



HSE Public Health Medicine
Environment and Health Group (PHMEHG)

Annual Report for 2020

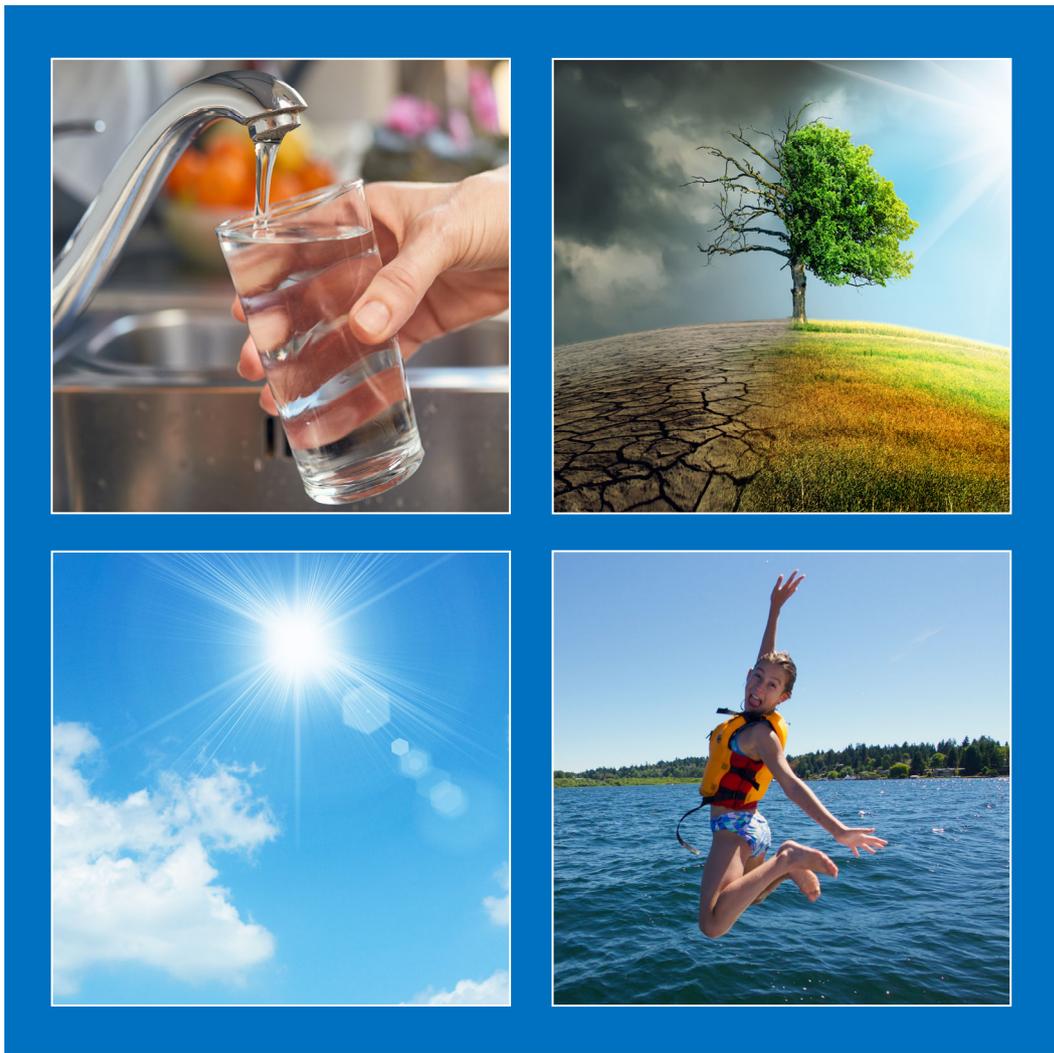


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About Annual Report 2020¹

The Public Health Medicine Environment and Health Group (PHMEHG) supports the implementation of the environmental roles and responsibilities of the Medical Officers of Health (MOH) at regional and national level as described at www.hse.ie/moh.

