

## **Committee: Cabinet**

**Date: 19<sup>th</sup> October 2015**

Agenda item:

Wards: ALL

### **Subject: Final Report of the Improving the uptake of immunisations in the 0-5 age group scrutiny review**

Lead officer: Stella Akintan, Scrutiny Officer

Lead member: Councillor Brenda Fraser, Chair of the immunisations task group

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#### **Recommendations:**

- A. That Cabinet considers and endorses the recommendations arising from the scrutiny review on improving the uptake of immunisations in the 0-5 age group attached at **Appendix 1**.
  - B. That Cabinet agrees to the implementation of the recommendations, by means of an action plan to be drawn up by officers and relevant partners.
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## **1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY**

- 1.1. This is a report and recommendations arising from a scrutiny review of improving the uptake of immunisations in the 0-5 age group. The work came about as the result of a successful application to the Centre for Public Scrutiny for five free days support from an expert advisor to support a scrutiny task group on immunisations. The review was sponsored by Sanofi Pasteur, although they did not have any direct involvement in the work.
- 1.2. The report and recommendations have been endorsed by both the Overview and Scrutiny Commission and the Health and Wellbeing Board.

## **2 DETAILS**

- 2.1. In 2012/13 Sutton and Merton Primary Care Trust reported the lowest childhood immunisation rates in in the Capital, with very few GP practices reaching the World Health Organisation targets of 95%.
- 2.2. The task group agreed to focus on immunisations for the 0-5 years in recognition that this is the most challenging area and one which a scrutiny review could have a significant impact.
- 2.3. The evidence highlights that immunisations in the early years from 0-5 had the lowest take up rates and this group along with the over 65s, are the most vulnerable to communicable diseases. A significant number of vaccinations are required during the early years which may contribute to the challenges in this area. Evidence shows that if people do not begin the process of immunising their children in the early years; they are less likely to have the booster injections.
- 2.4. It was also recognised that the child population is expanding, with changing demographics, which makes this a more pertinent area to review.

Immunisations at the school age years have the benefit of a structure of the school system which can help to boost rates.

- 2.5. The report was agreed by the Overview and Scrutiny Commission on the 14<sup>th</sup> July 2015 and the Health and Wellbeing Board on 29<sup>th</sup> September, 2015.

### **3 ALTERNATIVE OPTIONS**

The Overview and Scrutiny Commission can select topics for scrutiny review and for other scrutiny work as it sees fit, taking into account views and suggestions from officers, partner organisations and the public.

Cabinet is constitutionally required to receive, consider and respond to scrutiny recommendations within two months of receiving them at a meeting.

- 3.1. Cabinet is not, however, required to agree and implement recommendations from Overview and Scrutiny. Cabinet could agree to implement some, or none, of the recommendations made in the scrutiny review final report.

### **4 CONSULTATION UNDERTAKEN OR PROPOSED**

- 4.1. Cabinet will be consulted at the meeting

### **5 TIMETABLE**

- 5.1. The report is being sent to Cabinet for consideration and response.

### **6 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS**

- 6.1. None relating to this covering report

### **7 LEGAL AND STATUTORY IMPLICATIONS**

- 7.1. None relating to this covering report. Scrutiny work involves consideration of the legal and statutory implications of the topic being scrutinised.

### **8 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS**

- 8.1. It is a fundamental aim of the scrutiny process to ensure that there is full and equal access to the democratic process through public involvement and engaging with local partners in scrutiny reviews. Furthermore, the outcomes of reviews are intended to benefit all sections of the local community.

### **9 CRIME AND DISORDER IMPLICATIONS**

- 9.1. None relating to this covering report. Scrutiny work involves consideration of the crime and disorder implications of the topic being scrutinised.

### **10 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS**

- 10.1. None relating to this covering report

### **11 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT**

- Scrutiny review report - Improving the uptake of Immunisations in the 0-5 age group

### **12 BACKGROUND PAPERS**

12.1. .