

**Barnet**

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

**10<sup>th</sup> November 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.

## 1 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 to work that has been done since the meeting in July.

## 2 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.

### 3 Actions

- Only one practice now does not routinely upload to QMS (Quality Medical Solutions). This is the tool that is used to transfer practice level immunisation data to the child health information service which is then responsible for collating this data and reporting to Public Health England. The CCG are aware of this practice.
- CLCH have now got access to QMS data and the quarterly COVER report is submitted directly from this to allow a more accurate picture of coverage.
- Concerns regarding the ongoing issues with TTP System One continue to be raised nationally as this affects other parts of the country, including several other London boroughs and is the subject of discussion with TPP via the NHSE lead on IT.
- Barnet has improved uptake across 4 signifiers and is also above the London average for Q1 2016/17 across ages 1 and 2.

Table 1

#### Difference between COVER and real time data

PCT/ CCG	Age 1 COVER	Age 1 QMS Q415/16	Age 1 QMS Q116/17	Age 2 MMR1 COVER	Age 2 MMR1 QMS Q4	Age 2 MMR1 QMS Q1	Age 2 Hib/M en C COVER	Age 2 Hib/M en c QMS Q4	Age 2 Hib/Me n c QMS Q1	Age 2 PCV COVER	Age 2 PCV QMS Q4	Age 2 PCV QMS Q1	Age 5 MMR2 COVER	Age 5 MMR2 QMSQ 4	Age 5 MMR2 QMSQ1	Age 5 Presch ool COVER	Age 5 Presch ool QMSQ 4	Age 5 Presch ool QMSQ 1
Barnet	64.9%	88.8%	89.7%	81.0%	85.3%	86.2%	80.6%	84.5%	85.1%	79.6%	83.6%	84.2%	68.0%	79.6%	79.5%	58.2%	76.6%	73.8%
London			88.80%			84.40%			84.80%			83.70%			80.20%			77%

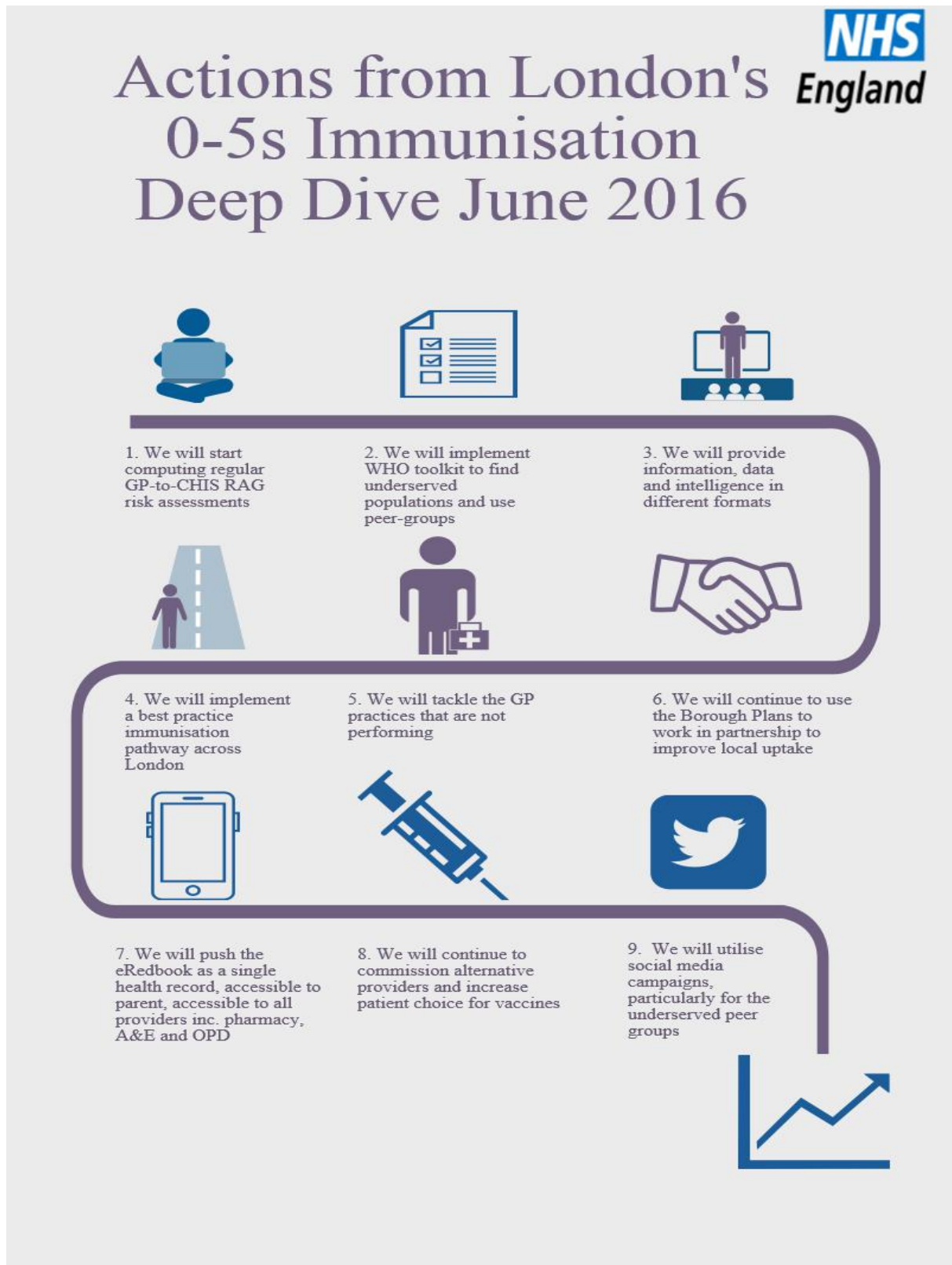
Source: QMS (2016)

- In June 2016, London Immunisation Board hosted a 'deep dive' into the issues around the data collection for COVER and the other factors contributing to the published figures. This was chaired by Professor Yvonne Doyle, Public Health England's Regional Director for London and attended by representatives from Clinical Commissioning Groups (CCGs) and local authorities. With presentations from the national NHSE and PHE leads for immunisations on what is happening nationally, the workshop focused on the current issues with the collation of COVER data for London and resulted in a nine point action plan for NHSE to implement in 2016/17 (see figure 1).

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- Work has already commenced on the triangulation of data from CHIS submissions for COVER with the data extracted from GP systems (QMS for Barnet) for the submission of Q2 for COVER. The COVER and CHIS standard operating protocols (SOPs) have been updated with monthly checks of data with providers now included. The team are also meeting with national COVER team to work on identifying common data errors and finding solutions earlier. A recent example is that data extracted from GP systems in a North West London borough shown the numbers of 5 year old with primaries (DTap/IPV/Hib) as being lower than those with preschool boosters (i.e. completed courses). The latter number should be smaller as it is included in the former number. This highlighted that GP practices were not aware of which indicators to use when recording the preschool booster and now work is being done with the CCG to alert practices to which codes to use.

Figure 1



## 4 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. Published data for Q1 2016/17 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.