International and National Context - Sustainable Development Goals

PHMEHG activities also align with implementation of international and national legislation and policies including the:

- United Nations Development Programme [Sustainable Development Goals](#) (SDGs) especially SDGs 3, 6, 11, 12 and 13 (See Figure 1);
- [International Health Regulations 2005](#);
- [EU Decision on Serious Cross Border Threats 2013](#);
- [Healthy Ireland Goal 3](#) “Protect the public from threats to health and wellbeing”

¹ The report is in accordance with the Health (Duties of Officers) Order 1949 which requires Medical Officers of Health to “prepare as soon as possible after the close of each calendar year and in such form and dealing with such subjects as the Minister may from time to time direct, in addition to any other matters relating to his duties on which it may be considered desirable that he should report, an annual report for such calendar year and furnish to the county council and to the Minister such copies of such report as they may require”.

Figure 1. The key Sustainable Development Goals relevant to the PHMEHG



Goal 3 – Ensure healthy lives and promote well-being for all at all ages

Target 3.9 – By 2030, substantially reduce deaths and illnesses from hazardous chemicals, and air, water and soil pollution and contamination

This includes:

- Public Health Risk Assessment (PHRA)
- Public Health Advice
- Management of water incidents,
- Advocacy for improved air quality, and
- Management of Seveso site incidents.



Goal 6 – Ensure access to water and sanitation for all

Target 6.3 – By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally.

This includes:

- Public Health Risk Assessment (PHRA)
- Public Health Advice
- Management of water incidents.



Goal 11 – Make cities inclusive, safe, resilient and sustainable

Target 11.1 - access for all to adequate, safe and affordable housing and basic services

Target 11.2 - access to safe, affordable, accessible and sustainable transport systems for all & improving road safety

Target 11.5 – reduce number of deaths and people affected by disasters

Target 11.6 – reduce environmental impact of cities, particularly air quality and waste management

Target 11.7 – access to safe, inclusive and accessible, green and public spaces

This includes:

- Advocacy work,
- Affordable housing,
- Basic services and sanitation,
- Active transport,
- Emergency preparedness,
- Public Health Risk Assessment (PHRA)
- Public Health Advice
- Improved air quality,
- Waste management, and
- Green spaces / City Greening.



Goal 12 - Ensure sustainable consumption and production patterns

Target 12.4 – environmentally sound management of chemicals and all wastes

This includes:

- Management of Seveso site incidents.



Goal 13 - Take urgent action to combat climate change and its impacts

Target 13.1 - Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries

Target 13.2 - Integrate climate change measures into national policies, strategies and planning

Target 13.3 - Improve education, awareness-raising and human and institutional capacity on climate change mitigation, adaptation, impact reduction and early warning

This includes:

- Emergency preparedness,
- Public Health Risk Assessment (PHRA)
- Public Health Advice
- Advocacy work,
- Education, and
- Awareness raising.

PHMEHG during first year of COVID-19

During 2020, the activities of the PHMEHG were disrupted due to the advent of COVID-19 as a Public Health Emergency of International Concern. COVID-19 was the dominant health threat in Ireland in 2020, and as the members of the PHMEHG are Consultants in Public Health Medicine/Medical Officers of Health, this work was our priority. This impacted significantly on the activities of the PHMEHG and only the most urgent environment and health risks were addressed.

Some environmental threats continued to have the potential for significant acute morbidity and mortality, and members continued to assess the risks and provide the necessary health protection activities during 2020, though their capacity for this was much reduced.

During this period, non-healthcare sectors were continuing their activities, for which Public Health advice is required to minimise avoidable adverse consequences on human health, so brief Public Health input continued to be provided.

COVID-19 taught us important lessons about the value of prevention and preparedness, horizon scanning and integrated working. PHMEHG has understood the need for this, as a group of doctors working often outside the health sector to protect and improve people's health in Ireland, individually and at a population level.

