

## **Health and Wellbeing Scrutiny Commission**

**23 September 2014**

**NHS England Area Team – Leicestershire and Lincolnshire**

**Screening and Immunisation Team**

**Uptake of Childhood Immunisations in Leicester City (September 2014)**

### **1. Background**

Prior to 1<sup>st</sup> April 2013, screening and immunisation programmes were the responsibility of public health departments in Primary Care Trusts. As a result of the Health and Social Care Act 2012 many public health functions were transferred to local authorities but the responsibility for commissioning screening and immunisation services was transferred to NHS England. Screening and immunisation programmes are now delivered under joint national arrangements between Public Health England, NHS England and the Department of Health. The section 7a agreement between the Secretary of State for Health and NHS England gives NHS England the responsibility of commissioning these services on behalf of the Secretary of State.

Each NHS England Area Team has a public health team which includes public health specialists employed by Public Health England and officers employed by NHS England. The team is led by a consultant in public health medicine. Immunisation programmes across Leicester, Leicestershire and Rutland are monitored by one whole time equivalent co-ordinator. The aim is to commission robust services and to support providers to deliver good quality services to protect the population against vaccine preventable diseases.

## **2. Delivery of Childhood Immunisations Programmes**

Currently most childhood immunisation programmes are delivered via general practice. School based programmes include Human Papillomavirus (HPV) and seasonal flu vaccinations in special schools.

Changes to the childhood immunisation programme during 2013 included:

- reducing the number of meningococcal serogroup C (MenC) vaccines from two to one in under 1 year olds
- introduction of rotavirus vaccinations given at 2 and 3 months of age.

## **3. Uptake**

Childhood immunisation uptake has increased over the last 5 years in Leicester City. Uptake is measured by completed courses of vaccinations at age 1, 2 and 5. The data for year-end April 13 – March 14 and Q1 2014/15 is provisional local data. The current childhood immunisation schedule for the UK is attached in Appendix A.

Performance is shown against a target of 95%. This is a WHO target and is challenging for all areas to achieve, particularly for the vaccines at age 5 years.

### 3.1 Childhood immunisation uptake data by percentage in Leicester City.

	2013/14 Target	Yr end Apr 09 - Mar 10	Yr end Apr 10 - Mar 11	Yr end Apr 11 - Mar 12	Yr end Apr12- Mar 13	Yr end Apr13 - Mar 14	Q1 2014/15
Age 1 DtaP/IPV/H ib	95.0%	93.2	94.1	96.3	97.3	96.5	95.8
Age 2 PCV	95.0%	91.0	91.1	93.8	95.8	96.3	95.7
Age 2 Hib/MenC	95.0%	92.9	93.2	95.2	96.0	95.7	95.7
Age 2 MMR (1 dose)	95.0%	90.1	90.4	93.0	95.7	95.9	96.0
Age 5 DTaP/IPV (4 doses)	95.0%	89.0	89.6	91.4	94.6	92.4	93.0
Age 5 MMR (2 doses)	95.0%	87.6	88.4	90.2	93.1	92.6	92.2

COVER (Cover of Vaccination Evaluated Rapidly) data from HSCIC apart from year-end 13-14 and Q1 2014/15 which are local unpublished data.

### 3.2 Leicester City childhood immunisation percentage uptake compared to similar organisations in 2012/13.

A useful way of assessing performance is to compare Leicester with its peer areas as defined by the Office of National Statistics (ONS). Leicester City's comparator areas according to ONS are Manchester, Birmingham, Wolverhampton, Nottingham, Barking and Dagenham and Sandwell. The table below shows Leicester City

childhood immunisation uptake during 2012/13 (most recent published data) compared to these organisations. Leicester City has an outstanding uptake in comparison to other cities, despite the movements in and out and diversity of the population.

