Review of parts 2, 5 and 6 of the Public Health (Control of Disease) Act 1984: A consultation

EVIDENCE SUBMITTED BY THE SOCIETY FOR GENERAL MICROBIOLOGY (SGM)

Introduction
The Society for General Microbiology, founded in 1945, is an independent professional scientific body dedicated to promoting the ‘art and science’ of microbiology. It has now established itself as one of the two major societies in the world in its field, with some 5,500 members in the UK and abroad.

General Comments

The reasons for revising the legislation are in part historical, in part formal, and in part based on recent cogent and novel experience.

On the whole the measures to be taken/introduced seem to be carefully considered, in particular by taking modern human rights legislation seriously into account.

Specific Comments

Page Comment

5 Background. Paragraph 1. Mention avian influenza viruses, Nipah and Hendra viruses, West Nile Fever Virus, Sin nombre virus.

7 Reasons for revision:
- age of content
- piecemeal approach of previous modifications at different times
- new development re exposure to chemicals and radiation leading to an all hazard approach
- revision to allow to take into account modern human rights legislation and IHR 2005 are all valid. Just the right balance and balancing of these considerations will be required in the revised law text.

9 Under 2.19 Appendix H should be mentioned.

11 2.24. The Part II repeal and review proposals address measures that are already in place in other European countries. It speaks for the legislative considerations that they are cautious, taking human rights which may be affected seriously into account.
3.2. The proposal to set out general principles of intervention is supported. The definition for intervention according to art 2 of the IHR 2005 (see 3.21) is appropriate.

3.5. General principles would include a risk-benefit (damage-human rights) analysis. Points a-f mentioned are appropriate. Several examples of cases should be given where basic human rights may justifiably be affected, e.g. in case of an HIV-infected person who keeps partners in the dark in passing on the infection, persons with open lung tuberculosis etc.

14 The proposal to be all-encompassing is well intended, however, the difference between (contagious) infections and toxic/chemical agents which are not self-replicating should be made. Against toxic agents, physical environment containment (e.g. of water sources, ventilation systems etc) is most important and takes precedence over the blockage of contact among people and animals. Mostly, intoxicated people are not infectious for their environment. Thus, whilst the move towards generalized entitlement to order countermeasures is understandable, there should be a differentiating approach.

15 3.13. The new powers should be differentiated as soon as a decision can be made on whether or not an infectious agent is involved.

16 3.19. An index with definitions of the technical terms used is highly desirable.

19 3.23. Measures should include animals where appropriate.

20 Proposal 4.4 strongly agreed.

21 4.6. Organisations to be involved in applications for an order could be – besides the local authority – non-departmental public bodies such as the Health Protection Agency (HPA), the Veterinary Laboratories Agency (VLA), the Food Standards Agency (FSA), etc.

22 4.8 and 4.9. These considerations should be dealt with by legal professionals.

23 4.11 to 4.17. Compensation should be considered for cases where measures damage an individual/things or a group without them willingly or malevolently having contributed to a situation in which a measure is indicated.
4.15. Orders restricting individuals in their move should be reviewed in short intervals.

4.17, bullet point 1, line 3. Replace ‘bacteriological’ by ‘microbiological’ (to include viruses, unicellular parasites, fungi, etc).

5.1. Agreed.

5.5. There should be no exclusion of procedures as long as they are considered appropriate under the circumstances and as long as confidentiality is maintained.

5.7. Agreed.

5.10. Agreed in principle. Individual cases require careful and not-summarizing considerations (case-to-case decisions).

5.11. Agreed. See also 10.7, page 47. However, refusal of treatment may have restrictions, e.g. of movements, as a consequence (see. 5.14). Decontamination is a measure to be counted as treatment only by borderline and may be strongly indicated as a measure of public hygiene. As such it could not be reasonably refused.

5.16. Order to a group before having their views/wishes explored should be an exemption and in general would not reflect good policy.

6.1 to 6.2. Existing powers seem to suffice.

7.3. Information required according to the IHR 2005 definition of a situation seems to be appropriate. Confidentiality issues should be looked at by legal professionals. There are reliable techniques to anonymize information required for epidemiological surveillance of communicable diseases.

Point 7.6 should be checked legally.

Point 7.9. Agreed. However, means have to be provided to run laboratories, registers etc in order to ensure continuous and reliable surveillance for communicable diseases.

8.3. Proposal supported.

8.4-8.13. Matters for legal considerations.


9.11. Supported.
Point 10. In general these are legal matters. However, a person arriving at a border requiring and agreeing to urgent treatment should not be denied it. Restrictive measures may accompany such action.

10.18. Agreed.

Point 11. A general repeal of part V of the Public Health Act 1984 seems to be reasonable as the issues are covered by other parts of the Revised Act or by Criminal law.

Point 12. Legal considerations.
Sources
This evidence has been prepared on behalf of SGM by Dr Ulrich Desselberger.

About the SGM
Society membership is largely from universities, research institutions, health and veterinary services, government bodies and industry. The Society has a strong international following, with 25% of membership coming from outside the UK from some 60 countries.

The Society is a ‘broad church’; its members are active in a wide range of aspects of microbiology, including medical and veterinary fields, environmental, agricultural and plant microbiology, food, water and industrial microbiology. Many members have specialized expertise in fields allied to microbiology, including biochemistry, molecular biology and genetics. The Society’s membership includes distinguished, internationally-recognised experts in almost all fields of microbiology.

Among its activities the Society publishes four high quality, widely-read research journals (Microbiology, Journal of Medical Microbiology, Journal of General Virology and International Journal of Systematic and Evolutionary Microbiology). It also publishes a highly respected quarterly magazine, Microbiology Today, of considerable general educational value. Each year the Society holds two major scientific meetings attended by up to 1500 microbiologists and covering a wide range of aspects of microbiology and virology research.

The governing Council of the SGM has a strong commitment to improving awareness of the critically important role of microbiology in many aspects of human health, wealth and welfare. It has in this connection recently initiated a ‘Microbiology Awareness Campaign’ aimed at providing information to the government, decision makers, education authorities, media and the public of the major contribution of microbiology to society.

An issue of major concern to the Society is the national shortage of experienced microbiologists, particularly in the field of clinical microbiology and in industry. To attempt to improve this situation long-term, the Society runs an active educational programme focused on encouraging the teaching of microbiology in university and college courses and in the school curriculum, including primary schools. Some 400 schools are corporate members of SGM.