This brief report highlights some of the activities of the Public Health Medicine Environment and Health Group in 2020 in line with our terms of reference. For more information on the PHMEHG please see Appendix A and the terms of reference of the group are in Appendix B.

The report was prepared by Dr. Ina Kelly, Consultant in Public Health Medicine/ Medical Officer of Health, HSE Midlands and Chair of the PHMEHG; Dr. Ann Herlihy, SpR in Public Health Medicine, HSE Midlands and outgoing Medical Secretary of the PHMEHG and Dr. Caitriona Kelly, SpR in Public Health Medicine and incoming Medical Secretary of the PHMEHG.

Summary

COVID-19 affected environment and health in many ways in 2020:

- Restricted movements reduced the use of vehicles for all except essential travel for some periods of the year.
- Active travel became more attractive to many, offering exercise, fresh air and safer transport.
- Remote working was necessarily tested and found feasible for many.
- All of these reduced the use of vehicular transport for periods, reducing some of the air pollution associated with traffic.

At the outset, it was not clear how much illness our population would suffer and there was a possibility of failures of water quality due to staff illness. However, the quality of community cooperation with infection prevention and control reduced the levels of illness such that there was little evidence of loss of business continuity in drinking water treatment.

However, we are aware that there was less frequent water testing so it was possible that significant exceedances were not identified, the consequences of which may not be evident for some time. Disruption of health services may have reduced the pick-up rate of waterborne disease.

Climate action by other sectors continued, so there were risks that major developments would occur without adequate Public Health Medicine input.

Activities in 2020

The priority for Medical Officers of Health in 2020 was to protect the population of Ireland from COVID-19. This Public Health Emergency of International Concern (PHEIC) required all the available resources of Public Health Medicine and many new resources. However, we were conscious of the potential for serious environmental hazards that could still occur, such as contaminated drinking water and air pollution, so our members addressed urgent issues as they arose.

The following table outlines progress in implementing the PHMEHG terms of reference in 2020. Of note, there was only one meeting of the PHMEHG in 2020.

Table 1. Progress in implementing objectives of the Terms of Reference of PHMEHG

Objectives as per Terms of Reference of PHMEHG	Comments on progress
1. Standardise approaches to: <ul style="list-style-type: none"> • Risk assessment of environmental hazards and concerns • Risk communication of environmental hazards and concerns • Risk management of environmental hazards and concerns • Surveillance of incidents requiring public health risk assessment 	Informal feedback from SpRs has been that the online guidance at www.hse.ie/publichealth has been found to be very useful
2. Co-ordinate work/projects requiring a national response	One submission on a public consultation
3. Provide collegiate support to each other	Ongoing
4. Provide a forum for the review of difficult incident management issues and the identification of lessons learned, potential interventions and/ or need for guidance	Only one meeting of the group in 2020
5. Develop and maintain guidance as required	Guidance was published online in 2019. No new guidance has been developed
6. Develop and maintain inter-professional work with appropriate colleagues within the Health Service Executive (HSE)	On-going

Objectives as per Terms of Reference of PHMEHG	Comments on progress
7. Develop and maintain inter-professional work with other stakeholders external to the health sector	On-going
8. Support provision of advice on environment and health issues of concern at national level to government, national bodies and other relevant agencies	On-going
9. Advocate on issues of concern as required	All efforts to advocate continued
10. Facilitate continuing professional development (CPD) and audit	Reduced CPD and no audit were required in 2020 (COVID-19 PHEIC)
11. Facilitate training of: • Current PHMEHG members from each Department of Public Health • SPHMs who participate in MOH work • Specialist Registrars (SpRs) in public health medicine (PHM)	No training was carried out in 2020
12. Support research as resources allow	On-going
13. Communicate risk to the public as appropriate	As required
14. Assist in the development of a national focal point for public health advice on environment and health	On-going
15. Monitor and review where necessary the contract for chemical advisory support with Public Health England (PHE)	As required prior to contract renewal
16. Identify capacity, infrastructure and succession planning needs to Directors of Public Health (DPHs)	On-going

