

Cab.25.3.2015/7.1

BARNSELY METROPOLITAN BOROUGH COUNCIL (BMBBC)

This matter is not a Key Decision within the council's definition and has not been included in the relevant Forward Plan.

Report of the Director of Human Resources,
Performance and Communications.

SCRUTINY TASK AND FINISH GROUP REPORT ON 'VACCINATIONS AND IMMUNISATION PROGRAMMES IN BARNSELY'

1. Purpose of the report

- 1.1 To report to Cabinet the findings of the Overview & Scrutiny Committee (OSC) from the investigation undertaken on its behalf by the 'Vaccinations and Immunisation' Task & Finish Group (TFG) regarding what is being done to monitor performance and ensure uptake of vaccinations in Barnsley.

2. Recommendations

- 2.1 **That Cabinet considers the conclusions and recommendations set out in section 6 as a result of its investigation into performance in relation to the delivery of vaccinations in the Borough.**

3. Background

- 3.1 From April 2013, commissioning of immunisation arrangements changed. The Director of Public Health (DPH) is still held accountable for protection from health threats to the Borough so must ensure that immunisation programmes are in place; however, the DPH doesn't commission or fund immunisation. Commissioning responsibility now sits with NHS England and is discharged via Public Health England through local area teams. The area team responsible for the Barnsley population is based at Rotherham and covers Sheffield, Rotherham, Barnsley, Doncaster and Bassetlaw.
- 3.2 Ensuring people are vaccinated against disease is the best way of protecting people from vaccine preventable diseases. Vaccinations are cheap and cost effective, and by immunising our population, the benefit will be felt by the NHS because of reduced hospital admissions and fewer deaths.
- 3.3 When Barnsley PCT (Primary Care Trust) was responsible for immunisation, GP practice level data was received enabling the Public Health team to meet with GPs and address performance. The team were able to exert local influence and Barnsley had the highest uptake in the country for MMR (measles, mumps and rubella) and HPV (Human Papillomavirus) vaccines.

3.4 As a result of the changes, the TFG was established to consider the uptake of vaccines in the Borough and the strengths and weaknesses of the current arrangements. The members of this TFG included: Councillor Gill Carr (TFG Lead Member), Councillor Jeff Ennis, Councillor Margaret Sheard, Councillor Dave Sim, Mrs Pauline Gould (Co-optee) and Mr John Winter (Co-optee).

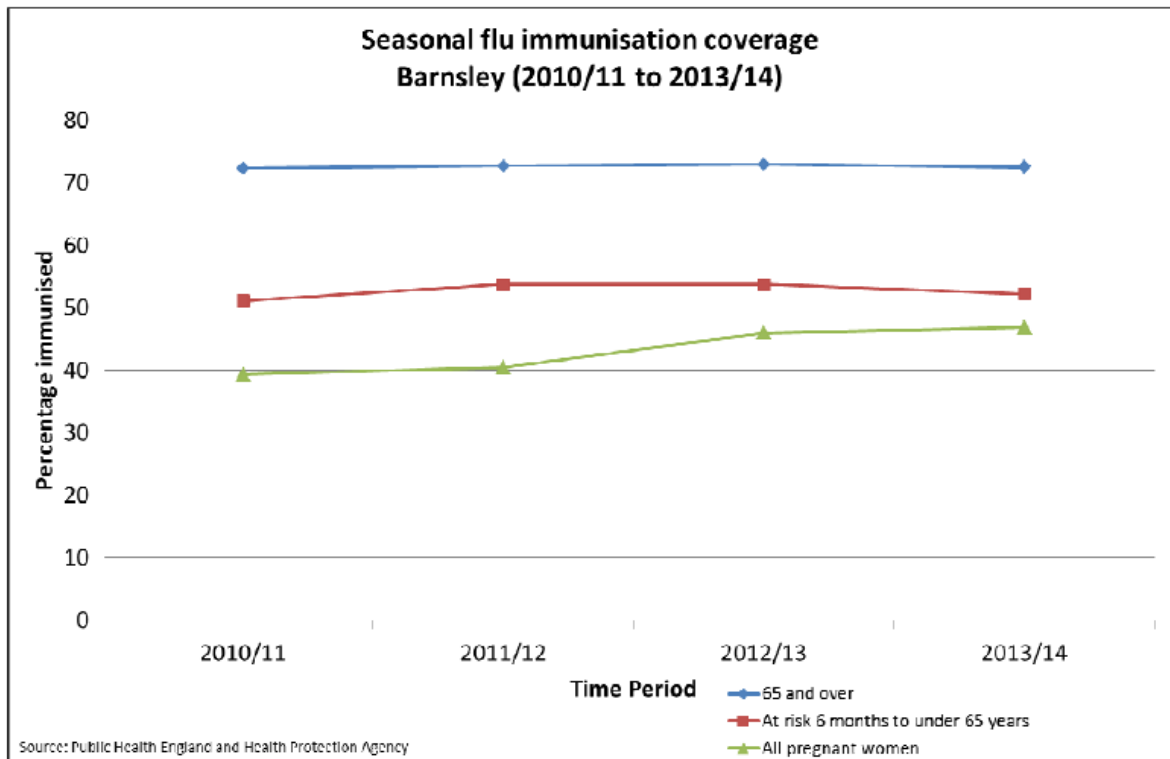
4. What the Task & Finish Group looked at

