

Tackling tuberculosis (TB) in London

The Health Committee is using its meetings on 24 June and 8 July to investigate tuberculosis (TB) in London. The scope and terms of reference for the investigation have been agreed by the Chair in consultation with the Deputy Chair.

Terms of reference

The proposed terms of reference for the investigation are:

- To examine how the new national TB Strategy will be implemented in London
- To consider how the Mayor and the GLA could further support the reduction of TB in London

Scope

It is proposed that the Committee's investigation focuses on practical steps that can be taken by the Mayor and other agencies in London to improve the prevention, diagnosis, and treatment of TB across London. This relates both to the Mayor's statutory duty to have regard for health inequalities in London, and the acknowledgement in the national strategy that local government has an increasingly crucial role to play in TB control. The investigation will seek to identify the particular elements of the strategy which would benefit from a pan-London strategic focus, and how the Mayorality can further use its influence and existing policy levers to tackle TB in the capital.

Background

TB is a bacterial infection. It can affect any part of the body, but most commonly the lungs (pulmonary TB). It is an airborne disease, although transmission is most likely to occur among close contacts of an infected person. TB is a serious condition but it can be effectively treated in most cases. However, multiple drug resistant TB is on the rise and compliance with medication is important. Early diagnosis, effective treatment and contact tracing are essential to control the spread of this disease.

TB has been identified as one of Public Health England's key priorities, and in January 2015 it launched a collaborative national strategy to address TB across England. London has among the highest incidences of TB disease of any western European city and almost forty per cent of all UK cases occur in London. In 2013 there were 2,985 cases of TB disease notified in London, compared to 2,719 new diagnoses of HIV in the same period. The World Health Organisation (WHO) defines a disease rate of 40 per 100,000 people as high. London's overall rate is 39.6 per 100,000. However, there is significant variation across the city: eleven boroughs currently exceed the 40/100,000 threshold. High incidence in London strongly correlates with areas of high deprivation.

Role of the Mayor

The link between TB and health inequality is clearly defined, with significant variation in incidence and prevalence across different boroughs and in different communities. TB experts place a strong emphasis on the need to address the social factors that contribute to London's high TB caseload, alongside clinical

interventions. This brings aspects of TB control directly into the focus of a number of Mayoral priorities and work streams beyond the health remit, including housing, diversity & social policy, planning and community relations, relating the issue directly to the Mayor's duty to have regard for health inequalities in London when developing his policies. Beyond this, the Mayorality is ideally placed to consider the issue at a pan-London level and provide strategic leadership on efforts to tackle TB.

Focus of investigation

The Committee would seek to understand the current challenges facing authorities trying to tackle TB in their local areas and at a citywide level. This could include looking at best practice in areas that have made positive practical steps in reducing TB incidence, at a local, national and international level. The investigation would seek to identify areas in which the Mayorality could influence and engage with other agencies and the wider public to raise awareness of TB in London as an area for sustained focus.

The Committee would seek to examine how both clinical and community-based service providers in London can be supported to deliver the national TB strategy. It will look at ways of strengthening links between key agencies on issues beyond the immediate reach of clinicians, such as raising awareness of TB as a public health issue for London, the implications for policy makers and commissioners, challenging stigma and discrimination, and engaging with hard to reach groups.

The Committee will also seek to engage with people who currently have, or have had, TB, to determine how the experience of service users can be used to achieve better outcomes for TB in London in the future.

Methodology

Members of the Committee attended a site visit to the Whittington Hospital TB Centre to meet patients and clinicians working on TB (March)

Key questions

A call for written views and evidence would be launched as part of the investigation. Key questions would include:

- Why is it important to focus on TB in London now?
- What are the main challenges for improving prevention, diagnosis and treatment of TB in London?
- Which agencies and organisations need to be involved in tackling TB?
- How can the Mayor and the GLA support the delivery of the national TB strategy in London?
- How do stigma and discrimination affect TB control in London?
- What examples of good practice are there in London (and further afield) in TB control?
- How can we engage London's communities to tackle TB?
- How can agencies work together more effectively to tackle TB in London?

Key stakeholders

The Committee would seek to engage with a broad range of stakeholders during this investigation, including:

The Mayor
TB healthcare workers
Patient representatives
London Councils/boroughs
Clinical Commissioning Groups (CCGs)
Public Health England
NHS London
Third sector/voluntary organisations supporting efforts to tackle TB
Other third sector organisations working with high-risk groups
Department of Health
Public Health England - London
Academic and research organisations
Faith/community/outreach groups

Meetings

The Committee will use its formal meetings in June and July to investigate this topic:

- The first meeting will consider, with TB clinical practitioners and Public Health England, the current landscape for TB control in London, including how the national strategy might be implemented in London.
- The second meeting, with TB peer advocates, and representatives from local authorities and the third sector, will focus on the role of the Mayor and other agencies in addressing the wider social factors which contribute to London's high rates of TB, and practical steps to increase community engagement and public awareness.

Further informal meetings and/or site visits could be arranged with key stakeholders.

Assessing public awareness and attitudes

The Committee will commission a population-wide survey of London residents, to establish current levels of awareness of, and attitudes towards, TB as a public health issue for London. The survey will seek to examine potential barriers to prevention and diagnosis, and identify areas for future targeted awareness raising and communications strategies for challenging misconceptions about TB which can delay diagnosis and affect treatment outcomes.