

Report to Merton Healthier
Communities and Older
People Overview and Scrutiny
Panel on Section 7a
Immunisation Programmes in
Merton

Report on Section 7a Immunisation Programmes in the London Borough of Merton.

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Classification: OFFICIAL

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1 Aim

- The purpose of this paper is to provide an overview of Section 7a adult immunisation programmes in the London Borough of Merton. This uses the latest available published data 2019/20 for Shingles and PPV and 2021/22 for Influenza. The paper covers the vaccine coverage and uptake for each programme along with an account of what NHS England and Improvement (NHSE&I) London Region are doing to improve uptake and coverage.
- Section 7a immunisation programmes are population based, publicly funded immunisation programmes that cover the life-course and include:
 - o Antenatal and targeted new-born vaccinations.
 - Routine Childhood Immunisation Programme for 0-5 years.
 - School age vaccinations.
 - Adult vaccinations such as the annual seasonal influenza vaccination
 - COVID-19 vaccination programme
- This paper focuses on those immunisation programmes provided for adults namely, influenza, shingles and pneumococcal polysaccharide vaccine (PPV).
- Members of the Healthier Communities and Older People Overview and Scrutiny Panel are asked to note and support the work NHSE&I (London) and its partners such as UKHSA, the Local Authority and the ICS are doing to increase vaccination coverage and immunisation uptake in Merton.

2 Headlines for London

- Historically and currently, London performs lower than national (England) averages across all the immunisation programmes.
- London faces challenges in attaining high coverage and uptake of vaccinations due to high population mobility, increasing population, increasing fiscal pressures and demands on primary care services and a decreasing vaccinating workforce.
- The COVID-19 pandemic in 2020 onwards impacted upon the delivery of Section 7a immunisation programmes, pausing some programmes and reducing delivery on others due to non-pharmaceutical interventions, redeployment of workforce onto COVID-19 pandemic and the introduction of the COVID-19 vaccination programmes.
- The dissolution of Public Health England in September 2021 has changed the
 governance structure around immunisation programmes including the roles and
 responsibilities of NHSE/I, UKHSA, OHID (in DHSC), ICSs and local authorities.
 This new governance structure is yet to be published. However, NHSE/I remain
 the commissioning organisation for Section 7a immunisation programme and
 are responsible and accountable for these programmes.
- The London Immunisation Partnership Board paused in 2020 but is expected to meet again in March 2022. However, NHSE/I London remain committed to ensure that the London population are protected from vaccine preventable

diseases and are working to increase equity in access to vaccination services and to reduce health inequalities in relation to immunisations.

3 Merton and the challenges

- Merton is affected by the same challenges that face the London region. London
 has in recent years delivered significantly poorer uptake than the remainder of
 the country. Reasons for the low coverage include:
 - The impact of nationwide non-pharmaceutical interventions such as social distancing measures and specific guidance for elderly groups to temporarily shield remained in place throughout the COVID-19 pandemic.
 - London's high population mobility which affects tracking and recording of adult patients.
 - Coding errors in general practice (including missing data for patients vaccinated abroad or elsewhere).
 - o Inconsistent patient invite/reminder (call-recall) systems across London
 - Declining vaccinating workforce.
 - Decreasing and ageing GP workforce dealing with increasing work priorities and patient lists, resulting in shortages of vaccinators and appointments.
 - o Difficulties accessing appointments.
 - Large numbers of underserved populations who are associated with lower uptake of vaccinations than the wider population (i.e. delayed vaccinations).
 - Growing vaccine hesitancy (i.e. confidence in vaccine, lack of convenience and complacency).
 - o In relation to adult vaccinations, there are extra complications regarding vaccine shortages (e.g. PPV23), delays in 'flu vaccine supply, different vaccines for different cohorts and different providers (pharmacy, maternity, acute trusts and general practice) meaning that the surveillance rates do not reflect all vaccinations given (mainly those given in general practice).

4 Seasonal 'flu Vaccination

Vaccination Uptake rates

- The <u>national influenza</u> (flu) immunisation programme for 2021/22 set high and stretching ambitions, reflecting the importance of protecting against flu for those who are most vulnerable in society at this time of year. Not only is it seen as essential that the associated morbidity and mortality is reduced to protect those most vulnerable, but it was also noted to be vitally important to reduce hospitalisations during a time when the NHS and social care were potentially going to be managing outbreaks of COVID-19 and increased UEC demand
- The London' Flu Plan reflects the ambitions of the national programme, in relation to the targeted patient cohorts and the desired high vaccine uptake levels. It also refers to the key learning from the 2020/21 flu immunisation