4.1 Barnsley Public Health Directorate prepared a report for the TFG summarising the available data regarding vaccines given according to the NHS Immunisation Schedule. The data compares Barnsley’s performance against its statistical neighbours (which are 10 other areas identified nationally as having similar characteristics to Barnsley such as Doncaster, Rotherham, Hartlepool etc.).

4.2 The data showed that for most vaccines, Barnsley was performing significantly higher than the England average with regards to the percentage of the relevant population being immunised. Of concern however was the trend data regarding the HPV vaccine (which is given to teenage girls and prevents against cervical cancer), which had decreased from 93.3% in 2010/11 to 89.4% in 2012/13 and the low uptake of seasonal flu vaccines.

4.3 The annual seasonal flu immunisation programme runs from 1st September to 31st January. Nationally, it is recommended that the flu vaccine is offered to the following GP patient groups: all patients aged 65 years and over; all patients aged 6 months to under 65 years in a clinical at-risk group (e.g. with an underlying health condition such as Diabetes); all patients aged 2 and 3 years; all pregnant women; and carers.

4.4 The TFG focused on the trend data for flu vaccine uptake shown in the graph below:



- 4.5 The WHO (World Health Organisation) recommends that 75% of any 'at-risk' population should be vaccinated, therefore this acts as the target for all flu vaccines. When Barnsley is compared with its 10 statistical neighbours regarding flu vaccine uptake: for the 65 years and over category it is the worst performing; for those at risk aged 6 months to under 65 years it is 8th out of 11; and for pregnant women it is the best performing.
- 4.6 The TFG met with representatives from the Barnsley Public Health Directorate who provided information on vaccinations and immunisation and some explanations regarding the data. This included consideration of the data provided and that a small number of GPs not performing well would impact significantly on the data for the Borough. The team suggested that the TFG met with the NHS local area team (LAT) as they would be able to provide more detailed information.
- 4.7 The TFG met with representatives from the NHS LAT who provided information on the work they do to monitor performance and quality, and to work with stakeholders to improve uptake of vaccinations and address inequalities. The NHS LAT suggested that the TFG met with representatives from the relevant communications team regarding the work to promote the uptake of the flu vaccine. Therefore the TFG met with a representative from the Barnsley Council Communications Team who provided detailed information of the work they had carried out as part of the Barnsley Health and Wellbeing Board (HWB) communications and implementation plan for flu 2014/15.

