






Routine Childhood Immunisations Update

Health & Wellbeing Board

23 November 2022

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Proposed NCL population health improvement Areas for Development	Key rationale for these 5 Areas for Development
START WELL	
 Childhood immunisations	NCL is an outlier in London for coverage
LIVE, WORK AND AGE WELL	
 Cardiovascular disease - preventing heart disease and strokes	Biggest causes of avoidable death (largely preventable and treatable) with common risk factors
 Cancer - prevention, early detection and good quality care for all	
 Respiratory disease (e.g. asthma and COPD*)	Next highest cause of avoidable mortality and long term health problems
WHOLE LIFECOURSE	
 Mental health and wellbeing (all ages)	Increasing prevalence and underpins other aspects of wellbeing

*Chronic obstructive pulmonary disease

0-5s Vaccinations

- GPs are main provider of routine vaccinations for children aged 0-5 years
- Immunisations are considered a key indicator of primary health care performance and a proven intervention to improve public health
- Disparities in uptake continue across the borough, with lower vaccination uptake in the east of the borough

Overall, lowest vaccine uptake remains for the 2nd dose MMR at 5 years at 74% uptake (remaining 671), where Romanian and Bulgarian are first language spoken.

	% Uptake (remaining to vaccinate)	Uptake in Black & Minority Ethnic groups%	Uptake in the Most Deprived population %	Lowest Uptake by Ethnicity	Lowest Uptake by First Spoken Language
All vaccinations at 1 year	78% (566)	79%	70%	Black Caribbean, White-Irish/Gypsy or Irish Travellers	Bulgarian, Romanian
All vaccinations at 2 years	76% (612)	72%	70%	Black African/ Caribbean	Bulgarian, Romanian
All vaccinations at 5 years	71% (785)	68%	63%	White Irish, Mixed- White & Black African	Bulgarian, Romanian, Spanish

School Aged Vaccinations

- Vaccination UK is commissioned by NHS England to deliver vaccinations in schools across Haringey
- Year 8: Human papillomavirus infection (HPV)
- Year 9: Meningitis ACWY and DTP (Diphtheria, Tetanus and Polio School Leaver Booster)
- In the 21/22 school year, a total of 4005 children were vaccinated through the programme, a 2% decrease in the uptake in comparison to last year and 7% decrease from 2019/20

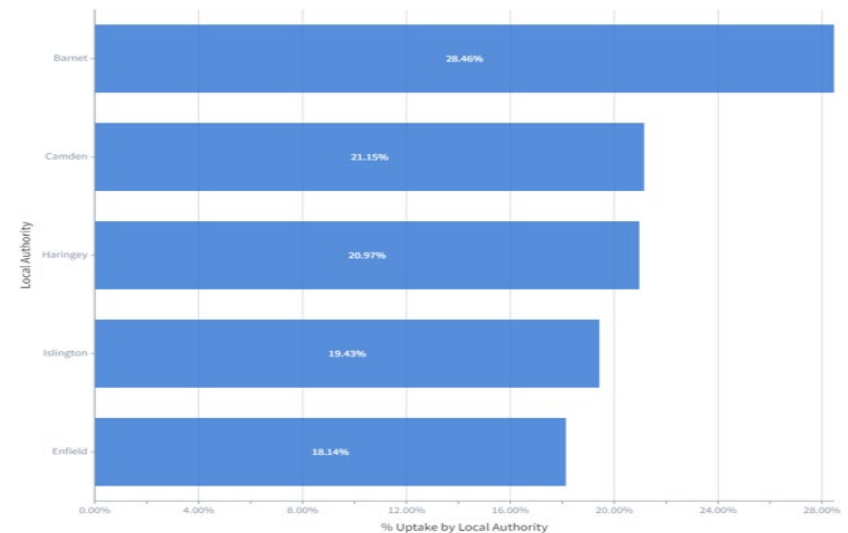
20/21 number of doses given	21/22 number of doses given	Percentage Uptake	Vaccine Programme
1076	1042	24%	HPV 1 Female
929	476	24%	HPV 2 Female
912	866	54%	HPV 1 Male
712	428	22%	HPV 2 Male
2060	2094	56%	DTP
2063	2097	56%	ACWY

