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OVERVIEW

Statement from the Chair

We are pleased to present the annual report for the National Travel Health Network and Centre (NaTHNaC) which covers the period 1 April 2020 to 31 March 2021.

The COVID-19 pandemic has had a major impact world-wide and on almost all aspects of our lives. Therefore, it is not unexpected that the work of NaTHNaC has also been affected. Early on in the pandemic the workload of NaTHNaC increased greatly, as outlined in last year’s report. Travel restrictions, which were in place for much of the last year, have meant that demand for travel services and advice fell significantly.

As expected as travel ceased, the total number of page views to the TravelHealthPro website fell from an all time high of over 12 million in 2019-20 to 4,675,120 this year. The vast majority of these page views were related to information about COVID-19.

Calls to the Telephone advice line offering support to health professionals by specialist nurses were also down from 4938 last year to 377 this year, as those with complex travel needs were less likely to travel.

Despite the downturn in travel, NaTHNaC’s Twitter and Facebook pages continue to attract more followers. By June 2021, NaTHNaC had 3,844 Twitter followers – up from 3677 in June 2020 and 3262 in 2019, and 2,274 followers on Facebook (2173 in June 2020 and 1966 June 2019).

During this time, the NaTHNaC team continued to respond to the changing situation and the range of topics covered on TravelHealthPro was expanded to further special risk traveller groups. When classroom training for Yellow Fever Centres was stopped in March 2020; a revised e-Learning option was developed. Participants can complete the e-Learning alone, or supplement their learning with virtual classroom training. A total of 1426 health professionals completed yellow fever training during the year.

The NaTHNaC team continued to work remotely throughout the year and to respond flexibly to the ever changing situation. I would like to thank them for their resilience, hard work and patience during this time as they continue to protect the health of British Travellers as outlined in this report.
We would also like to thank the continuing support of our commissioners Public Health England (PHE), hosts University College London Hospitals (UCLH), and partners on NaTHNaC’s Technical Advisory Group.

This has been a challenging year, but I know NaTHNaC will continue to respond to any developments required to best serve the needs of British travellers.

Professor Dilys Morgan
GOVERNANCE

The National Travel Health Network and Centre (NaTHNaC) was created by the Department of Health in 2002. We are now commissioned by Public Health England (PHE) and work in partnership with our network founders:

- The Hospital for Tropical Diseases
- Liverpool School of Tropical Medicine
- London School of Hygiene and Tropical Medicine
- Public Health England
- University College London Hospital (UCLH) NHS Foundation Trust

NaTHNaC’s broad aim is to protect the health of the British traveller, and it does this by providing evidence-based advice and information to health professionals, travellers, the travel industry, and national government, as well as training for health professionals and the travel industry.

NaTHNaC Technical Advisory Group

The NaTHNaC Technical Advisory Group (TAG) was formed in April 2014 and has representation from each of the NaTHNaC partners plus PHE, UCLH NHS Foundation Trust and the Department of Health. NaTHNaC is grateful for the support of each member organisation.

Technical Advisory Group Members:

Dr Nick Beeching  Liverpool School of Tropical Medicine
Dr Michael Brown  University College London Hospitals NHS Foundation Trust
Dr Joanne Cayford  Journalist and Radio Producer (observer)
Dr Vanessa Field  NaTHNaC
Prof David Lalloo  Liverpool School of Tropical Medicine
Prof James Logan  London School of Hygiene and Tropical Medicine
Dr Nicky Longley  Hospital for Tropical Diseases
Prof Dilys Morgan  Chair
Dr Dipti Patel  NaTHNaC
Prof Nick Phin  Public Health England (until January 2021)
Dr Fiona Yung  University College London Hospitals NHS Foundation Trust
NaTHNaC Senior Management Team (SMT)

The current NaTHNaC SMT was established in June 2012. The NaTHNaC SMT consists of the director, deputy director, operations manager, senior nurse, deputy senior nurse, and clinical adviser. It is chaired by the director and meets on a quarterly basis. The SMT is responsible for the strategic and operational management of NaTHNaC and implementing any policies and strategies as agreed by the Technical Advisory Group.