Regional Reports

Regional incidents in 2020 that were addressed included:

- **East** - Chemical contamination of drinking water.
- **East** - Giardia infections possibly associated with inadequate filtration.
- **East** - Public health risk assessment (PHRA) on noise and human health related to airport.
- **North-East** - Ongoing chemical exceedances in water – reduced environmental sampling during the COVID-19 pandemic.
- **North-East** – issues with UV filtration and chlorination at treatment plants.
- **South** – Residential complaint of odour nuisance and health effects. Air quality monitoring on the property, in the vicinity of an industry, confirmed presence of contaminant – substances not normally present in ambient air. Investigation is on-going.
- **South** – National Poisons Information Centre (NPIC) consult on serious hepatotoxin incident.
- **Midlands** - PHRA on ambient air quality and risk to human health, following complaints from local residents to a County Council of malodourous black smoke emitted from a large domestic burner boiler.
- **West** - VTEC-confirmed case of hospitalised HUS infection where swimming at a beach was only identified risk factor – beach regularly has unsatisfactory water. Anecdotal report of visible contamination of water at time case was swimming.
- **Mid-West** – Chemical exceedances in drinking water.

Regional consultations included:

- **East** - Strategic housing plans –very limited public health resources during pandemic to review all housing plans.

Regional environment and health meetings included:

- **East** - Interagency bathing water.
- **East** – Environmental Impact Assessment (EIA) for a specific industry required planning for COVID-19 risks.

Reports on Areas of Expertise

Air Quality – Dr. Ian Quiltyne

Submission made on consultation on solid fuels. Ambient AQ network is continuing to expand – now up to 92 monitoring stations, majority around Dublin, but expanding to Drogheda. Ambient AQ modelling process started in January for next two years – in progress.

Water – Dr. Úna Fallon

Dept. of Environment in Ballina have a new working group on rural water, mostly private water supplies. Ongoing issues with Initial Notification Record (INR).

Bathing Water – Dr. Regina Kiernan

Bathing Water and Health guidance updated. Bathing water quality particularly important during COVID-19 pandemic as it is a blue space activity considered lower risk for onward transmission of SARS-CoV-2.

Noise – Dr. Ruth McDermott

Noise issues related to major infrastructure such as airport are requiring Public Health input and advice.

Climate – Dr. Ina Kelly

Climate Change Adaptation committees – Climate Change Advisory Council & DECC steering group meetings continued in 2020. There was a consultation on Climate Action plan.

Legislation

IK undertaking an advanced diploma medical law.

Environment & Health training

No update.

Environment and Health Learning during COVID-19

- (1) If people had adequate housing some outbreaks of COVID-19 would not have been as severe.
- (2) The improvements in air quality seen as a result of pandemic-related transport restrictions have demonstrated that changes can be made given sufficient public and political will.

Advocacy Papers

Sectors outside of the health sector may have impacts on health, so it is important that Public Health brings potential risks to the health of the public to the attention of these sectors. The PHMEHG does this through submissions to public consultations.

The following submission was made in 2020.

January 2020 - [Public Consultation on Sustainable Mobility Policy](#)

Recommendations for 2021

Continue to:

1. Provide expert advice to the relevant agencies and government departments based on evidence based public health risk assessments.
2. Contribute to national climate action especially developing climate resilience in public health and the health sector.

In addition:

3. Advocacy on housing and health is needed.
4. Advocacy on sustainable and active transport is needed.

Appendices

Appendix A: About the Public Health Medicine Environment and Health Group (PHMEHG)

Governance

The Public Health Medicine Environment and Health Group is a group of Consultants in Public Health Medicine (CPHMs) who represent all those who implement [the Medical Officer of Health \(MOH\) functions](#) in the Environment and Health area of Health Protection. The group reports to the Directors of Public Health and all departments of Public Health are represented, so the coverage of the group is national. See Appendix 1 for the main terms of reference as updated in 2017.

