



## Adults and Health Overview and Scrutiny Sub-Committee Meeting

<b>Title</b>	<b>Report on Immunisation Programmes Delivery in London Borough of Barnet</b>
<b>Date of meeting</b>	24 <sup>th</sup> January 2024
<b>Report of</b>	Dr Janet Djomba, Deputy Director of Public Health <a href="mailto:janet.djomba@barnet.gov.uk">janet.djomba@barnet.gov.uk</a>
<b>Wards</b>	All
<b>Status</b>	Public
<b>Urgent</b>	No
<b>Appendices</b>	Appendix A – Immunisation Programmes in London Borough of Barnet- full paper
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### Summary

This report outlines the delivery of immunisation programmes in Barnet. It provides information on:

- Uptake of vaccines across different population groups
- Roles and responsibilities of partners: Barnet Public Health, NCL ICB and NHSE
- Activities that partners are undertaking to improve immunisation uptake

Whilst immunisation uptake in Barnet is generally higher than in neighbouring boroughs, it is not sufficient to provide herd immunity from vaccine-preventable diseases. We have implemented several targeted interventions over the last years which have resulted in a positive trend. However, there are still challenges remaining, including reaching out to communities that are harder to engage with, and access to certain data.

## Recommendations

1. That the Committee note the report
2. That the Committee provide feedback to the report

### 1. Reasons for the Recommendations

#### INTRODUCTION

- 1.1 There has been no update on immunisation in Barnet since the Adults and Health Overview and Scrutiny Sub-Committee has been established. For the first presentation we decided to provide a comprehensive overview of the immunisation programmes and the partners who are commissioning and delivering them. **The full report is added as Appendix A.**
- 1.2 Section 7a vaccination programmes are population-based, publicly funded immunisation programmes that cover the life course and include:
- Routine childhood vaccination programme for 0-5 years,
  - School-age (young person) vaccinations,
  - Adult vaccinations (including in pregnancy and older age),
  - Seasonal COVID-19/flu vaccination programme

#### ROLES AND RESPONSIBILITIES

- 1.3 The Department of Health and Social Care (DHSC) provides national strategic oversight of vaccination policy in England.
- 1.4 NHSE is responsible for commissioning national vaccination programmes in England under the terms of the Section 7a agreement.
- 1.5 The UK Health Security Agency (UKHSA) undertakes surveillance of vaccine-preventable diseases and leads the response to outbreaks of vaccine-preventable diseases.
- 1.6 ICBs provide opportunities for improved partnership working across NHSE (London), local authorities, voluntary and community sector partners to improve vaccination uptake and reach underserved areas and populations.
- 1.7 Local authority Public Health delivers population health initiatives including improving access to health and engagement and promotion of vaccinations overall.

#### IMMUNISATION UPTAKE IN BARNET

- 1.8 For almost all childhood immunisations Barnet coverage exceeds NCL average with immunisation uptake rates ranging from 80% to 90% which is similar to the overall London Region take up of immunisations.
- 1.9 The Barnet school aged vaccination programmes have lower uptake rates compared to NCL and London.
- 1.10 Barnet has the highest uptake of COVID autumn booster within NCL , with highest rates among care home residents and people aged over 65 years.

1.11 Data collection, especially on childhood and school aged immunisation, is complex and is presenting one of the challenges to delivering immunisation programmes.

1.12 A strong focus for Barnet, NCL and London is to increase childhood vaccination coverage overall to pre-pandemic levels and to identify the communities which are persistently missed from vaccination and other health services. A particular risk in 2023 is the sub-optimal childhood MMR1 and 2 coverage (below 95%) which increases the risk of preventable measles outbreaks. To reduce the risk of poliovirus transmission, focus also remains on identifying and supporting underserved communities of Barnet and London.