	At age 1 year	At age 2 years			At age 5 years	
	DtaP/IPV/Hib	PCV	Hib/MenC	MMR (1 dose)	DtaP/IPV	MMR(2 doses)
<b>Leicester City</b>	97.3	95.8	96.0	95.7	94.6	93.1
<b>Manchester</b>	95.7	92.4	91.3	92.7	87.9	87.2
<b>Birmingham</b>	87.0	87.7	83.6	87.3	83.1	82.6
<b>Wolverhampton</b>	94.7	88.1	92.9	92.8	79.5	76.5
<b>Nottingham</b>	93.4	89.8	91.9	90.4	84.7	83.4
<b>Barking and Dagenham</b>	92.1	87.7	88.9	88.5	85.9	85.0
<b>Sandwell</b>	93.6	90.9	91.8	90.3	82.4	87.5
<b>England</b>	94.7	92.5	92.7	92.3	88.9	87.7

COVER (Cover of Vaccination Evaluated Rapidly) data from HSCIC

### 3.3 HPV (Human Papillomavirus) Vaccination Programme

The routine programme was introduced to protect against two of the high risk HPV types that can lead to cervical cancer. It is delivered routinely to year 8 girls aged 12-13 yrs as a 3 dose course over 6 to 12 months in school. This changes to a 2 dose course from this September 2014. Delivery of this service is through schools and is now provided by a dedicated team of immunisation nurses from Leicestershire Partnership Trust.

## Percentage uptake of HPV vaccination in Leicester City

Target		2009/10	2010/11	2011/12	2012/13
Target is 90% for 3 doses since 2011/12	Dose 1	86.5	87.4	89	92.2
	Dose 2	86.5	85.7	87.5	92.2
	Dose 3	84	85	86.1	91.9

The data for 2013/14 will not be published until the end of September but we are confident that Leicester City will have achieved the 90% target for three doses.

### 3.4 Seasonal Influenza Uptake

The Joint Commission for Vaccinations and Immunisations (JCVI) have recommended all children between 2 to 17 will receive a flu vaccination every year in the future. The first phase was to offer the flu vaccination to all well 2 and 3 year olds in general practice. The vaccine that was used during 2013/14 is Fluenz® a nasal spray, so no injections are necessary unless a child is contraindicated to Fluenz®. The programme will increase to include all well 2, 3 and 4 year olds this year using Fluenz tetra® which is a quadrivalent nasal vaccine and offers even better protection.

#### Uptake of seasonal flu vaccine in the 2 and 3 year old cohorts in Leicester City

	2 Year Olds			3 Year Olds		
	Eligible	Vac'd	%	Eligible	Vac'd	%
2013/14	5555	1903	34.3	5380	1685	31.3

There is no target for the uptake of Fluenz in 2 and 3 year olds.

### 3.5 Flu Pilots in School

As part of the recommended roll out of flu vaccines to children by the JCVI, pilot programmes have been implemented. One such pilot took place in primary schools in Leicester City, East Leicestershire and Rutland during 2013/14 with a 52% uptake.

The same programme will be delivered as a pilot this year but it will be expanded to include schools in West Leicestershire. Children in years 7 and 8 in secondary schools will also be offered the vaccine. This means the vaccine will be offered to approximately 97,000 children in 447 schools between October and December 2014 across Leicestershire, Leicester City and Rutland. Combined with the 2, 3 and 4 year old programme mentioned above this means that all children from age 2 to 12 years of age in Leicester City will be offered the Fluenz intranasal flu vaccine in the coming autumn. Leicester City is one of only a handful of places in the country where this will be the case.

#### **4 Action – existing and future**

- All of the childhood vaccines referred to in section 3.4 are scheduled by the child health information department which is part of Leicestershire Partnership Trust. All vaccines that are given are recorded on the same system. The data that is held is used to give every practice a monthly report of performance for each of the vaccines shown in section 3.4. This data is also used to send every practice a list of children who are approaching a milestone birthday (1, 2 or 5 years) and have not had all of the vaccines that they are due. This acts as a prompt for practices to make every effort to immunise these children prior to the relevant deadline. This process has been in place for some time and has contributed to the rise in vaccination rates that we have seen over time.
- Practice clinical staff attend formal training sessions on an annual basis for immunisation and vaccination. The screening and immunisation team provide updates to non-clinical staff in line with the minimum standards for immunisation and vaccination
- Communications – the screening and immunisation team works in partnership with national and local communications teams, taking part in TV and radio interviews, assisting with articles to be put into local journals such as Leicester Link etc.