MOH Legislation relevant to the Environment

The main Medical Officer of Health functions for Environment and Health are described in the Health (Duties of Officers) Order, 1949 (S.I. No. 128 of 1949)² which includes the following roles:

- A. *Inform ourselves “as respects all influences affecting or threatening to affect injuriously the public health in the county and as respects the causes, origin and distribution of diseases in the county”.*
- B. *“Advise the county council – generally in relation to the health of the people and the provision of health services, sanitary services and housing accommodation”*

These statutory functions provide for health protection functions including:

- Public Health Risk Assessment in environmental emergencies and acute and on-going environmental incidents
- Environmental epidemiology
- Cluster investigations
- Public health medical advice to the appropriate authorities
- Advocacy on environmental matters

In addition, where there is an environmental source of an infectious disease, Infectious Diseases Regulations, 1981 is also implemented by MOHs. There is also environmental legislation which cites the HSE (or health board) as a prescribed body, including [Planning and Development Regulations 2001](#) as amended, [Drinking Water Regulations](#), [Bathing Water Regulations](#), [European Communities \(Environmental Liability\) Regulations 2008](#), [Waste Management \(Management of Waste From the Extractive Industries\) Regulations 2009](#)

Directive EPA Act on IPC, Strategic Environmental Assessment (SEA) etc. This legislation does not mention MOHs, but as the purpose is generally to protect the health of the public, therefore MOHs are informed. MOH legislation as above then provides for the assessment and advisory roles of the MOH when informed.

Medical Officer of Health function in relation to the Environment

The [Medical Officer of Health function](#) is implemented on a regional basis. The regions are those of the Departments of Public Health – East, West, South, Mid West, South East, North West, North East and the Midlands. At national level, the Medical Officer of Health function is implemented by the HSE National Director of Health Protection.

² Health (Duties of Officers) Order, 1949 Available at: <http://www.irishstatutebook.ie/eli/1949/si/128/made/en/print>
HSE Public Health Medicine Environment and Health Group

Appendix B: Terms of Reference of the Public Health Medicine Environment and Health Group

To assist in the implementation of the Medical Officer of Health (MOH) function at regional and national level by:

1. Providing a forum for sharing of clinical and Public Health expertise on environmental public health hazards in Ireland between Specialists in Public Health Medicine (SPHMs)/ MOHs in the Departments of Public Health
2. Supporting the provision of consistent evidence-based advice from Departments of Public Health to national bodies and agencies as required

Objectives

1. Standardise approaches to:-
 - a. Risk assessment of environmental hazards and concerns
 - b. Risk communication of environmental hazards and concerns
 - c. Risk management of environmental hazards and concerns
 - d. Surveillance of incidents requiring public health risk assessment
2. Co-ordinate work/projects requiring a national response
3. Provide collegiate support to each other
4. Provide a forum for the review of difficult incident management issues and the identification of lessons learned, potential interventions and/ or need for guidance
5. Develop and maintain guidance as required
6. Develop and maintain inter-professional work with appropriate colleagues within the Health Service Executive (HSE)
7. Develop and maintain inter-professional work with other stakeholders external to the health sector
8. Support provision of advice on environment and health issues of concern at national level to government, national bodies and other relevant agencies
9. Advocate on issues of concern as required
10. Facilitate continuing professional development (CPD) and audit
11. Facilitate training of:
 - a. Current PHMEHG members from each Department of Public Health
 - b. SPHMs who participate in MOH work
 - c. Specialist Registrars (SpRs) in public health medicine (PHM)
12. Support research as resources allow
13. Communicate risk to the public as appropriate
14. Assist in the development of a national focal point for public health advice on environment and health
15. Monitor and review where necessary the contract for chemical advisory support with Public Health England (PHE)
16. Identify capacity, infrastructure and succession planning needs to Directors of Public Health (DPHs)

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