

**Barnet**

**Update for Health and  
Wellbeing Board: 0-5  
Immunisations**

**12<sup>th</sup> May 2016**



## **Childhood Immunisations in Barnet**

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Classification: OFFICIAL

The NHS Commissioning Board (NHS CB) was established on 1 October 2012 as an executive non-departmental public body. Since 1 April 2013, the NHS Commissioning Board has used the name NHS England for operational purposes.

## Summary

This report has been requested to build on the assurance that appropriate governance arrangements are in place within NHS England in relation to immunisations for 0-5 year olds, in order to protect the health of people in Barnet. It gives an update on the local picture of childhood Immunisations in Barnet, NHS England's plans to improve uptake and local actions being undertaken to address these.

### 1.0 Background to 7a immunisation programmes

Immunisation is the most effective method of preventing disease and maintaining the public health of the population. Immunisation protects children against disease that can cause long-term ill health and in some cases even death.

Vaccine preventable diseases have markedly declined in the UK, largely due to the efforts of the national immunisation programme. A negative output has been that many members of the public and health professionals have forgotten about the severity of these diseases and can become complacent about vaccinations. In addition, the complexity of the immunisation schedule and the increasing volume of vaccine-related information – some of which may be misleading or inaccurate – can make it challenging to achieve the 95% herd immunity level.

Throughout England, the National Routine Childhood Immunisation Programme is delivered in a variety of settings by a large number of professionals from different disciplines. In London, immunisation uptake rates remain below the 95% levels required to achieve herd immunity. Reasons for the low coverage include:

- the increasing birth rate in London which results in a growing 0-5 population and puts pressure on existing resources such as GP practices
- London's high population mobility
- Recent changes in data collection systems
- difficulties in data collection particularly as there is no real incentive for GPs to send data for Cohort of Vaccination Evaluated Rapidly (COVER) statistics
- large numbers of deprived or vulnerable groups.

These reasons are all applicable to Barnet's ever changing population.

## 2.0 Initiatives and Actions

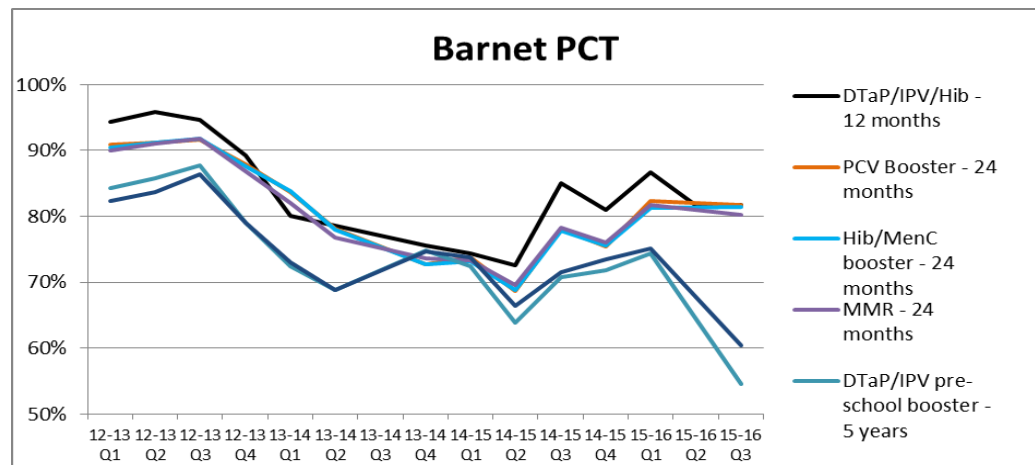
- The decrease in COVER from April 2013 highlights the previous work that was being done locally with individual practices to manipulate data prior to the dissolution of the PCT.
- At the beginning of 2015 NHSE reviewed records in Barnet based against 10 data items, including immunisation, covering the milestones of the child record for the first year of life. The aim of the review was to establish the completeness of the child record in order to report back the findings to NHSE and to feed into a national STEIS review. This improved the alignment of child records in Barnet between GP and CHIS by 40% and improved COVER by 13%.
- The recent move to TTP System One has meant that there was no data published for Q2. Issues with TTP System One have been raised as a high risk nationally as the system is unable to accurately report the required data for COVER.
- Note that three other boroughs in North London who have recently moved to TTP System One also show reduced coverage in 5 year olds.