NaTHNaC Team

NaTHNaC’s expertise is provided by 18 staff and has two bases in London and Liverpool. Staff include doctors, a pharmacist, nurses, an information analyst, and administrators (see organogram on page 6).

Fatima Abba  Specialist Pharmacist Adviser, London (from August 2020)
Lynda Bramham (LB)  Specialist Nurse Adviser, Sheffield
Terence Corrigan (TC)  Online Communications & Development/Data Officer, London
Anisha Desai (AD)  Information Analyst Intern, London (until September 2020)
Gareth Egerton (GE)  Information Analyst Intern, London (until February 2021)
Dr Vanessa Field (VF)  Deputy Director, London
Rachael Fletcher (RF)  Specialist Nurse Adviser, London
Dr Lisa Ford (LF)  Clinical Adviser, Liverpool
Mary Gawthrop (MG)  Specialist Nurse Adviser, London
Zaina Hanif (ZH)  Business Support Assistant, London
Sanch Kanagarajah (SK)  Senior Information Analyst, London
Dr Kirsten MacGregor (KM)  Clinical Fellow, London (until September 2020)
Masum Miah (MM)  Operations Manager, London
Linda Pang (LP)  Administrative Assistant, London
Dr Dipti Patel (DP)  Director, London
Hilary Simons (HS)  Senior Specialist Nurse, Liverpool
Alexandra Stillwell (AS)  Specialist Nurse Adviser, London
Rose Tucker (RT)  Specialist Nurse Adviser, Derbyshire
NaTHNaC Organogram

Senior management team

- Director
  - Senior Nurse
    - Deputy Senior Nurse
      - Specialist Advisers (Travel Health)
  - Clinical Adviser
  - Deputy Director
  - Senior Information Analyst
    - Analyst Intern
  - Clinical Fellow
    - Admin Assistant
  - Operations Manager
    - Data Officer
    - Business Support Assistant
FINANCIAL REVIEW

The financial statement covers the period from 1 April 2020 to 31 March 2021.

NaTHNaC receives operating fund from three sources:

1. **Public Health England**
   
   PHE provides core funding for NaTHNaC on an annual basis, and commissions NaTHNaC to carry out its work, including the programme for Yellow Fever Vaccination Centres (YFVCs). NaTHNaC is hosted by the UCLH NHS Foundation Trust, and its headquarters are at 250 Euston Road, London. All monies received from PHE are administered through the Trust, and all London-based NaTHNaC personnel (with the exception of the Directors) are employed by the Trust. The Directors are employees of PHE, and Liverpool staff are employees of Liverpool School of Tropical Medicine.

2. **The Yellow Fever Vaccination Programme**
   
   Income from the yellow fever programme comprises both YFVC registration fees and training fees. Registration fees from YFVCs are assigned to the year of receipt and the subsequent year depending upon the period of registration of the individual centre (YFVCs have the option of registering for one or two years).

   Yellow fever training programme fees are targeted to recover costs and may be carried over into subsequent years.

3. **Other Income**
   
   NaTHNaC has additional income streams including provision of data feeds and training (non-yellow fever). These contribute a small amount to the operating budget.

Expenditure is divided between the two sites where NaTHNaC operates: the UCLH NHS Foundation Trust in London and the Liverpool School of Tropical Medicine.
## NaTHNaC Financial Report

