Qatar Airlines in and out of Cardiff were suspended and are not due to recommence until April 2023.

### Potable Water

Bottled water is supplied to passengers on the plane for consumption. However, due to the water on planes being used for personal hygiene there is still a requirement for the water to be of potable quality not to cause a risk to health. In 2017/18 an audit was completed of the process of supplying water via bowser to the aircraft, to ensure all risks had been identified and suitable controls and monitoring put in place to maintain its quality. Unfortunately, no further monitoring has been completed since that time due to resource issues.

## Outstanding Issues from 2021/2022

The continuing Covid -19 pandemic meant that many routine duties were placed on hold due to the inability to complete tasks due to the imposition of restrictions and the need to divert staff resource. The outstanding issues to be completed in the coming years are therefore as follows:

- Ensure the requirements of the Internal Monitoring Procedure are met to ensure consistency and quality of interventions performed by individuals within the team.
- Ensure the completion of the sampling programme for the potable water supply at shore side and airside.
- Reinstate all routine measures when resource permits.

## 5.4 Performance Targets for 2022/23

Measure	Target
Check all container vessel manifests if applicable	100% within 1 working days
Target vessels that are likely to pose the biggest public health risk with a boarding inspection.	Undertake 75% boarding inspections of vessels arriving from outside the EU.
Ensure suitable potable water supply at shore side and airside.	Meet requirements of sampling programme
Investigation of complaints	Investigation of complaints with significant health risk within 1 working day and any other within a minimum of 5 days
Investigation of notifications of infectious disease	Ensure adequate response 24 hours/day 352 days/year
Maintain compliance with Regulations and guidance relating to prevention and control of Covid-19.	Actively engage with stakeholders to ensure up to date knowledge of guidance maintained and implemented.
Ensure liaison with Cardiff and Vale University Health Board for vaccination of crew where requested.	Ensure on receipt of appropriate form that it is processed within 24 hours.

## 6. Action Plan

Objectives	Milestones	
<b>Adopt the Port Health Plan 2022/23</b>	Q2	Prepare the Port Health Plan 2022/23 and circulate to Joint Committee Members
<b>Improve stakeholder awareness of port health requirements.</b>	Q1-4	Hold biannual meeting at airport with appropriate stakeholders  Collate articles of interest, prepare and disseminate information leaflet to stakeholders.  Review SRS website
<b>Continue to meet performance targets when resource permits</b>	Q1-4	Implement measures detailed in 5.4 to meet required targets.
<b>Ensure the Port Health function is undertaken appropriately by ensuring authorised, trained and competent officers.</b>	Q3	Undertake validation assessment of port officers in accordance with internal monitoring procedure
	Q4	Carry out a review to ensure the plan has been successfully implemented.



# Appendix A – Corporate priorities and outcomes of partner local authorities

Bridgend County Borough Council	Priorities	Outcomes/Aims
	<ul style="list-style-type: none"> <li>• Supporting a successful sustainable economy</li> <li>• Helping people and communities to be more healthy and resilient</li> <li>• Smarter use of resources</li> </ul>	<ul style="list-style-type: none"> <li>• Support local people develop skills and take advantage of opportunities to succeed.</li> <li>• Create conditions for growth and enterprise</li> <li>• Create town centre and communities that improve the quality of life for citizens</li> <li>• Give people more choice and control over what support they receive ...</li> <li>• Reduce demand through more targeted early help and intervention programmes</li> <li>• Develop more active, healthy and resilient communities..</li> <li>• Ensure the Council is financially sustainable over the longer term.</li> <li>• Improve efficiency and access to services..</li> <li>• Work collaboratively to make the most of natural and physical assets</li> <li>• Develop the culture and skills required to meet the needs of a changing organisation</li> </ul>
City of Cardiff Council	Priorities	Outcomes/Aims
	<ul style="list-style-type: none"> <li>• Cardiff is a great place to grow up</li> <li>• Cardiff is a great place to grow older</li> <li>• Supporting people out of poverty</li> <li>• Safe, confident and empowered communities</li> <li>• A Capital City that works for Wales</li> <li>• Cardiff grows in a resilient way</li> <li>• Modernising and integrating our public services</li> </ul>	<ul style="list-style-type: none"> <li>• Cardiff is a great place to grow up</li> <li>• Cardiff is a great place to grow older</li> <li>• Supporting people out of poverty</li> <li>• Safe, confident and empowered communities</li> <li>• A Capital City that works for Wales</li> <li>• Cardiff grows in a resilient way</li> <li>• Modernising and integrating our public services</li> </ul>
Vale of Glamorgan Council	Priorities	Outcomes/Aims
	<ul style="list-style-type: none"> <li>• To work with and for our communities</li> <li>• To support learning, employment and sustainable economic growth</li> <li>• To support people at home and in their community</li> <li>• To respect, enhance and enjoy our environment</li> </ul>	<p>A Vale that is:</p> <ul style="list-style-type: none"> <li>• Inclusive and Safe</li> <li>• Environmentally Responsible and Prosperous</li> <li>• Aspirational and Culturally Vibrant</li> <li>• Active and Healthy</li> </ul>