### Comparison COVER data Q3 2014/15 and 2015/16

	Diphtheria, Tetanus, Polio, Pertussis and Haemophilus influenza type b (DTaP/IPV/Hib) - 3 Doses		Pneumococcal infection (PCV booster)		Haemophilus influenza type b and meningitis C (Hib/MenC)		Measles, mumps and rubella (MMR)		Diphtheria, Tetanus, Polio, Pertussis (DTaP/IPV) - pre-school booster		Measles, mumps and rubella (MMR2)	
	12 Months		2 Years		2 Years		2 Years		5 Years		5 Years	
PCT	14-15 Q3	15-16 Q3	14-15 Q3	15-16 Q3	14-15 Q3	15-16 Q3	14-15 Q3	15-16 Q3	14-15 Q3	15-16 Q3	14-15 Q3	15-16 Q3
Barnet	85.0%	81.8%	78.1%	81.7%	77.9 %	81.4%	78.3%	80.2%	70.7%	54.6%	71.6%	60.5%
Hammersmith & Fulham									64.9%	63.4%	66.9%	62.3%
Kensington & Chelsea									59.8%	53.0%	62.5%	52.0%
Westminster									65.0%	55.2%	65.5%	53.4%

- All practices in Barnet are now signed up to QMS enabling GP's to send their immunisation data safely and easily to the Child Health Department. There are still a small number of GP's who do not refresh this data on a monthly basis but these are followed up by QMS and NHSE. It has taken a great deal of time and resources to achieve a COVER report from the new system. Central London Community Health (CLCH) has experienced challenges converting data received from practices into a format that can be produced for COVER. This has been exacerbated by the move to TTP System One.
- Published Q3 data shows that the one and 2 year old uptake remains steady and work is continuing with the 5 year olds. The original parameters for COVER submission were not fully aligned with the minimum dataset; these issues have now been resolved and it is encouraging that these gains have been made. CLCH will now re-look at quarters one and two which will hopefully complete figures for the annual COVER publication in September.

Barnet COVER data since 2013



- A protocol has been put into place across London for early scrutiny of immunisation rates prior to submission to COVER. Embedded in this protocol are steps to escalate and address any discrepancies to mitigate risks of poor quality data submission. This is helped by the new minimum child health dataset which enables monthly reporting on immunisations to the NHS England immunisation commissioners.
- NHSE has undertaken practice visits to approx. 20 GP Barnet practices with lowest coverage for MMR2. This has been part of a London wide project to support practices that are having difficulty achieving sufficient

uptake. For Primary vaccinations the majority of practices only need to immunise between 1 and 6 more children to achieve the 95% coverage required for herd immunity. We are working towards producing these reports for every practice when the data is more robust. The aim of the visits is to support GP Practices in achieving higher COVER rates. NHS England will be producing an evaluation of the GP practice visits in the near future. Many practices had higher uptake results than reported showing that this is primarily a data issue and not due to poor delivery rates.

- NHS England (London) have collaborated with CCG and LA and are working to a borough specific plan (Appendix 2-Barnet Immunisation Action Plan 2015/2016) in an effort to improve vaccine uptake and reduce health inequalities across London. These plans sit with the pan-London approaches overseen by the London Immunisation Board and the improved contractual management and quality assurance processes that NHS England (London) are operating to improve quality of delivery and performance of all Section 7a programmes. The plan has been collectively contributed to and was discussed and agreed with the CCG and Local Authority and is discussed quarterly at the CCG Public Health meetings.

### **3.0 Rotavirus**

- Rotavirus vaccine was introduced into the Routine Childhood Immunisation Schedule in 2013/14 and is measured monthly. Since June 2014 both London and England averages have been 90% or over.
- The programme has been very successful in reducing incidences of rotavirus with laboratory reports of rotavirus for July 2013 – June 2014 being 67% lower than the ten season average for the same period in the seasons 2003/04 to 2012/13.
- The latest available data for Barnet CCG is for January 2016, whereby 87.7% of babies received first dose of rotavirus and 80.1% received the two doses.

### **3.1 Men B**

- Since September 2015, all infants are offered a course of meningococcal B vaccine as part of the Routine Childhood Schedule. Eligible infants were those babies born on or after 1<sup>st</sup> July 2015 with a small catch up programme for babies born on or after 1<sup>st</sup> Many 2015.

- There are preliminary data for babies aged 26 weeks in January 2016. In Barnet, 90.3% of those infants had received their first dose of Men B with 79.4% having received two doses.

### 3.2 Child flu

	% of 2 year olds	% of 3 year olds	% of 4 year olds	% of year 1	% of year 2
Barnet	27.4	32.1	22.7	43	41.7
London	<b>26.5</b>	<b>28.8</b>	<b>21.8</b>	<b>42.4</b>	<b>39.9</b>
England	<b>35.4</b>	<b>37.3</b>	<b>30.1</b>	<b>55.6</b>	<b>54.3</b>

### 4.0 Conclusion

The current low vaccination rates in Barnet are primarily due to data issues and not that children are missing vaccinations. As stated in the report this has been a national issue and has also affected other areas in London. Provisional data for Q4 shows some improvement as these issues are being addressed, however, overall improvement is reliant on TTP System One who NHSE does not commission but with whom there is ongoing discussion. NHSE will be meeting with CLCH in the next quarter to follow up on process and operability.