### 2020/21

<table>
<thead>
<tr>
<th>INCOME</th>
<th>£</th>
<th>£</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual Funding (PHE)</td>
<td>257,479</td>
<td></td>
</tr>
<tr>
<td>Registration Fees - released &amp; collected</td>
<td>400,123</td>
<td></td>
</tr>
<tr>
<td>Training Fees</td>
<td>311,226</td>
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</tr>
<tr>
<td>Other Income</td>
<td>9,465</td>
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<tr>
<td><strong>TOTAL INCOME</strong></td>
<td><strong>978,293</strong></td>
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<table>
<thead>
<tr>
<th>EXPENDITURE</th>
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<tbody>
<tr>
<td>Pay UCL H</td>
<td>442,502</td>
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<tr>
<td>LSTM</td>
<td>114,802</td>
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<tr>
<td><strong>TOTAL EXPENDITURE</strong></td>
<td><strong>557,304</strong></td>
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<tr>
<td>Training Costs</td>
<td>1,362</td>
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<tr>
<td>Rent, Rates and Utilities</td>
<td>33,066</td>
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<tr>
<td>General Expenditure</td>
<td>180,116</td>
<td></td>
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<tr>
<td><strong>TOTAL EXPENDITURE</strong></td>
<td><strong>214,544</strong></td>
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</tbody>
</table>

### OPERATING PROFIT / LOSS

- Prior Year PHE Contribution | 0 |
- **SURPLUS / (DEFICIT)** | **206,445** |

### Notes/Assumptions

- Registration fees carried forward related to cash received for registrations relating to future years
- Liverpool School of Tropical Medicine overheads are charged at 25% costs
- UCLH overheads are charged at 15% of PHE income plus partial accommodation costs.
OPERATIONS

This section reviews NaTHNaC’s five key service areas, describing how they helped meet our core objectives for 2020–2021, and achieve the broad aim of “Protecting the Health of British Travellers”.

Operations were significantly impacted by the COVID-19 pandemic. The whole NaTHNaC team moved to remote working during the week of the 20th March 2020 and continue to work remotely. Further information on NaTHNaC’s role in the pandemic response is provided below.

Key Service Areas

1. Communication and information services
2. International health surveillance
3. Partnerships and collaboration
4. Telephone advice line service
5. Yellow fever vaccination programme

Core Objectives

1. Develop consistent and authoritative national guidance on general health matters for health professionals advising the public travelling abroad, and to disseminate this information widely.
2. Provide guidance on specific situations relating to the health of travellers.
3. Carry out surveillance of infectious and non-infectious hazards abroad, producing accessible regular outputs of such surveillance.
5. Engage the major stakeholders concerned with travel health, especially the travel industry, insurance industry and government bodies, to assist in sentinel surveillance and to engage in constructive dialogue towards a unified approach.
6. Facilitate, in collaboration with other training providers, the training of healthcare and other personnel in the provision of best quality travel health advice, based on such evidence as is available.
7. To define short-term and long-term research priorities in relation to travel medicine.
ORGANISATIONAL ACHIEVEMENTS

1. Communication and Information Services (core objective: 1,2,3,5,7)

Website: Dynamic, evidence-based information for health professionals and travellers

Between April 1\textsuperscript{st} 2020 and March 31\textsuperscript{st} 2021, the total number of page views to the TravelHealthPro website was \textbf{4,675,120}, (decreased from \textbf{12,384,738} page views in 2019-20, due to the downturn in global travel).

The Top 10 most popular pages included country information pages for Turkey, Greece, Spain, Italy and France, as well as news items relating to COVID-19.

Among the Top 10 most popular factsheets were COVID-19 risk assessment, insect and tick bite avoidance and food and water hygiene with \textbf{41,508}, \textbf{21,549} and \textbf{17,344} unique page views, respectively.

The range of topics covered on TravelHealthPro was expanded to further special risk traveller groups including neurological conditions, respiratory diseases, sickle cell and thalassaemia, supporting travellers with obesity.

Social Media

NaTHNaC’s Twitter and Facebook pages continue to attract more followers. By June 2021, NaTHNaC had 3,844 Twitter followers and 2,274 followers on Facebook.
2. International Health Surveillance (core objectives: 1,2,3,5,7)

Identification and reporting of health events of importance to British travellers

Between April 1\textsuperscript{st} 2020 and March 31\textsuperscript{st} 2021, NaTHNaC posted 59 news items which described global health events of importance to British travellers with recommendations as to how to reduce travel related health risks.

A total of 275 outbreak notices were entered on the NaTHNaC outbreak surveillance database during 2020-2021. Of these, 167 (60.7\%) were updates to existing outbreak notices. The most commonly reported diseases were COVID-19, Ebola, influenza, yellow fever and polio.