Polio Booster Vaccination

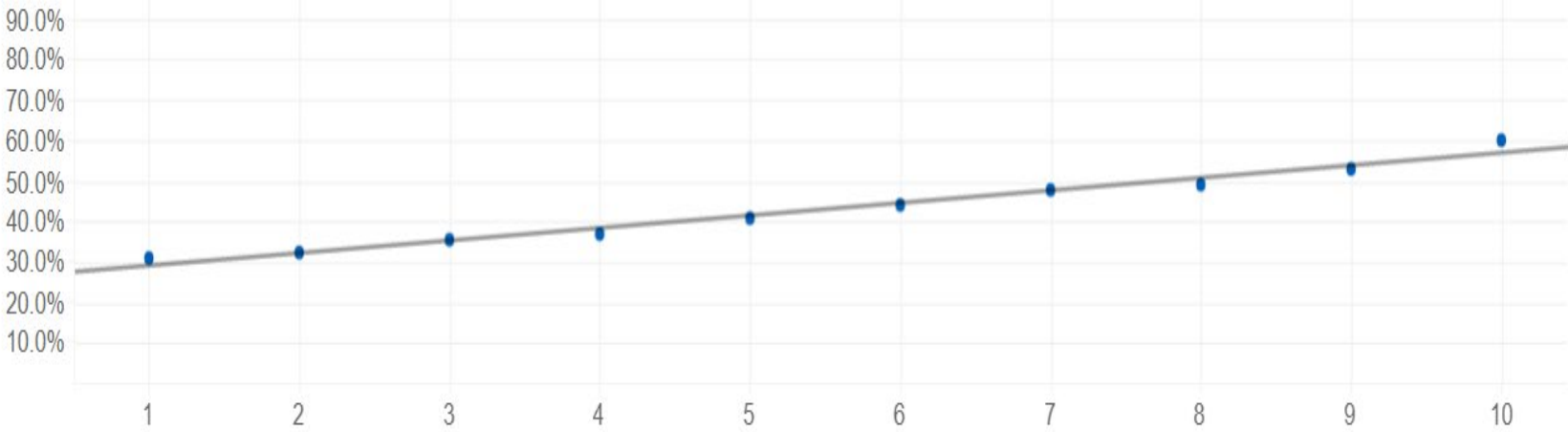
- Vaccination UK and GPs are largely responsible for delivering Polio catch-up campaign
- The campaign is likely to run until end of Dec
- Uptake is being supported by central clinic in Hornsey, as well as outreach efforts from GP practices & Vaccination UK
- In Haringey, the campaign has boosted 20.97% of eligible population (with 6,091 administered)
- There are disparities in uptake across NCL, including notably lower uptake in Black communities.

Uptake by Local Authority (%)

ICB: North Central London



Uptake amongst schools in NCL: Most deprived postcodes is 27.8% lower than the least deprived



Source: NHS Futures – Flu Dash Board

Six Vaccination Action Plan Workstreams

Service delivery

Strengthen relationships with Hospitals, Haringey GP Federation, PCN Clinical Directors and Vaccination UK. Obtain an understanding of service delivery schedules and **offer of support to GPs and schools with lowest uptake for routine preschool vaccinations.**

Access to trusted and accurate information

Update all Council website pages around [vaccinations and immunisation](#) (inc [childhood vaccinations](#)) in accordance with the latest guidance and develop information leaflets for parents of preschool children

Raising public awareness of childhood immunisations and vaccinations

To raise awareness we will design, develop and implement **multi-channelled public marketing and advertising campaigns** bespoke to the target audiences. This will complement the rollout of NHS E/I London, GP, Vaccination UK's and other locally developed call and recall systems.

Key stakeholder communications and engagement

Develop and implement an **engagement plan for key message carriers and professionals** that come into contact with parents and guardians e.g. Hospitals, Headteachers, Children's Centres, Practice Managers, School Nurses and Health Visitors

Data collection, collation and analyses

Enhance **understanding of vaccination barriers and motivations**, define success measures and develop a monitoring and evaluation framework for coverage and uptake in eligible cohorts

Tackling disparities and inequalities in childhood vaccine uptake

Undertake literature search around effective interventions. Refine and develop targeted public marketing and advertising campaign, engage identified key message carriers including, healthcare professionals and community leaders for lowest uptake cohorts. **Undertake and support communication and engagement with underserved and low uptake communities**

GP Federation Preschool Pilot: 2021/22 Phase 2

In 2020/21 supported 11 practices in Haringey with lowest coverage to improve uptake of routine childhood vaccinations and immunisations.