# Appendix B

## Sampling Plan

Oct-Mar	QA F Shed – Bollard 30	High	Micro
	QA I Shed – Bollard 93	High	Micro
	RD H Shed – Bollard 88	Medium	Micro
	RD Coal Berth – Bollard 82	Low	Micro
	RB Britannia Quay	Low	Micro
	Cardiff Yacht Club		Micro
	Penarth Marina		Micro
	Barry Docks Shed B	Medium	Micro
	Barry Docks Scott Packaging	Low	Micro
	Barry Docks Vopak	Medium	Micro

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## Appendix 5 - Summary of cases concluding between April and the end of August 2022

The following prosecution cases arising from investigations conducted across the Shared Service, have been concluded recently.

Case	Court date	Offence(s)	Outcome
1	1.4.22	<p>The property freeholder granted a management lease of a house in multiple occupation to the defendant company in 2014. The effect of the lease was that the defendant company is the landlord of the HMO and responsible for ensuring that the relevant standards are met to protect the health, safety and welfare of the tenants.</p> <p>The company, and its sole director were previously prosecuted in 2020 for failing to comply with management regulations made under the Housing Act 2004. An improvement notice was served on the company in September 2020, requiring works to be carried out so that the required standards could be met. These works included :</p> <ul style="list-style-type: none"> <li>• An overhaul of the electrical installation.</li> <li>• Provision of an escape window to one room.</li> <li>• Fire protecting the gas &amp; electricity meter cupboards.</li> <li>• Removal of accumulations in the garage.</li> <li>• Replacement of worn laminate flooring.</li> <li>• Overhaul of all windows.</li> <li>• Overhaul of the heating and hot water system.</li> </ul> <p>As the works were not completed, both defendants were again prosecuted, this time for failure to comply with the Improvement Notice. There was no attendance or</p>	<p>The Magistrates imposed a fine of £3,740 with costs of £400 and a victim surcharge of £154 for each defendant. (Total £8,588)</p>

		representation by either defendant, so the matter was heard in their absence.	
2	29.4.22	<p>In October 2020, April 2021 and November 2021 officers from Shared Regulatory services visited a convenience store premises to carry out food hygiene Inspections. The first of these inspections highlighted a number of food hygiene breaches including an active rodent infestation. The food business operator was advised that if the rodent activity was to return, they must contact the local authority and close the store immediately. However, on 2 further occasions rodent activity did return and the store continued to trade with an active infestation, ignoring the risks to the public. In addition, the store had been trading and preparing open high-risk food with not only a rodent infestation but also no hot water to clean or sanitise the premises, equipment or effectively wash hands, which was unacceptable.</p> <p>The defendant company had pleaded guilty to 9 offences under the Food Hygiene (Wales) Regulations 2006. The prosecution had placed culpability in the very high category due to the continued breaches over a number of months. The defence argued that it was medium culpability and more that the systems that were in place were just not sufficiently adhered to. They also argued that harm was low to medium as there were no reports of actual harm to customers. The prosecution submission was that harm was of the most serious nature, namely a category 1 as the risk of harm to vulnerable customers had to be considered. The defence argued that the</p>	<p>In sentencing, the Judge accepted that the defendant's culpability was in the high category and the risk of harm was a category 1. He imposed a £1000 fine for the HACCP offence, and a £50 fine for each of seven other offences, resulting in a total fine of £2350. The Judge imposed costs of £2000 and a victim surcharge of £135.</p>

