

## HEALTH AND WELLBEING BOARD

7 NOVEMBER 2017

### CHILDREN'S IMMUNISATIONS UPDATE

Report from: James Williams, Director of Public Health

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#### Summary

NHS England Screening and Immunisation Teams have responsibility for commissioning and performance managing childhood immunisation services. Medway Council has a role in oversight of population health, including assurance (independent challenge and scrutiny) of immunisations arrangements and supporting partnership working in this area.

The aim of this report is to update the Health and Wellbeing Board on current and future actions planned by NHS England to improve childhood immunisation rates in Medway.

#### 1. Budget and Policy Framework

1.1 Achieving a good rate of childhood immunisations contributes to local priorities including:

- Medway Joint Health and Wellbeing Strategy priority: Giving every child a good start; and
- Medway Council plan priority: Supporting Medway's people to realise their potential, Healthy and active communities.

#### 2. Background

2.1 The Health and Wellbeing Board had requested an update report on children's immunisations be brought to the Board. An update on the same topic was presented to the Children and Young People Overview and Scrutiny Committee on 5 October 2017.

2.2 There are a range of immunisations that are routinely given in childhood as part of the NHS immunisation programme. Details of these can be found in Appendix 1.

2.3 Immunisations are important, both for protecting the health of individual children against communicable diseases, and also maintaining a high level of immunisation uptake in the community can ensure "herd immunity" occurs,

when a large percentage of a population has become immune to an infection, thereby providing a measure of protection for individuals who are not able to be vaccinated.

- 2.4 NHS England is responsible for commissioning immunisation programmes, child health information systems, performance managing providers and working with partners to improve immunisation rates.
- 2.5 Medway Council (through Public Health) has a role in oversight of population health including assurance (independent challenge and scrutiny) of immunisations arrangements and supporting partnership working in this area.
- 2.6 A number of other partners also have a role in immunisations, for example Medway CCG has a role in quality improvement (including childhood immunisations delivered in GP practices) and primary care has a role in delivering immunisations (through nationally agreed contracts).

### **3. Advice and analysis**

#### **3.1 *Actions being undertaken to improve children's immunisations uptake***

A number of actions are being undertaken by NHS England with the aim of improving children's immunisations rates in Medway. These include:

1. A Medway childhood immunisations improvement plan has been developed and is being implemented, which includes a) improving actual immunisation rates, and b) improving the accuracy of data on childhood immunisation.
2. It is recognised that data about children's immunisations needs to be improved. In April 2017, NHS England agreed a local service development improvement plan to improve data around childhood immunisations. Additional resources were provided to improve the operation of the Child Health Information Service (CHIS) serving Kent and Medway. The CHIS is responsible for the administration and reporting of all immunisation and related information, for all children registered with a Medway GP. At a national level, NHS England has acknowledged the need to update the CHIS system. They have commissioned a national digital transformation programme as part of NHS England's Healthy Children Programme. This digital transformation programme will revolutionise the way in which child and maternal systems work in England. It will make it easier to record and report data and remove current anomalies affecting reporting and information quality. Pending the introduction of the Healthy Children Digital transformation programme (which could take 18 months) NHS England has put in place a series of local actions to improve the operation of the CHIS in Kent and Medway. Steps include the introduction of regular checks of CHIS immunisation data against that held by general practice and more automated processes for data collection.
3. NHS England is currently in the process of re-procurement of the childhood immunisations services in Medway (and the wider South East) (new service to be in place by September 2018). The new service will include, for the first time, catch up sessions for pre-school children who have not attended general practice for their vaccinations.

4. Other bespoke interventions to improve the uptake of children's immunisations have been undertaken previously in Medway. These include identifying practices with high numbers of unvaccinated children and providing additional support to increase uptake rates. NHS England has partnered with NHS Medway CCG and the council to deliver a local Measles Mumps and Rubella (MMR) campaign. This halved the number of children recorded as unimmunised and substantially reduced inequalities (i.e. practices with lower rates improved more).
- 3.2 Medway Council Public Health team is ensuring appropriate assurance and directly assisting NHS England and Medway CCG to increase immunisation uptake of this process by:
1. Establishing a Medway immunisations Board. The first meeting will be held in December. This Board will help partners to collaborate more effectively. It will bring together all local stakeholders and enable the Council to identify specific issues and better undertake its assurance role.
  2. Directly working with partners to increase immunisation for specific programmes. For example, the Public Health Department collaborated with NHS England and hosted a partnership workshop to support the delivery of the seasonal influenza (flu) programme. The outputs of this workshop included a partnership action plan for seasonal flu and a comprehensive media marketing plan.
  3. The Public Health Team has supported NHS England by undertaking additional analysis of children's immunisations data using Medway primary care data.
- 3.3 *Children's Immunisations uptake in Medway*
- Nationally, the target for coverage (uptake) of children's immunisations is 95%. Nationally, many local areas do not meet this standard, and this is also the case in Medway.
- 3.4 Investigation into the reasons for this low coverage highlights a specific data quality issue. The immunisation coverage data (held by NHS England's CHIS system) may not include all of the immunisation activity taking place in Medway.
- 3.5 Specific work undertaken by the Medway Public Health Department, reviewing local clinical information systems, suggests the uptake of childhood vaccination in Medway is much higher than that reported by the CHIS. There is ongoing work being undertaken to gain a definitive answer to this potential data quality issue. An update on this specific work will be provided at the next Medway Children and Young People's Scrutiny Committee meeting and also the next Health and Wellbeing Board. Data will be provided that sets out current Medway status (using locally derived Medway data) against national performance targets.
- 3.6 NHS England is continuing its work to improve children's immunisation rates in Medway by implementing the above actions with the support of the Medway public health department.

