

# HEALTH OVERVIEW AND SCRUTINY COMMITTEE 16 NOVEMBER 2020

# **VACCINATION SCHEMES**

# **Summary**

- 1. The Health Overview and Scrutiny Committee (HOSC) is to be briefed on the effectiveness of vaccination/immunisation schemes, which is part of the Committee's work programme.
- 2. This report provides a status report on childhood and flu vaccinations in Worcestershire and aims to provide assurance that all partners are working together to ensure good protection against flu and other vaccine preventable diseases.
- 3. Representatives have been invited from NHS England and NHS Improvement (NHSEI), as well as from the Council's Public Health Team and Herefordshire and Worcestershire Clinical Commissioning Group (CCG).
- 4. The objectives of the report are to:
  - a. Describe the NHS commissioned immunisation programme including roles and responsibilities and the range of providers involved
  - b. Review performance concentrating on the routine childhood immunisation and flu programmes
  - c. Describe local initiatives to improve uptake, quality and safety

# **Background**

- 5. Worcestershire has higher childhood and flu immunisation uptake than the England average. There is a local and national small but sustained drop in childhood immunisation uptake over several years. This is complex to explain, and a multifaceted approach is required.
- 6. The importance, safety and effectiveness of vaccines must be communicated to parents to counteract the anti-vaccination movement and disinformation on social media.
- 7. Providers must offer immunisation services in a culturally aware and highly accessible way, making it clear that a COVID safe environment is being provided. All stakeholders need to work together to promote immunisations.

#### Overview

- 8. The World Health Organisation says that "the two public health interventions that have had the greatest impact on the world's health are clean water and vaccines".
- 9. The NHS provides free vaccinations against many diseases in childhood,

adolescence, adulthood, pregnancy and older age. The aim is to prevent illness and death associated with infectious disease. Immunisation also helps reduce the capacity pressures on NHS treatment services and is a key winter plan intervention.

- 10. Some immunisations are given routinely to everyone whilst others are targeted to those most at risk. The immunisation schedule is summarised in Appendix 1. It protects against many potentially dangerous diseases including measles and flu.
- 11. Pre-school immunisations are provided by GP practices at 5 scheduled appointments between 8 weeks and 3 years 4 months of age. School Age Immunisation Services (SAIS) provide further immunisations to teenagers in school Year 8 and 9. Vaccination UK is the SAIS provider for Worcestershire.
- 12. The aim is to achieve 95% uptake in the childhood immunisation programmes so that 'herd immunity' is achieved which is the level of uptake where outbreaks are unlikely to occur or be sustained.
- 13. Flu immunisations are provided by GP Practices, Community Pharmacies, Maternity Services, NHS Trusts (for staff and patients) and SAIS providers (Table 1). Most vaccinations are delivered between September and December each year.
- 14. The responsibility to immunise Health Care Workers (HCWs) and Social Care Workers (SCWs) rests with employers due to health and safety responsibilities. Employers should organise and pay for free flu immunisations for HCWs with direct patient contact and Social Care Workers with direct patient contact. There is limited free NHS provision for HCWs and SCWs, but this is complementary to employer schemes and does not replace employer responsibilities.

Table 1: Flu immunisation provider for different flu eligible groups (2020/21)

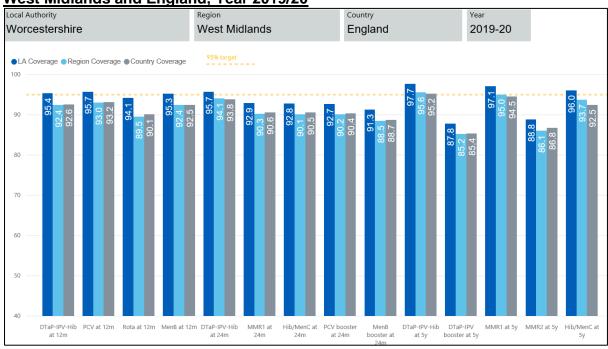
Flu Eligible group (2020/21)	Provider				
	GP	Pharmacy	Maternity	SAIS	
Aged 65+	X	X			
18-64 with at-risk condition	X	Χ			
6 months to 17 with at-risk condition	Χ				
Pregnant women	X	Χ	X		
2-3 year olds	X				
School Year: Reception to Year 7	X (if at-risk)			Χ	
50-64 (to start in November 2020)	X	Χ			
Health and social care staff employed by:	X	X			
<ul> <li>employed by residential care/nursing home</li> <li>employed by domiciliary care provider</li> <li>employed by voluntary managed hospice provider</li> <li>employed through Direct Payments and/or Personal Health Budgets to delivery domiciliary care</li> </ul>					

- 15. Most NHS commissioned immunisations are commissioned by NHSEI. CCGs play an important part in primary care quality and performance. Local Authorities have an important role in system leadership, promoting vaccination (health promotion), community engagement (vulnerable groups, schools etc) and ensuring Health Visitors and School Nurses help to improve uptake. They also have a role in flu immunisation for the social care workforce and to the care and nursing home sector.
- 16. In Worcestershire Health Visitors and School Nurses check the immunisation status of children, promote vaccination uptake, provide information to parents and carers and support them to have their children vaccinated.