- The screening and immunisation team produces a newsletter to assist practice staff. The content is partly informed by the queries received from practices.
- The screening and immunisation team attend the Clinical Commissioning Group protected learning time for general practice staff and provide update sessions for clinical and non clinical staff.
- A new home visiting service is being commissioned for patients for whom this is deemed the only way that a child will receive a vaccination. Care is required to ensure that this service is not seen as an “easy option” either by general practice or by the population as this would become an extremely expensive way of providing a population based immunisation programme.
- A new hepatitis B vaccination pathway for infants born to mothers found to be Hep B positive via antenatal screening is being introduced. This will ensure that no child who is eligible for this course of vaccines is able to slip through the net by establishing appropriate data flows and failsafe procedures. This is being launched on 1<sup>st</sup> November 2014.

**Dr Tim Davies**

Consultant Lead for the Screening and Immunisation

September 2014

## Vaccines for the routine immunisation schedule from summer 2014

When to immunise	Diseases protected against	Product reference	Vaccine given
Two months old	Diphtheria, tetanus, pertussis (whooping cough), polio and <i>Haemophilus influenzae</i> type b (Hib)		<b>Pediactel or Infanrix IPV Hib</b> (DTaP/IPv/Hib)
	Pneumococcal disease		<b>Prevenar 13</b> (PCV)
	Rotavirus		<b>Rotarix</b> (Rotavirus)
Three months old	Diphtheria, tetanus, pertussis, polio and Hib		<b>Pediactel or Infanrix IPV Hib</b> (DTaP/IPv/Hib)
	Meningococcal group C disease (MenC)		<b>NeisVac-C or Menjugate</b> (Men C)
	Rotavirus		<b>Rotarix</b> (Rotavirus)
Four months old	Diphtheria, tetanus, pertussis, polio and Hib		<b>Pediactel or Infanrix IPV Hib</b> (DTaP/IPv/Hib)
	Pneumococcal disease		<b>Prevenar 13</b> (PCV)
Between 12 and 13 months old – within a month of the first birthday	Hib/MenC		<b>Menitorix</b> (Hib/MenC)
	Pneumococcal disease		<b>Prevenar 13</b> (PCV)
	Measles, mumps and rubella (German measles)		<b>Priorix or MMR VaxPRO</b> (MMR)
Two, three and four years old	Influenza		<b>Fluenz Tetra</b> (Flu nasal spray) (annual) (if Fluenz unsuitable, use inactivated flu vaccine)
Three years four months old or soon after	Diphtheria, tetanus, pertussis and polio		<b>Infanrix IPV</b> (DTaP/IPv) or <b>Repevax</b> <sup>2</sup>
	Measles, mumps and rubella		<b>Priorix or MMR VaxPRO</b> (MMR) (check first dose has been given)
Girls aged 12 to 13 years old	Cervical cancer caused by human papillomavirus types 16 and 18 (and genital warts caused by types 6 and 11)		<b>Gardasil</b> (HPV)
Around 14 years old	Tetanus, diphtheria and polio		<b>Revaxis</b> (Td/IPv), and check MMR status
	MenC <sup>5</sup>		<b>Meningitec, Menjugate or NeisVac-C</b> (MenC) <sup>5</sup>
From 28 weeks of pregnancy <sup>7</sup>	Pertussis		<b>Boostrix-IPV</b> <sup>6</sup>
65 years old	Pneumococcal disease		<b>Pneumovax II</b> (PPV Pneumococcal polysaccharide vaccine)
65 years of age and older	Influenza		Flu injection (annual)
70 years old	Shingles		<b>Zostavax</b> (Shingles)



\*NB Where two or more products to protect against the same disease are available, it may, on occasion be necessary to substitute an alternative brand. Influenza vaccine is free to all children aged two, three and four years, those aged 6 months to under 18 years in at-risk groups, and those in flu vaccination programme pilot areas. Flu vaccine for these groups only, and all the other vaccines listed above, except Pneumovax II for those aged 65, are available free of charge at [www.immform.dh.gov.uk](http://www.immform.dh.gov.uk).



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