5. What the Task & Finish Group found

- 5.1 The NHS LAT advised that the HPV vaccination uptake for 2013/14 had increased from 89.3% to 90.2% receiving the 3 required doses of the vaccine. This is the highest reported across the South Yorkshire and Bassetlaw area and higher than the England average of 86.7%. The scheduled dose of 3 is being changed to 2; therefore this is likely to positively influence the uptake. This also means that caution will need to be applied when comparing future years' uptake data to previous years.
- 5.2 The TFG found that the NHS LAT is working hard to engage with GPs and work with other stakeholders to improve the uptake of vaccinations. This included visiting GP practices in an advisory and support role and reported that there is positive engagement from GP practices. Visits include asking GPs for assurance that they have robust call and recall systems and processes to follow-up eligible populations.
- 5.3 Barnsley CCG (Clinical Commissioning Group) have financially supported flu vaccines being offered during antenatal clinic appointments which has increased the number of pregnant women immunised against flu in Barnsley. Even though the percentage immunised is below the WHO target of 75%, Barnsley is the best performer in comparison with its 10 statistical neighbours.
- 5.4 The Barnsley flu communications plan which was delivered through the HWB was undertaken with no budget. It sought to disseminate messages through social media and the partnership organisations on the HWB. This enabled the promotion of the flu vaccine on internal and external websites, newsletters as well as other channels. Barnsley CCG secured funding from Public Health England as part of a wider funding pot for areas across South Yorkshire and Bassetlaw. This funding was used to create a

Borough wide publicity campaign from January 2015 urging residents in key groups to have their flu vaccination. This enabled nationally designed NHS promotional material to be publicised through a variety of channels such as local radio and newspaper advertising, bus shelter advertising and targeted Facebook advertising. Posters were also distributed to key public information points across the borough, such as GP surgeries and Pharmacies.

- 5.5 Nationally, there was no push to encourage those aged 65+ years to get their flu vaccine as this age group are usually complacent. Within Barnsley from September to December 2014, only 70.7% of this eligible population had been vaccinated which is below the WHO recommended target of 75%.
- 5.6 During 2015, nationally, there were negative reports in the media regarding this year's flu vaccine being ineffective for 97% of patients due to a possible slight variation in the virus. As well as a decline nationally in the uptake of flu vaccines, the negative reports in the media are likely to affect the number of people who obtain their flu vaccines during the next seasonal flu vaccination programme which will run from 1st September 2015 to 31st January 2016. Unless work is done to promote uptake of the vaccination, it is likely to result in an increasing number of excess winter deaths.

6. Recommendations

- 6.1 **Recommendation 1: We recommend that work is done to continue to ensure the uptake of HPV and flu vaccinations amongst at-risk groups increases**
The HPV vaccine is being reduced from 3 doses to 2 which should help to increase the uptake; therefore care will need to be taken when comparing previous years' data. Targeted work such as flu vaccines being offered during antenatal clinic appointments has increased the number of pregnant women immunised against flu in Barnsley.
- 6.2 **Recommendation 2: We recommend the continued sharing of timely information of data from NHS bodies and the council to ensure that work can be targeted effectively**
As the DPH no longer has commissioning responsibility for vaccinations and immunisation in Barnsley but is required to ensure protection of the population, it is important that local data and intelligence is available so that action can be taken should any concerns be raised. It is important that appropriate levers can be utilised to ensure the management and monitoring of performance of local services, for example through the senior representatives of the different agencies on the HWB.
- 6.3 **Recommendation 3: We recommend that Barnsley is compared with the highest performing areas with regards to the uptake of vaccinations**
To continue to improve the health and wellbeing of the Barnsley population it is important that Barnsley seeks to have the highest uptake of vaccinations. Also that best-practice and lessons learned from those areas with the highest performance is shared and learning is implemented.
- 6.4 **Recommendation 4: We recommend the NHS LAT share their forward plans with regards to increasing uptake of vaccinations**
It would be helpful to see what lessons have been learnt from recent work undertaken and the plans in place to keep improving the uptake of vaccinations moving forwards.

6.5 **Recommendation 5: We recommend that funding is sought to conduct timely campaigns to ensure the uptake of the flu vaccination during 2015/16**

As a result of the national negative press with regards to the flu vaccine during the 2014/15 flu season and the absence of a high-profile death from flu in the media, additional promotion is going to be required to ensure uptake of the flu vaccine. Unless uptake of the vaccine is promoted, it is likely to result in excess winter deaths. Work could be undertaken with both statutory partners as well as a variety of other agencies across the Borough to ensure dissemination of the messages.

6.6 **Recommendation 6: We recommend that data is gathered and utilised to understand where there are hard to reach groups who are less likely to access vaccination programmes and how work can be done with these groups to increase the uptake**

For example, figures should be broken down by race, ethnicity, disability etc. to understand hard to reach groups and target interventions accordingly. If these groups are not prioritised we will not be able to make a fundamental difference to the total of those 'at risk' of particular illnesses being vaccinated.