### **Childhood Immunisation and Flu Performance**

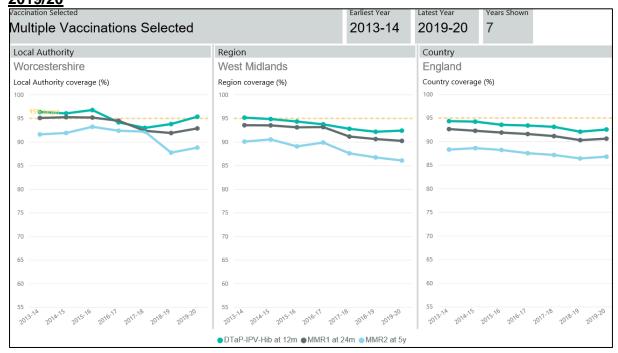
17. Immunisation uptake is measured at 1, 2 and 5 years of age with the latest annual results relating to 2019/20. Figure 1 shows that childhood immunisation uptake in Worcestershire is consistently higher than for the region or England as a whole. It generally achieves the 95% herd immunity target at 1 year of age but not at 2 or 5 years of age.

<u>Figure 1: Childhood Immunisation coverage for Worcestershire, compared to</u> West Midlands and England, Year 2019/20



18. Figure 2 shows that there has been a slow but sustained drop in childhood immunisation uptake locally and nationally over the last few years. MMR uptake at 2 years of age did drop significantly in Worcestershire in 2018/19 but recovered partially in 2019/20.

<u>Figure 2: Childhood immunisation uptake over time in Worcestershire 2013/14 to 2019/20</u>



19. Flu uptake in Worcestershire in 2019/20 was higher for all GP eligible groups than for England as a whole, although the national ambitions were not achieved. The national ambitions are very high this year at 75% for most cohorts. Although no 2020/21 figures are yet published, unpublished data suggest that uptake for Herefordshire and Worcestershire (no published Worcestershire only figures available, but information is monitored weekly by Clinical Directors) is higher than this time last year and amongst the highest in the whole of the Midlands.

Table 2: Flu immunisation uptake: Worcestershire and comparators, 2019/20

	% Uptake		National ambition, %	
Cohort	Worcestershire	ENG	2019/20	2020/21
65+	74.8	72.4	75	75
<65 at-risk	50.7	44.9	55	75
Pregnant	50.1	43.7	55	75
Age 2/3	52.6	43.8	50	75
Reception -				
Year 6	69.4	60.3	65	75
WAHT HCWs	80.3	74.3	N/A	STP target 90%
WHCT HCWs	90.8	74.3	N/A	STP target 90%

## Impact of COVID

20. Practices have continued to offer childhood immunisations during the COVID pandemic so there is no 'backlog' of children who have not been offered GP immunisations. Parents were less likely to attend at this time than normally however

and so uptake this year risks being lower than previous years. It is difficult to estimate the impact of the pandemic because of the way that the data is collected – robust figures will not be available until around June 2021. However, we have undertaken a bespoke analysis which suggests that uptake in Herefordshire & Worcestershire (no Worcestershire only figures are available) may be down around 9% this year so far compared to around 10% down for the West Midlands as a whole. Children who did not attend their GP immunisations automatically get an automatic second invite and can present at any time to the practice to be immunised.

#### **NHSEI** Initiatives

- 21. NHSEI has several initiatives to improve uptake, quality and safety.
- 22. All Midland GP practices were invited to join a scheme that rewarded them for:
  - d. following up children who had repeatedly failed to attend immunisations
  - e. developing robust protocols to ensure that vulnerable patients including those with sickle-cell disease were being offered essential vaccinations such as PPV23 (polysaccharide pneumococcal vaccine)
  - f. encouraging sign up to a data system that ensured that childhood immunisation records were up to data
- 23. This scheme is due to end in 2020 and will then be evaluated afterwards.
- 24. A new domiciliary neonatal Hepatitis B service has been recently introduced in Worcestershire, for babies born to Hepatitis B positive mothers. This service, provided by a specialist community team, will visit the infant's own home to deliver two of the required Hepatitis B vaccine doses. The other doses are delivered by the GP alongside other vaccines. The timeliness of Hepatitis B vaccination for these is vital in reducing their likelihood of developing chronic Hepatitis B infection, which can lead to cancer and premature death in later life. This service provides vaccination for these babies in a timely manner in the comfort of their own home.
- 25. NHSEI has commissioned a 2020/21 GP scheme to support practices to send tailored flu invitation letters to their most vulnerable at-risk patients. The tailored letters have been produced using behavioural insights methodology and in a previous local pilot supported around a 4% increase in flu vaccination uptake in some groups.
- 26. There is a clinical advice service for immunisation providers hosted by Public Health England (PHE) staff that supports doctors and nurses with queries and incidents and helps empower clinicians to promote immunisations and answer patient queries.

## **Local Authority Initiatives**

27. Worcestershire County Council (WCC) is this session running a pilot of influenza vaccination for staff. All WCC staff who are not eligible for vaccination through the NHS are entitled to a vaccine through the programme. This included staff at WCC maintained schools and academies across Worcestershire. Front line staff are being prioritised through 8 on site clinics across the county, other staff and staff at maintained schools and academies will be able to access vaccination through booking directly with community pharmacies.

# **Purpose of the Meeting**

- 28. Members are invited to consider and comment on the information discussed on the effectiveness of vaccination schemes and agree:
  - whether any further information is required
  - whether any further scrutiny work is required at this stage

# **Supporting Information**

Appendix 1 – Childhood Routine Immunisation Schedule

## **Contact Points**

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# **Background Papers**

In the opinion of the proper officer (in this case the Assistant Director for Legal and Governance), the following are the background papers relating to the subject matter of this report:

• NHS website 'NHS vaccines and when to have them': NHS website