3.7 At this time there have not been any notifications of vaccine preventable outbreaks of communicable diseases in Medway amongst children and young people.

#### 4. Minutes of Discussion at the Children and Young People Overview and Scrutiny Committee

4.1 An update on childhood immunisations was considered by the Children and Young People Overview and Scrutiny Committee on 5 October 2017. The minutes of this discussion were as follows:

##### 4.2 Discussion:

The Director for Public Health introduced the report compiled by Dr John Rodriguez, Consultant in Public Health, Kent and Medway Screening and Immunisation Lead. He drew the Committees attention to the role of Medway Council and explained the data provided at Appendix 1 to the report provided historical data which demonstrated some rates of immunisation were perceptively lower than the average for England. However, the Director for Public Health noted this owed to a lack of complete data.

4.3 The Consultant in Public Health explained how the data presented at Appendix 1 to the report had been collected and described other models to extrapolate the data, for example the Kent Data Warehouse, which provided a more positive outlook for selected immunisation rates.

4.4 The Consultant in Public Health outlined actions that had been taken to improve reporting rates, these included: electronic reporting; a system of challenge; engaging Clinical Commissioning Groups (CCGs) and a pilot scheme (in Ashford and Canterbury) in which parents of children who appeared not to be vaccinated were contacted.

4.5 Members then raised the following points and questions, which included:

- **Data validity** – Several Members raised concerns that the data provided may be inaccurate given that new vaccination rates had been reported at the meeting. The Director of Public Health explained that the data set out at Appendix 1 to the report had been validated and shared nationally, however on receipt of the data, the Public Health Department had interrogated it within General Practice Systems which highlighted the inconsistencies narrated to the Committee. The Consultant in Public Health added investment had been made into the Child Health Information System (CHIS) service improvement plan to assist in the provision of accurate and complete data.

4.6 **Data quality** - At the request of Members, the Director of Public Health undertook to ensure that NHS England provides the Committee with Medway childhood immunisation rates as a percentage of children in Medway receiving specified vaccinations.

4.7 **Coverage** – In response to a question whether an epidemic could occur owing to parents not allowing their children to be vaccinated, the Consultant in Public Health advised based on the current immunisation rates reported, it was unlikely an epidemic would result, however there was a future possibility. He provided an example of the Measles Mumps and Rubella (MMR) national

outbreak but noted this did not affect Medway. The Director for Public Health advised that he received a daily update on outbreaks and this had not highlighted any concerns.

- 4.8 **Pilot scheme** – A Member commented that the pilot scheme in Canterbury and Ashford was also required in Medway. Greater clarity was required on why Medway Children were not receiving the necessary vaccinations. In relation to the letter sent to parents, a Member asked for clarity on the resultant follow up action taken and how those not taking up the offer of vaccination were reached. The Consultant in Public Health undertook to provide further information.
- 4.9 **Strategic overview** – In response to a question whether a national or local reporting system would be developed, the Consultant in Public Health agreed one system would be useful and moving to the new system, Kent Data Warehouse, was in part a response to this. He added that the data verbally presented to the Committee was not ready for publication owing to data protection sensitivities.
- 4.10 **Looked After Children (LAC)** – A Member noted there had been complete coverage for LAC.
- 4.11 **Immunisation schedules** – A Member commented that providing parents with a card noting the immunisation schedule would reinforce their responsibility. The Director for Public Health reassured the Committee that a Medway Immunisations Board would be established. This Board would enable the Council to gain assurance immunisation services commissioned by NHS England were meeting the needs of Medway residents. Further, he explained the Medway Public Health Department was currently out to tender for a provider to deliver 0-19 Public Health Services (Health Visiting School Nursing). There would be specific requirements placed in the new contract to support new mothers and fathers to immunise their children.

#### 4.12 **Decision:**

The Committee:

- 1) Noted the report at Appendix 1 from Dr John Rodriguez, Consultant in Public Health, Kent and Medway Screening and Immunisation Lead which provided an update on children's immunisations; and
- 2) Requested an update report on children's immunisation setting out clearly the position in Medway to be provided to the Committee as soon as practicable.

## 5. **Risk management**

- 5.1 Risk management and registers for immunisations programmes is undertaken by NHS England as part of their commissioning arrangements. At this time there have not been any notifications of vaccine preventable outbreaks of communicable diseases in Medway amongst children and young people. The Director of Public Health receives daily reports on any outbreaks of communicable diseases in Medway and is monitoring this issue closely.

## **6. Financial implications**

6.1 There are no financial implications arising directly from this report.

## **7. Legal implications**

7.1 There are no legal implications arising directly from this report. NHS England holds all the responsibilities for the successful delivery of these programmes.

7.2 HWBs are committees of the Local Authority, with non-executive functions, constituted under the Local Authority 1972 Act, and are subject to local authority scrutiny arrangements.

## **8. Recommendations**

8.1 It is recommended that the Board notes the assurance report, which provides an update on children's immunisations.

### **Lead officer contact**

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### **Appendices**

Appendix 1 - Routine Vaccinations for Children provided by the NHS

### **Background papers**

None.