



Merton Clinical Commissioning Group

## Report to the Merton Clinical Commissioning Group Governing Body

**Date of Meeting:** Thursday, 16<sup>th</sup> May 2013

**Agenda No:** 8.5

**ATTACHMENT:** 12

<b>Title of Document:</b> Childhood Immunisations	<b>Purpose of Report:</b> To Receive and Note
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<b>Executive Summary:</b> See Overleaf	
<b>Key sections for particular note (paragraph/page), areas of concern etc.</b> Whole document	
<b>Recommendation(s):</b>  The Merton Clinical Commissioning Group Governing Body is requested to note the briefing on childhood immunisations in Merton generally, more specifically the on-going national catch-up campaign for the MMR and plans for the future, which include support to MCCG's quality objective around childhood immunisations.	
<b>Committees which have previously discussed/agreed the report:</b>  MCCG Executive team has had a verbal briefing	
<b>Financial Implications:</b> None	
<b>Other Implications:</b> (including patient and public involvement/Legal/Governance/ Risk/Diversity/ Staffing)	
<b>Equality Analysis:</b> On-going work by NHS England to address vulnerable groups with lower rates of MMR uptake.	
<b>Information Privacy Issues:</b> None	
<b>Communication Plan:</b> (including any implications under the Freedom of Information Act or NHS Constitution)	

## Executive Summary:

In Sutton and Merton the performance on Childhood Immunisation has been low for a number of years. The recent outbreak of Measles in South Wales has highlighted the potential risk to the local population and is indicative of our overall performance on childhood immunisations.

- In 2011-12 the proportion of the population immunised for MMR1 by 2<sup>nd</sup> birthday was 78.7% for Sutton and Merton, compared to 86.1% for London and 91.2% for England.
- In 2011/12 the proportion of the population immunised for MMR1 & 2 by 5<sup>th</sup> Birthday was 77%, compared to 80.2% for London and 86% for England.
- The trend over the past four years has been downwards and the level of coverage at 2<sup>nd</sup> birthday has reduced from 83.6% in 2008-09 (a reduction of nearly 5%)

According to the PHE MMR catch-up campaign ready reckoner, there are an estimated 2,054 unvaccinated and 2,005 partially vaccinated 10-16 year olds. This is based on registered population of 15,286 10-16 years, about 26 % of the target population.

A task group has been formed and an action plan is under development bringing together the work of the key stakeholders. Led by the NHS England-London(Merton) immunisation coordinator, this effort will involve development of a draft Action Plan is under development and sets out 7 key areas for action:

- Establishing a Merton borough focus
- Improving uptake and access
- Improving data systems
- Improving awareness
- Supporting the London catch-up campaign
- Identifying vulnerable groups
- Identifying local roles in supporting development of an outbreak plan

As part of this, Public Health LBM has agreed with MCCG Executive team the following support:

- Quarterly provision of childhood immunisation uptake
- An agenda item on each of the three locality boards to review progress and discuss potential improvements on a quarterly basis
- A top ten tips to improve childhood immunisations

The purpose of this paper is to brief the Merton Clinical Commissioning Group Board on childhood immunisations in Merton generally, more specifically the on-going national catch-up campaign for the MMR and plans for the future, which include support to MCCG's quality objective around childhood immunisations.

## Background

After clean water, vaccination (immunisation) is the most effective public health intervention in the world for saving lives and promoting good health. The primary aim of vaccination is to protect the individual who receives the vaccine. Vaccinated individuals are also less likely to be a source of infection to others. This reduces the risk of unvaccinated individuals being exposed to infection. This means that individuals who cannot be vaccinated will still benefit from the routine vaccination programme. This concept is called population (or 'herd') immunity. The World Health Organization (WHO) recommends at least 95% of pre-school children to receive the recommended vaccinations to achieve 'herd' immunity.