Extended the offer to 20 lowest performing practices in 2021/22. Objectives include:

- **Improving practice data** through supporting with correct coding, updating templates and identifying deductions
- **Improving call and recall**, plus supporting practices with identifying and working with declines
- **Increasing capacity of nurse-led appointments** through the Federation Hub
- **Timely tracking of activity** through developing a bespoke dashboard
- **Delivering training** for practices and providing dedicated support
- **Working with Public Health to raise awareness**



GP Federation Preschool Pilot: Outputs & Outcomes

Feb 22

Federation Outputs

- Updated list with to do task list sent out to 20 practices.
- Webinar and How to guide sent out to all Haringey Practices
- 2 rounds of call/recall completed, and actions sent out to practices
- Feedback & training 1:1 session carried out for each practice
- Monthly dashboard sent out Via PCN dashboard
- Training webinar and Q&A completed.
- 1:1 session completed for 15 out 20 practices.
- Dedicated support email QIST.Enquiries@nhs.net set up
- Regular updates to the Portal & Practice Newsletter
- Short patient telephone survey used during call/recall.
- Excel list of vaccinations decliners and main reason why

GP Outcomes

- 7 Practices saw an improvement in primary and preschool vaccinations
- Activity across 10 Practices have remain steady overall across 3 categories
- 3 Practices had a decline in coverage attributable to admin capacity and limited engagement with the GP Federation



Approach to engage parents/carers of 0-5s

- MMR press release
- Display advertising on Haringey Council website inc intranet and key webpages (school admissions, nursery places etc)
- Posters & postcard distribution to over 400 venues with accompanying cover letters & emails
- 5 month programmatic digital advertising east of borough focus
- School admissions brochures
- Social Media – Haringey Council, NCL, GPs and Key organisations
- Video content with key message carriers including faith and community leaders as well as healthcare professionals
- Public Haringey Council childhood vaccination webpage:
www.haringey.gov.uk/childhood-vaccinations



Bibi Khan MBE President of the London Islamic Cultural Centre promoting childhood vaccinations

Resources for Professionals to Share

Making Every Contact Count

Haringey Council Webpage:

www.hariney.gov.uk/childhood-vaccinations-resources

- Social media posts and suggested copy
- A4 posters and postcards for display
- Childhood vaccination information leaflets for download or printing in English, Bulgarian, Polish, Spanish, Romanian and Turkish
- Videos created by Haringey Federated4Health about childhood vaccinations in key community languages
- National MMR campaign materials
- Flu vaccinations for children leaflet

HAS YOUR CHILD HAD THEIR VACCINATIONS?

CHECK THEIR RED BOOK AND MAKE AN APPOINTMENT WITH THEIR GP TODAY

NHS
Haringey
LONDON

Talaalka caruurnimadu waa hab muhiim a...
Copy link

PROTECT YOUR CHILD FROM FLU THIS WINTER

Flu is caused by the influenza virus. It can be a very unpleasant illness for children that can lead to serious illnesses like bronchitis and pneumonia. Children can catch and spread flu easily. Vaccinating them also protects the vulnerable including babies and older people. Children aged 2 and above can get a free flu vaccine, given as a nasal spray – so no needles! The nasal spray flu vaccine is quick and painless and offers your child the best protection. From 2 years old until starting primary school, your child can get their free flu vaccine from your GP. If you or your child are not registered with a GP, find a local practice near you by visiting NHS Find A GP online. www.nhs.uk/nhs-service-search/find-a-gp Book an appointment with your GP today!

Why vaccinate your child?

- 1 Protect your child – against flu and serious illness
- 2 Children spread viruses – Protect your family and friends
- 3 The nasal spray is easy and painless
- 4 Excellent safety record – given to millions of children worldwide
- 5 Avoid costs! If your child gets flu, it's hard to take time off work

Find out more: haringey.gov.uk/winter-vaccinations

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THE FACTS ABOUT VACCINES
CHILDHOOD VACCINE INFORMATION LEAFLET

Watch on **YouTube**

1. Are vaccine-preventable diseases harmful?
A. Vaccine-preventable diseases can be very harmful to children. For example, measles can cause pneumonia, brain swelling or death.

2. Are vaccines safe?
A. Vaccines are safely tested to ensure they are safe.

3. Do vaccines have serious side effects?
A. Most side effects from vaccines are mild, such as a sore arm. Very few people experience no side effects at all.

4. Is natural immunity from getting the disease better than receiving the vaccine?
A. You cannot be 'naturally immune'. If you survive naturally, the virus remains in your body, according to several different studies, for a much longer time.

5. Are all vaccines too much for the immune system to cope with?
A. The amount of bacteria or virus in a vaccine is much less than the millions of germs babies and children have contact with every day. The immune system is able to support daily germs and defend ourselves.

6. How can you be sure a vaccine can be used safely?
A. Children with allergies can receive their vaccines at GP practices, unless they have had anaphylaxis to a previous vaccine. If you are worried about your child's allergies, ask your GP. If you have any questions, speak to your practice nurse, health visitor or GP.

7. Why does my child need vaccines if other people in the community do not have them?
A. If we don't vaccinate all our children, diseases will continue to spread. The only way to protect your child is to have their vaccination.