3. Partnerships and Collaborations (core objectives: 5,6)

NaTHNaC continues to work closely with the Foreign, Commonwealth and Development Office (FCDO) and Association of British Travel Agents (ABTA). These relationships have proved to be vital during the pandemic, enabling clear and consistent messages to be communicated to the British travelling public.

NaTHNaC continued its partnership with the Public Health Forum of the Royal College of Nursing (RCN) and planned a virtual joint conference for May 2021.

NaTHNaC continues to work with the Liverpool School of Tropical Medicine to run the Professional Diploma in Travel Health.

NaTHNaC currently license data to two commercial organisations.
4. Telephone Advice Line Service (core objectives: 2,6,7)

Offering support to health professionals who are consulting with complex travellers

377 CALLS

From 1st April 2020 to 31st March 2021 specialist nurses answered 377 calls. This significant reduction from previous years is due to the downturn in global travel.

5. Yellow Fever Vaccination Programme (core objectives: 1,2,4)

Registration, clinical standards, training and audit

NaTHNaC works with the Medicines and Healthcare products Regulatory Agency, Public Health England, vaccine manufacturers and distributors to ensure YFVCs are kept well informed and supported regarding YF vaccine supplies.

NaTHNaC monitors quality standard of YFVCs and works closely with various independent health care regulators in England, Wales and Northern Ireland.

In 2020-2021, there were a total of registered 2277 centres, of which 122 were new centres. A total of 247 YFVC withdrew their YF registration; 350 were de-designated by NaTHNaC.

Due to the COVID-19 pandemic, classroom training was stopped in March 2020. A revised e-Learning option was developed, and in August 2020, training switched to an online format in full. Participants can complete the e-Learning alone, or supplement their learning with virtual classroom training. A total of 1426 health professionals completed yellow fever training during the year.

The 88% response rate from YFVCs to the online Annual Return of YF vaccine use was similar to previous years.
6. COVID-19 Response

Since January 2020, NaTHNaC has been involved in supporting PHE’s COVID-19 response. NaTHNaC has worked closely with PHE’s International Cell and had a key role in disseminating COVID-19 travel health information to travellers, health professionals advising travellers, the travel industry, and the FCDO. NaTHNaC contributes to the International Cell biweekly report which is circulated to key stakeholders across the COVID-19 incident response and within government.

In 2020-2021, 33 COVID-19 specific or related news items and factsheets were posted. A total of 199 updates were made to these pages. Updates were made to an additional 21 factsheets to include information on COVID-19, and 219 new COVID-19 items were posted on the NaTHNaC Outbreak Surveillance Databases, with 192 updates.

In July 2020, NaTHNaC introduced a traveller email enquiry service for those who were wanting to travel. NaTHNaC received 134 enquiries from travellers from July 2020 to March 31st 2021. Most queries are related to travel restrictions, testing for travel purposes, and quarantine requirements.
TEAM ACTIVITIES FOR 2020 – 2021:

LB  Lynda Bramham  SK  Sanch Kanagarajah
VF  Vanessa Field   DP  Dipti Patel
RF  Rachael Fletcher HS  Hilary Simons
LF  Lisa Ford  AS  Alexandra Stillwell
MG  Mary Gawthrop