When to immunise	What is given
Two months old	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (DTaP/IPV/Hib)
	Pneumococcal (PCV)
Three months old	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (DTaP/IPV/Hib)
	Meningitis C (MenC)
Four months old	Diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (DTaP/IPV/Hib)
	Pneumococcal (PCV)
	Meningitis C (MenC)
Between 12 and 13 months old - within a month of the first birthday	Haemophilus influenzae type b, Meningitis C (Hib/MenC)
	Measles, mumps and rubella (MMR)
	Pneumococcal (PCV)
Three years four months to five years old	Diphtheria, tetanus, pertussis and polio (dTaP/IPV or DTaP/IPV)
	Measles, mumps and rubella (MMR)
Girls aged 12-13 years	Human Papillomavirus Vaccine (HPV)
Thirteen to 18 years old	Tetanus, diphtheria and polio (Td/IPV)

On 1 April organisations took up new public health roles and responsibilities, which means the following in terms of anticipating and responding to concerns about a potential measles outbreak in England:

**Directors of Public Health:** responsibility changed from providing leadership for PCT commissioning of immunisation programmes, to that of seeking and providing assurance that the population is appropriately protected. This includes:

- Obtaining assurance that plans are in place to achieve Immunisation targets
- Assurance that discussions are taking place to inform decisions on any emerging local and national actions
- That Directors of Public Health will be kept informed and will be consulted on any plans

**NHS England (Previously National Commissioning Board):** now responsible for commissioning immunisation programmes (previously commissioned by PCTs). So, NHS England is responsible for the roll out of the MMR Catch up campaign for 10-16 year olds. If there were additional measures to be implemented in England, this would be decided by Government, on the advice of Public Health England (and in consultation with NHS England).

**Public Health England** has taken over responsibilities previously held by the Health Protection Agency, including providing advice and leadership on infectious disease outbreaks, such as:

- surveillance of infectious diseases (including measles)
- advising on the epidemiology of measles (patterns, causes and effects)
- providing specialist microbiology advice
- advising government of the risks and appropriate response

**GPs** continue to provide immunisations (mostly delivered by Practice Nurses), but from 1 April 2013 GPs are commissioned and performance managed by NHS England (and not PCTs). GPs and Practice Nurses are guided by the “Green Book” which provides policy and guidance on all aspects of immunisation, including eligibility (which is described above). As should be the case at any time, GPs and Practice Nurses identify and respond to their population’s vaccination needs (so, if someone has not been vaccinated, then MMR should be offered where appropriate).

**Sutton & Merton Community Services:** continue to be responsible for Child Health Records and recording Immunisation coverage. Health Visitors have a role in advising and promoting immunisations. Schools-based immunisation programmes have been delivered by Community Services Immunisation Team.

**Clinical Commissioning Groups** do not commission vaccinations. However, they have an interest in ensuring that hospital admissions due to vaccine-preventable illness are prevented. Thus the CCGs will want to encourage local GPs to discuss

with a patient if the patient's record shows that the individual has not been vaccinated.

### Current Status

Table 1 below sets out annual rates for the six childhood immunisations for Sutton & Merton

	Age 1					
	DTaP/IPV/Hib		Hib/MenC			
	2010-11	2011-12	2010-11		2011-12	
<b>Merton</b>	89.43	84.90	88.42		84.33	
<b>London</b>	90.73	91.27	89.27		89.95	
<b>England</b>	94.15	94.67	93.39		94.22	
	Age 2					
	PCV		MMR1		DTaP/IPV/Hib	
	2010-11	2011-12	2010-11	2010-12	2010-11	2011-12
<b>Merton</b>	88.55	83.88	81.64	78.70	91.78	89.98
<b>London</b>	89.58	90.40	83.75	86.08	93.33	92.85
<b>England</b>	93.58	93.89	89.13	91.25	96.14	95.98

	Age 5			
	DTaP/IPV/Hib (booster)		MMR2	
	2010-11	2011-12	2010-11	2011-12
<b>Merton</b>	72.68	70.61	79.77	76.98
<b>London</b>	74.73	78.83	76.62	80.21
<b>England</b>	85.89	87.35	84.21	92.90

Appendix 1 sets out a comparison of London boroughs for MMR uptake and measles cases from 2007/08 – 2011/12.

In Sutton and Merton the performance on Childhood Immunisation has been low for a number of years. The recent outbreak of Measles in South Wales has highlighted the potential risk to the local population and is indicative of our overall performance on childhood immunisations.