8. Do vaccines give children autism?
A. Many studies have shown that there is no association between them and autism.

9. Do vaccines contain harmful ingredients?
A. Vaccines are made up mostly of water and the inactive virus. All other ingredients are in very small amounts. Vaccines do not contain mercury.

10. What full lists of vaccine ingredients are available?
A. www.nhs.uk/avaccineingredients

11. Do vaccinations contain pork gelatine?
A. The nasal spray and the meningococcal vaccine contain pork gelatine. We can't support the use of these vaccines as the pork is not being eaten. There are no other alternatives to both of these vaccines, ask your GP.

12. Are GP practices closed, can they receive vaccinations?
A. Children can still receive vaccines if they have a mild fever like a cold. If they have a high fever then it is good to wait until your GP is back.

13. Are GP practices safe to visit?
A. Yes, GP practices are getting equipment for routine pre-school vaccinations. The first continues to have every procedure already in place for your child's meningococcal (MenCo) vaccine.

14. How do I know which vaccine my child needs and when?
A. CHECK YOUR CHILD'S RED BOOK or speak to their health visitor to see if they are due and book an appointment at their GP practice.

15. My child is not registered with a GP, can they still get their vaccine?
A. GPs are responsible for providing most vaccinations for children and it is important for your child to be registered with a practice to find a GP near you. www.nhs.uk/nhs-service-search/find-a-gp For more information about childhood vaccinations and when they are due visit www.haringey.gov.uk/childhood-vaccinations

Preschool Digital Advertising Campaign

5 month campaign Feb-July 2022

More than over 1.4 million adverts were displayed on over 70,000 devices used by parents and guardians in the east of the borough.

Almost 8.5% of these adverts were clicked on, watched for more than 10 seconds, liked or shared.

Facebook and Instagram adverts yielded the most interactions (clicks/video views etc)

Somali, Turkish, Polish and English childhood vaccinations animations created by the GP Federation as well as assets with just Black children in the visuals yielded the highest interaction rates



Next steps

1. Support to targeted offer of polio vaccinations for Charedi residents
2. Hackney/Haringey joint vaccination plans for Charedi residents
3. Planning to increase uptake among Black communities
4. Expanding vaccination clinic locations (e.g. Children's Centres)
5. Targeted digital advertising
6. Make Contact Count (health visitors/school nurses/early years)
7. Continued advocacy for opportunistic vaccinations at hospitals
8. Improving uptake of school-based vaccinations
 1. learning from other areas
 2. focused engagement with low and high uptake schools (and local partners)
 3. repeat health equity audits

Appendix

Childhood Vaccination Schedule 2022

Routine vaccination schedule spans from 8 weeks old to 13-14 years old.

By the time a child is 14, they should have had 17 vaccinations against preventable infections and diseases



The routine immunisation schedule				from February 2022
Age due	Diseases protected against	Vaccine given and trade name		Usual site ¹
Eight weeks old	Diphtheria, tetanus, pertussis (whooping cough), polio, <i>Haemophilus influenzae</i> type b (Hib) and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	Meningococcal group B (MenB)	MenB	Bexsero	Left thigh
	Rotavirus gastroenteritis	Rotavirus ²	Rotarix ²	By mouth
Twelve weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	Pneumococcal (13 serotypes)	Pneumococcal conjugate vaccine (PCV)	Prevenar 13	Thigh
	Rotavirus	Rotavirus ²	Rotarix ²	By mouth
Sixteen weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Infanrix hexa or Vaxelis	Thigh
	MenB	MenB	Bexsero	Left thigh
One year old (on or after the child's first birthday)	Hib and MenC	Hib/MenC	Menitorix	Upper arm/thigh
	Pneumococcal	PCV booster	Prevenar 13	Upper arm/thigh
	Measles, mumps and rubella (German measles)	MMR	MMRvaxPro ³ or Priorix	Upper arm/thigh
	MenB	MenB booster	Bexsero	Left thigh
Eligible paediatric age groups ⁴	Influenza (each year from September)	Live attenuated influenza vaccine LAIV ^{3,5}	Fluenz Tetra ^{3,5}	Both nostrils
Three years four months old or soon after	Diphtheria, tetanus, pertussis and polio	dTaP/IPV	Boostrix-IPV	Upper arm
	Measles, mumps and rubella	MMR (check first dose given)	MMRvaxPro ³ or Priorix	Upper arm
Boys and girls aged twelve to thirteen years	Cancers and genital warts caused by specific human papillomavirus (HPV) types	HPV (two doses 6-24 months apart)	Gardasil	Upper arm
Fourteen years old (school Year 9)	Tetanus, diphtheria and polio	Td/IPV (check MMR status)	Revaxis	Upper arm
	Meningococcal groups A, C, W and Y	MenACWY	Nimenrix	Upper arm