A. Professional Activities (*new activities)

<table>
<thead>
<tr>
<th>International</th>
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<tbody>
<tr>
<td>CISTM17</td>
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<tr>
<td><em>The Changing Face of Travel Medicine: Anticipating Its Global Impact</em></td>
</tr>
<tr>
<td>Member, Scientific Program Committee*</td>
</tr>
<tr>
<td>EuroTravNet</td>
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<tr>
<td>Board Member</td>
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<tr>
<td>GeoSentinel Tracking and Communications Working Group</td>
</tr>
<tr>
<td>Chair</td>
</tr>
<tr>
<td>International Society of Travel Medicine (ISTM)</td>
</tr>
<tr>
<td>Member, Continuous Professional Development Committee</td>
</tr>
<tr>
<td>Member, Publications Committee</td>
</tr>
<tr>
<td>Member, Professional Education Committee</td>
</tr>
<tr>
<td>Member, Travel for Work Special Interest Group</td>
</tr>
<tr>
<td>Member, Digital Communications Committee</td>
</tr>
<tr>
<td>8th Northern European Conference on Travel Medicine</td>
</tr>
<tr>
<td>Member, Steering Committee</td>
</tr>
<tr>
<td>Member, Scientific Committee</td>
</tr>
<tr>
<td>Travel Medicine and Infectious Diseases</td>
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<tr>
<td>Assistant Editor</td>
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<tr>
<td>Editorial Board</td>
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<tr>
<td>World Health Organisation</td>
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<tr>
<td>Member, Guideline development group (GDG) for International Travel Health</td>
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<tr>
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<tr>
<td>Member, International Travel Health Guideline development group (GDG) for COVID-19*</td>
</tr>
<tr>
<td>Member, International Health Regulations (IHR) Emergency Committee for Polio</td>
</tr>
<tr>
<td>Roster of Experts in Travel Medicine</td>
</tr>
<tr>
<td>Member, Scientific and Technical Advisory Group on Geographical Yellow Fever Risk Mapping</td>
</tr>
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</table>

**National**

<table>
<thead>
<tr>
<th>Observer, Joint Committee on Vaccination and Immunisation</th>
<th>DP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Member, Travel Subcommittee</td>
<td>VF DP</td>
</tr>
<tr>
<td>Secretariat, Travel Subcommittee</td>
<td>LB</td>
</tr>
<tr>
<td>Member, PHE Advisory Committee on Malaria Prevention</td>
<td>VF DP</td>
</tr>
<tr>
<td>Member, Association of British Tour Operators (ABTA) Destination Health and Safety, Public Health and Infrastructure Risk Management Collaborative Working Group</td>
<td>VF</td>
</tr>
<tr>
<td>Chair, Imported Fever Service Governance group</td>
<td>DP</td>
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<tr>
<td>Member, MoD Tropical Medicine Study Group</td>
<td>DP</td>
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<tr>
<td>Member, DHSC COVID-19 Prophylaxis Oversight Group*</td>
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<tr>
<td>Board of Examiners, Liverpool School of Tropical Medicine. Diploma in Travel Health</td>
<td>DP HS</td>
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<tr>
<td>Member, Faculty of Occupational Medicine Ethics Committee</td>
<td>DP</td>
</tr>
<tr>
<td>Chair, Society of Occupational Medicine, Travel Medicine Special Interest Group</td>
<td>DP</td>
</tr>
</tbody>
</table>

**B. Publications**

**Journal Articles**


**Other Publications**

Gawthrop, M. Advising Hajj and Umrah travellers in general practice. Practice Nursing, April 2020, 31(4), 156-161

Gawthrop, M. Travel and COVID-19: what the practice nurse needs to know. September 2020 Practice Nursing 31(9), 369-373

Gawthrop, M. Travelling abroad? Are you protected against measles? Value of Vaccines Campaign, Media Planet, 10 December 2020

**C. Education and Training**

**Liverpool School of Tropical Medicine**
- Lecturer, Diploma of Tropical Nursing
- Examiner, Diploma of Tropical Nursing
- Lecturer, Diploma of Tropical Medicine and Hygiene
- Lecturers, Diploma in Travel Health

**Manchester University**
- Lecturer, Tutor, and Supervisor, MSc Occupational and Environmental Medicine

**University College London**
- Examiner, MBBS Finals

**NaTHNaC**
- Trainers, Yellow Fever Vaccination Centre Training Seminars, England, Wales and Northern Ireland
- Aspects of Travel Health Training Workshops: New to Travel Health and Updates
- Getting to Grips with COVID-19: a series of drop-in sessions for health professionals*
NaTHNaC thanks our partner organisations for their support, expertise, and commitment to ‘Protecting the Health of British Travellers’