- In 2011-12 the proportion of the population immunised for MMR1 by 2<sup>nd</sup> birthday was 78.7% for Sutton and Merton, compared to 86.1% for London and 91.2% for England.

- In 2011/12 the proportion of the population immunised for MMR1 & 2 by 5<sup>th</sup> Birthday was 77%, compared to 80.2% for London and 86% for England.
- The trend over the past four years has been downwards and the level of coverage at 2<sup>nd</sup> birthday has reduced from 83.6% in 2008-09 (a reduction of nearly 5%)

According to the PHE MMR catch-up campaign ready reckoner, there are an estimated 2,054 unvaccinated and 2,005 partially vaccinated 10-16 year olds. This is based on registered population of 15,286 10-16 years, about 26 % of the target population.

Data recording has been identified as a potential significant issue affecting the accuracy of the published data and actions have been identified and are being put in place to address this via a GP Upload tool. From 2013/14 data will be available on a borough basis, which will provide a more accurate local picture. Local analysis of coverage by General Practice indicates a wide variation in the coverage rate of MMR at 2<sup>nd</sup> birthday. It also indicates that coverage may be higher than the joint Sutton and Merton data currently reported nationally.

Currently the incidence of confirmed Measles cases is low (1 in March 2013; 3 cases in 2012) and there are no current outbreaks locally and across London. However it is estimated that there is a cohort of young people mainly aged 10-16 years who were missed routine childhood immunisations at the height of negative publicity and concerns, now discredited, about links with MMR and autism and bowel disease. Public Health England has advised that London is more likely to experience clusters of cases rather than acute wide-spread outbreak as seen in Swansea and plans are being developed for a national MMR catch up campaign for 10-16 year olds over summer 2013.

In light of these changes discussed above, it is proposed that a Sutton and Merton Childhood Immunisation Task Group are established, to meet monthly, building on the work of the Immunisation Promotion Group. Draft terms of reference are being developed and a first meeting will take place on Monday 13<sup>th</sup> May 2013.

Led by the NHS England-London (Merton) immunisation coordinator, this effort will involve development of a draft Action Plan is under development and sets out 7 key areas for action:

- Establishing a Merton borough focus
- Improving uptake and access
- Improving data systems
- Improving awareness
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As part of this, Public Health LBM has agreed with MCCG Executive team the following support:

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### Appendix 1 MMR Coverage (1<sup>st</sup> and 2<sup>nd</sup> Dose) at age 5 by PCT for London

London Pct Name	2007/08	2008/09	2009/10	2010/11	2011/12
Barking & Dagenham PCT	60	55	62	69	78
Barnet PCT	59	82	82	83	88
Bexley Care Trust PCT	51	58	60	79	85
Brent Teaching PCT	43	32	72	82	89
Bromley PCT	-	71	71	77	89
Camden PCT	-	51	58	61	70
City & Hackney Teaching PCT	-	37	49	65	71
Croydon PCT	64	71	77	75	73
Ealing PCT	67	63	74	80	84
Enfield PCT	45	62	73	68	77
Greenwich Teaching PCT	39	57	66	80	82
Hammersmith & Fulham PCT	69	51	59	69	73
Haringey Teaching PCT	-	38	83	78	83
Harrow PCT	66	79	68	78	90
Havering PCT	67	68	72	79	86
Hillingdon PCT	-	70	85	87	89
Hounslow PCT	-	53	68	68	76
Islington PCT	43	50	64	75	83
Kensington & Chelsea PCT	-	63	65	66	75
Kingston PCT	76	77	78	82	83
Lambeth PCT	-	63	73	75	76
Lewisham PCT	45	51	62	66	70
Newham PCT	42	80	75	77	77
Redbridge PCT	-	66	71	77	77
Richmond & Twickenham PCT	61	82	75	76	79
Southwark PCT	51	55	68	69	71
Sutton & Merton PCT	68	79	81	80	77
Tower Hamlets PCT	66	79	84	94	94
Waltham Forest PCT	49	72	80	81	82
Wandsworth PCT	-	71	78	87	80
Westminster PCT	-	81	88	88	84
<b>London PHEC</b>	<b>49</b>	<b>63</b>	<b>72</b>	<b>77</b>	<b>82</b>
<b>England</b>	<b>74</b>	<b>78</b>	<b>83</b>	<b>84</b>	<b>86</b>

\* Some PCTs were unable to provide data for 2007/08 due to issues with child health systems.