6.7 **Recommendation 7: We recommend that all Elected Members who are eligible for the vaccine have theirs during the seasonal flu vaccination period and promote uptake of the flu vaccination amongst their communities**

This helps to ensure that all opportunities to promote uptake of the flu vaccine are utilised.

The TFG would also like to take this opportunity to thank all those who provided information and assisted with the TFG's investigation.

7. **Implications for local people / service users**

7.1 By carrying out the recommendations in the report and increasing the uptake of vaccinations in the Borough, this will help to protect the population and prevent excess deaths.

8. **Financial implications**

8.1 There are no specific financial implications, although in responding to the report, several recommendations would have financial implications which would need to be fully assessed by the appropriate services responding which may be the Council or partnership agencies.

9. **Employee implications**

9.1 There are no specific employee implications, although in responding to the report, several recommendations would have employee implications which would need to be fully assessed by the appropriate services responding which may be the Council or partnership agencies.

10. **Communications implications**

10.1 It is essential that the uptake of vaccinations is promoted across the population, in particular to vulnerable groups. To prevent excess winter deaths, it is essential that the uptake of the flu vaccine is promoted. As a result of the negative press around the flu vaccine during the 2014/15 flu season, it is important that resources are made available to promote the uptake of the vaccine in a timely way for the 2015/16 flu season.

11. Consultations

11.1 Consultation has taken place with Councillors G. Carr (TFG Lead Member), Ennis, M. Sheard, Sim, Co-opted Members Ms Pauline Gould and Mr John Winter and Council Officers Julia Burrows, Julia Bell and Rachel King.

12. Community Strategy and the Council's Performance Management Framework

12.1 As part of the Council's priority to have 'citizens achieving their potential', the Council works to 'make the improvement of people's health and wellbeing everybody's business, with an emphasis on prevention and the contribution that all services can make'. A key element of prevention is to facilitate the population to be immunised against vaccine preventable diseases. It is therefore essential that the uptake of vaccines is promoted to our communities through all possible channels of communication.

13. Tackling health inequalities

13.1 Ensuring people are vaccinated against disease is the best way of protecting people from vaccine preventable diseases. It is important to promote the uptake of vaccines to all our communities to aid in tackling health inequalities and improving the health of our communities.

14. Risk management issues

14.1 This issue directly relates to the following risks, currently logged on the Council's Strategic Risk Register (SRR):

- 'Failure to achieve a reduction in Health inequalities within the Borough' (Risk 3026); and,
- 'Failure to protect the health of the population from preventable health threats' (Risk 3047).

14.2 The recommendations detailed in section 6.1 – 6.7 should be considered by the Director of Public Health in light of the current review of the SRR, which is due to be completed and reported to Cabinet in May 2015.

14.3 It is likely the recommended activities detailed in this report will contribute further to the effective mitigation of these risks, and it would be appropriate for any follow-up report regarding vaccinations and immunisations in Barnsley to be cognisant of these risks.

15. Health & safety issues

15.1 To ensure the protection of the population, the uptake of vaccinations needs to be maximised. To enable this, resources need to be made available both to deliver and promote the uptake of vaccinations; otherwise this is likely to result in excess deaths.

16. Promoting equality & diversity and social inclusion

16.1 The TFG looked at the impact of this issue on all of Barnsley’s communities, with specific regard for those who are identified as vulnerable to particular illnesses under NHS guidelines. It is important that all relevant populations are encouraged to be vaccinated against disease and work is done to specifically target the most vulnerable as highlighted in the recommendations.

17. Glossary

- 17.1 BMBC - Barnsley Metropolitan Borough Council
- CCG - Clinical Commissioning Group
- DPH - Director of Public Health
- HWB - Health and Wellbeing Board
- LAT - Local area team
- NHS - National Health Service
- OSC - Overview and Scrutiny
- PCT - Primary Care Trust
- TFG - Task and Finish Group
- WHO - World Health Organisation

18. Background papers

18.1 Immunisation in Barnsley Overview Report by Barnsley Public Health Directorate (November 2014).

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Financial Implications / Consultation
<i>(To be signed by senior Financial Services officer where no financial implications)</i>