		defendant had taken steps when the problems were brought to their attention and had changed their pest control company. The defence also produced financial statements indicating a low turn-over and profit.	
3.	23.5.22	<p>The defendant attended court and pleaded guilty to two offences under the General Food Regulations 2004. The defendant runs a convenience store which was visited by officers in March 2021. at 89 Bridgend Road, Bridgend and an inspection by officers from the Shared Regulatory Services on the 29<sup>th</sup> march 2021 discovered a number of food items on sale which were past their 'use by'dates. The court were advised that the defendant had a previous conviction for similar offences at the same store in 2019.</p> <p>The defendant handed in a letter to the court in mitigation which was not read out and the defendant added nothing further.</p>	In sentencing the Magistrates gave the defendant credit for his early guilty plea and he was fined a total of £440, ordered to pay costs of £502 and a victim surcharge of £44
4.	26.5.22	<p>The defendant did not attend court and an application was made to prove the offences in his absence. He was found guilty of 17 offences under The Management of Houses in Multiple Occupation (Wales) Regulations 2006. The HMO of which the defendant is the landlord was inspected by officers from the Shared Regulatory Service in November 2021 and the following failures were identified:</p> <ul style="list-style-type: none"> <li>• Failure to provide an appropriate fire alarm system.</li> </ul>	The Magistrates imposed a fine totalling £6,600 and ordered payment of £680 Prosecution costs & £660 Victim Surcharge.

		<ul style="list-style-type: none"> <li>• Failure to provide a fire door between the ground floor annex and hall.</li> <li>• Failure to provide solid timber doors to the bedrooms.</li> <li>• Failure to enclose the gas &amp; electricity meters in fire resisting units.</li> <li>• Failure to replace the glazing over the door to the first floor front bedroom to provide a fire resisting partition.</li> <li>• Failure to provide a fire blanket.</li> <li>• Failure to address a trip hazard to the ground floor hallway.</li> <li>• Failure to provide sufficient kitchen sockets.</li> <li>• Failures to submit gas and electrical certificates</li> <li>• Failures to maintain the electrical sockets</li> </ul>	
5.	31.5.22	<p>This prosecution was taken in response to a number of food hygiene failures at the premises of a retail butcher. The defendant company and the store manager pleaded guilty to six food hygiene offences as well as an additional charge of not implementing or following a HACCP system. Mitigation was offered as a result of the business having subsequently ceased trading and the premises closed.</p>	<p>The company was fined £50 for each of the six food hygiene offence and a further £500 for the HACCP charge. Likewise, the other defendant was fined £50 for each of the six food hygiene offences and was given a 2 year conditional discharge for the HACCP offence (in the event that they set up another food business). Each defendant were ordered to pay £1500 in costs as well as victim surcharges of £80and £34 respectively.</p>
6.	16.6.22	<p>The defendant was found to be driving an unlicensed and uninsured vehicle for a third party in order to fulfil a school transport contract. In mitigation, he claimed to have driven the vehicle for a company previously when it was a Public Service Vehicle and he assumed he was</p>	<p>The defendant was fined £100 and disqualified from driving for 4 months for the offence of no insurance, with no separate penalty for the private hire offence. He was also ordered to pay £150 Prosecution costs and £34 victim</p>

		<p>still able to drive it. He was simply doing a favour to help the holder of the school transport contract as he had told him who he would lose the contract otherwise.</p>	<p>surcharge.</p>
7.	23.6.22	<p>In November 2021, the defendant was found to be plying for hire in a controlled district whilst not having the licence to do so. The vehicle insurance did not include plying for hire, only Private Hire by prior arrangement. He pleaded guilty to one offence under Section 45 of the Town Police Clauses Act 1847 (plying for hire) and one offence under Section 143 of the Road Traffic Act 1988 in respect of the lack of insurance.</p> <p>In mitigation, the Court was told the defendant had been driving for 15 years without incident and is the sole provider for his wife and 4 children.</p>	<p>The defendant was fined £450 and his licence endorsed with 6 penalty points for the offence of having no insurance. He was also ordered to pay £150 costs and a £45 victim surcharge. No separate penalty was imposed for the plying for hire charge.</p>
8.	19.8.22	<p>The owner and Designated Premises Supervisor of a convenience store pleaded guilty to 2 offences under the Licensing Act 2003. In July 2021 officers from Shared Regulatory Services, in conjunction with South Wales Police, conducted a test purchase operation with the assistance of a 16-year-old volunteer. On taking three cans of cider to the till, the young volunteer was served by the defendant's 17-year-old son. No checks were carried out to establish whether the volunteer was old enough to purchase alcohol and he was not asked to remove the face covering he was wearing at the time.</p> <p>When interviewed under caution, the defendant made a</p>	<p>The defendant was fined £307 per offence giving a total fine of £614. He was also ordered to pay costs of £500 and a victim surcharge of £61.</p>

		<p>full admission of the two offences, i.e., the sale of alcohol to someone under the age of 18, and also permitting a minor to sell alcohol without specific authorisation. The investigation demonstrated that there were no training records, no refusals register and no CCTV at the premises and the defendant did not operate a 'Challenge 25' policy.</p>	
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