## Key Points

### Key points and comments

There is on-going measles activity within the Orthodox Jewish community in north London. In addition, a small number of other incidents involving confirmed or suspected cases of measles have been reported to PHE across London so far in 2013, mainly involving schools or colleges.

**Table 1: Confirmed cases of measles by month, quarter and year with a comparison to the previous years by Local Authority for London**

No – Confirmed cases Rate - Crude Rate per 100,000	Month		Quarter		Year					
	Latest Month – March	Previous month – February	Latest quarter Jan – March 2013	Previous quarter Oct – Dec 2012	Year to date (up to March)		Previous year (up to March 2012)		Previous year (Total 2012)	
					No	Rate	No	Rate	No	Rate
<b>PHE Centre</b>	<b>9</b>	<b>30</b>	<b>68</b>	<b>13</b>	<b>68</b>	<b>0.83</b>	<b>34</b>	<b>0.41</b>	<b>139</b>	<b>1.69</b>
Barking & Dagenham	0	0	0	0	0	0	0	0	2	1.07
Barnet	0	6	7	0	7	1.96	5	1.40	14	3.92
Bexley	1	0	2	0	2	0.86	0	0	0	0
Brent	0	1	1	0	1	0.32	0	0	0	0
Bromley	0	8	10	0	10	3.22	1	0.32	1	0.32
Camden	0	1	1	0	1	0.45	0	0	2	0.91
City of London	0	0	0	0	0	0	0	0	0	0
Croydon	0	0	2	1	2	0.55	0	0	4	1.10
Ealing	0	0	0	0	0	0	0	0	6	1.77
Enfield	1	0	1	0	1	0.32	0	0	5	1.59
Greenwich	0	2	4	0	4	1.57	2	0.78	2	0.78
Hackney	4	8	28	3	28	11.3	10	4.05	45	18.2



Hammersmith & Fulham	0	0	0	0	0	0	0	0	0	0
	Month		Quarter		Year					
No – Confirmed cases Rate - Crude Rate per 100,000	Latest Month – March	Previous month – February	Latest quarter Jan – March 2013	Previous quarter Oct – Dec 2012	Year to date (up to March)		Previous year (up to March 2012)		Previous year (Total 2012)	
					No	Rate	No	Rate	No	Rate
Haringey	2	0	5	2	5	1.96	4	1.57	7	2.74
Harrow	0	0	0	0	0	0	3	1.25	4	1.66
Havering	0	0	0	0	0	0	0	0	1	0.42
Hillingdon	0	0	0	0	0	0	0	0	1	0.36
Hounslow	0	1	1	0	1	0.39	3	1.18	9	3.53
Islington	0	0	0	2	0	0	0	0	2	0.97
Kensington and Chelsea	0	0	0	1	0	0	1	0.63	3	1.90
Kingston upon Thames	0	1	1	0	1	0.62	0	0	0	0
Lambeth	0	0	0	0	0	0	2	0.66	4	1.31
Lewisham	0	0	2	0	2	0.72	0	0	3	1.08
Merton	1	0	1	0	1	0.5	0	0	3	0.50
Newham	0	1	1	1	1	0.32	0	0	1	0.32
Redbridge	0	0	0	2	0	0	0	0	2	0.71
Richmond upon Thames	0	0	0	0	0	0	0	0	1	0.53
Southwark	0	0	0	0	0	0	0	0	2	0.69
Sutton	0	0	0	0	0	0	0	0	4	2.0