## **2. Alternative Options Considered and Not Recommended**

2.1 The committee doesn't provide feedback. We don't recommend this option as we believe that the Adults and Health Overview and Scrutiny Committee can provide feedback and steer which will support and improve delivery of immunisation programmes

## **3. Post Decision Implementation**

3.1 We will consider the committee's feedback and implement as appropriate. We will continue delivering immunisation programmes in collaboration with our partner organisations.

3.2 We will provide an update on the delivery of immunisation programmes as per committee's advice.

## **4. Corporate Priorities, Performance and Other Considerations**

### **Corporate Plan**

4.1 The delivery of immunisation programmes is contributing towards the area "Caring for People" of Barnet's corporate plan. Specifically, it's supporting following outcomes:

- Tackling inequalities
- Family friendly
- Living well

Whilst immunisation uptake isn't included in outcome measures, the indirect impact is important.

### **Corporate Performance / Outcome Measures**

4.2 Uptake of MMR and flu vaccine are outcome measures of the Joint Health and Wellbeing Strategy and included on the in the Public Health Dashboard which provides intelligence for strategic decision making. Data on immunisation uptake is also collected and reported regionally (NCL ICB) and nationally.

### **Sustainability**

4.3 Not applicable.

### **Corporate Parenting**

Where looked after children and care leavers are within eligible groups for vaccinations, we work with our partners to prevent inequalities in access to vaccination programmes.

### **Risk Management**

- 4.4 A risk related to immunisation is included in the Public Health Directorate risk register as “Influencing NHS England about immunisations services”
- a) Immunisation services are commissioned by NHS England and therefore there is a risk of failing to influence NHS England to improve local services. This could lead in low vaccine uptake and could result in potential outbreaks of childhood infectious diseases.
  - b) The inherent risk is rated as medium high and the residual risk is currently medium low.
  - c) Control and mitigation measures include:
    - Barnet Flu and Immunisation forum meetings are held quarterly to monitor and support childhood immunisation and flu uptake,
    - Liaising with CCG/CLCH/ council services on specific areas, such as complex settings,
    - Updating the Childhood Immunisation Action Plan,
    - IPC Childhood immunisation inequalities monthly task and finish group is in place.

### **Insight**

Data on immunisation uptake is collected and published on regional and national level. High level data is available for local authorities via specific platforms. For detailed local data that cannot be obtained from those sources, we are liaising with NCL ICB and NHSE. Details about immunisation data are presented in the Appendix (Chapter Data on immunisation uptake).

### **Social Value**

- 4.5 Barnet Public Health doesn't commission services or provider to deliver immunisation programmes.

## **5. Resource Implications (Finance and Value for Money, Procurement, Staffing, IT and Property)**

- 5.1 Supporting immunisation programmes is included in Public Health work plan, therefore resources (staff and finance) are included in the Public Health Directorate financial and business planning. External funding has been available and used for specific, time limited projects.

## **6. Legal Implications and Constitution References**

- 6.1 Health protection, which includes supporting immunisation programmes, is a statutory duty for Local Authority Public Health teams:
- The Director of public health (DPH) is responsible for all of the local authority's duties to take steps to improve public health.
  - The DPH is responsible for exercising the local authority's functions in planning for, and responding to, emergencies that present a risk to public health.

This is published under section 73A(7) of the National Health Service Act (the 2006 Act) as guidance to which local authorities must have regard, and is included in the Council Constitution.

6.2 Scrutiny of public health functions is one of the responsibilities of Adults and Health Overview and Scrutiny Sub-Committee. This is outlined in Part 2B of the Council's Constitution: [COMMITTEES \(modern.gov.co.uk\)](http://modern.gov.co.uk).

## **7. Consultation**

7.1 The report has been prepared jointly with partners. No consultation has taken place.

## **8. Equalities and Diversity**

8.1 Considering and protecting equalities and diversity is at the heart of delivering immunisation programmes. We are using evidence, expertise and intelligence to address any inequalities and ensure we reach all eligible population groups.

## **9. Background Papers**

9.1 National Health Service Act 2006 [National Health Service Act 2006 \(legislation.gov.uk\)](http://legislation.gov.uk)