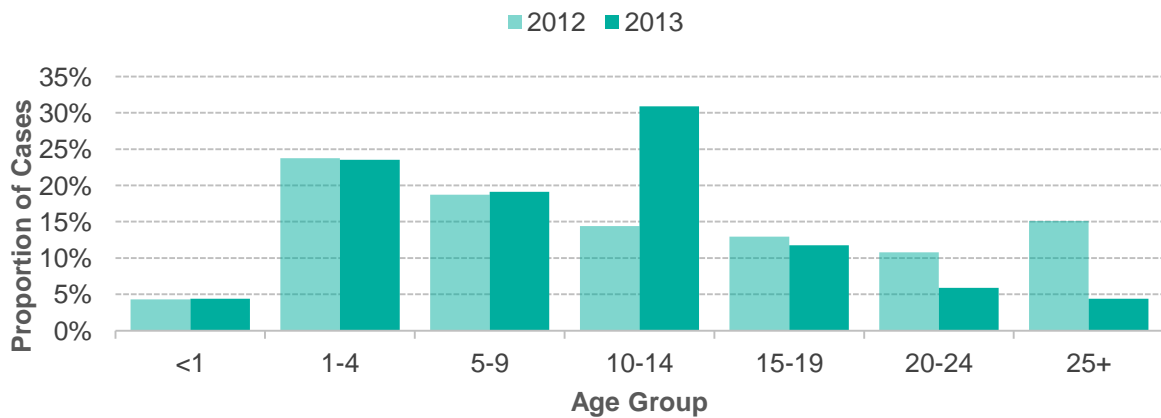
Tower Hamlets	0	0	0	0	0	0	1	0.39	2	9.078
Waltham Forest	0	0	0	1	0	0	0	0	4	15.44
Wandsworth	0	0	0	0	0	0	2	0.65	4	13.00
Westminster	0	1	1	0	1	0.46	0	0	1	0.46

\*Based upon onset date where available

**Table 2: Confirmed cases of measles by month, quarter and year with a comparison to the previous years by Area Team for London**

No – Confirmed cases Rate - Crude Rate per 100,000	Month		Quarter		Year					
	Latest Month – March	Previous month – February	Latest quarter Jan – March 2013	Previous quarter Oct – Dec 2012	Year to date (up to March)		Previous year (up to March 2012)		Previous year (Total 2012)	
					No	Rate	No	Rate	No	Rate
London	9	30	68	13	68	0.83	34	0.41	139	1.69

**Figure 1: Confirmed cases of measles (year to date) by age group with a comparison to the previous year (2012) for London**



**Figure 2: Thematic map of crude rates of confirmed measles by local authority**







**Crude rates of confirmed cases of Measles 2012, London**

**Key:**

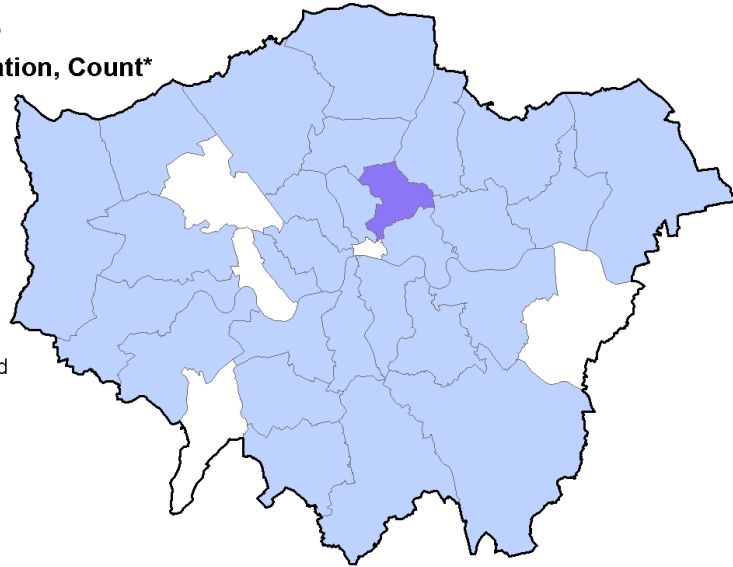
 PHE Centre Boundary

**Upper Tier Local Authorities**

**Crude Rate per 100,000 population, Count\***

	0.0, 31
	0.1 - 13.7, 112
	13.8 - 27.7, 6
	27.8 - 41.5, 0
	41.6 - 55.4, 0
	55.5 - 70.0, 3

\* of UTLAs falling into category, England



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**Outbreak situations in 2013**

**New outbreaks:** None

**On-going outbreaks:** None

**Closed outbreaks:** All reported outbreaks closed.