- programme, and the learning afforded from the successful delivery of the COVID-19 vaccination programme
- The delivery of the Plan has been guided by the World Health Organisation's vaccine uptake framework for understanding barriers and facilitators of vaccine uptake and the three drivers:
 - **Convenience** how easy it is to access vaccination
 - **Complacency** awareness of the vaccine, the need for the vaccine or its benefits, or whether the vaccine is relevant to them
 - Confidence relates to trust in the vaccine, healthcare services and policy makers
- The ambition for London's vaccination uptake across the eligible cohorts was to exceed 2020/21 regional levels, noting that the expanded flu programme this season and higher population figures in eligible cohorts presented a huge challenge for the region, alongside delivery of a demanding Covid-19 vaccination programme, and circulating Covid-19 infection
- Nationally, there was a target of 85% 'flu vaccine uptake for patients aged 65 years and older and 75% for the clinical 'at risk' groups (those aged 6 months to 64 years with long term conditions), including pregnant women. For 2-3-year olds the ambition was for at least 70%, with most practices aiming to achieve higher
- The latest available UKHSA published data is for December 2021 it must be noted that the current 'flu season is still underway with the data collection being completed by end of March 2022. There is data latency with some of the information flows, and therefore over the forthcoming weeks, there will be work underway to ensure GP records are updated with the aim of providing a near accurate picture by the end of the season
- However, at this point in the season it is correct to say that London's performance so far has been better than the previous season in the 50-64-yearold cohort only
- Rates to date have been lower than 2020/21 for the clinical at risk, pregnant women and in age 2- and 3-year olds. Further efforts are underway during January and February to continue to encourage eligible people to come forward, and specifically within these cohorts.
- Table 1 illustrates the uptake in London compared to England for the years 2019/20 to 2021/22.
- All CCGs in London have performed below the national ambition of 85% for over 65s and 75% for clinically at-risk groups for the 2021/22 season to date
- 'Flu vaccination uptake for this season has been affected by:
 - The expanded and accelerated Covid-19 booster programme in December 2021 this was the national focus at that time due to the Omicron variant
 - The healthy 12-15-year olds Covid-19 vaccination programme this affected the expanded 'flu vaccination programme for school-aged children
 - Concern from people on receiving both 'flu and Covid-19 vaccinations at the same time/close together, and therefore prioritising the Covid-19 vaccination
 - General Practice vaccine stock not meeting requirements of early public demand, and then delayed access to national DHSC vaccine stock

- Pharmacy stock was also depleted earlier in the season due to early demand, especially with the 50-64-year-old cohort including as eligible
- The low circulation of influenza, and perceived reduction in risk
- It must be noted that these figures may not include all flu vaccinations offered in maternity units due to delays in data inputting and transfer of information
- For London, 564k vaccinations have been administered by Community Pharmacy to date (Week 1, 2022) which represents 29% of the total vaccinations given; this represents a 72% increase from 2020/21 (235k more vaccines)

Table 1
Seasonal Influenza vaccination rates for England and London 2019-2022

England				London		
	2019-20	2020-21	2021-22	2019-20	2020-21	2021-22
65 and over	72.4	80.6	81.6	66.2	71.1	68.9
Under 65 (at-risk only)	44.9	51.7	51.6	41.8	44.0	40.6
Pregnant	43.7	43.4	41.9	39.2	37.0	32.9
2-3 yrs.	43.8	56.0	48.7	32.4	45.9	40.2
Reception (age 4-5)	64.2	63.5	38.8	55.5	54.5	48.3
Year 1 (age 5-6 yrs.)	63.5	63.9	40.6	54.3	55.0	48.9
Year 2 (age 6-7 yrs.)	62.6	63.2	40.5	52.7	53.6	48.9
Year 3 (age 7-8 yrs.)	60.6	62.6	40.1	50.1	53.0	47.7
Year 4 (age 8-9 yrs.)	59.6	61.2	39.5	48.9	51.2	47.2
Year 5 (age 9-10 yrs.)	57.2	60.5	38.7	46.5	50.1	45.1
Year 6 (age 10-11 yrs.)	55.1	58.5	38.5	44.2	47.7	43.6
All year groups (age 4-11 yrs.)	60.3	55.5	39.5	50.3	44.8	47.1

Source: UKHSA published data, up to end of December 2022

Please note that the England figures in red represent national data to November 21; no later data was available for school-aged vaccinations.

With regards to trends in the data when comparing this season to the same time in the previous season, for the England average data it should be noted that:

- For those **aged 65 and over** uptake is the highest on record at over 81%
- For the **at-risk groups**, vaccine uptake is comparable to last season and is either higher or comparable to the previous eight seasons before that

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- For **pregnant women** vaccine uptake is lower than the same period last season, and lower than the previous seven seasons before that
- For **2 and 3-year olds** uptake is over 7 percentage points lower compared to the same period last season

Figure 1 compares Merton Borough with London averages and the rest of its geographical neighbours in the 65 years and over, under 65 'at risk' and pregnant women with the same time-period in 2019/20, 2020/21 and 2021/22.

Merton did not meet the national ambitions in any of the Primary Care cohorts. However, for the under-65 years Merton achieved greater than the London average, but below the SWL average, for >65s Merton was below the London average and SWL average, and for the pregnant women cohort, Merton is on par with the SWL average and has greater uptake above the London average.

Figure 1
Uptake of seasonal flu vaccination for Merton Borough compared to other SWL
Boroughs and London for Winters 2019/20 – 2021/22

Under 65s	2019-20	2020-21	2021-22
SOUTH WEST LONDON HEALTH & CARE PARTNERSHIP (STP)	46.3	43.3
CROYDON	41.6	43.2	40.6
KINGSTON	45.8	52.7	50.4
MERTON	41.2	47.0	41.9
RICHMOND	39.4	47.1	47.5
SUTTON	45.6	51.8	43.4
WANDSWORTH	39.2	42.8	42.1
London	41.8	44.0	40.6

Over 65s	2019-20	2020-21	2021-22
SOUTH WEST LONDON HEALTH & CARE PARTNERSHIP (:	72.9	71.3	
CROYDON	64.9	71.3	70.5
KINGSTON	66.9	74.9	76.1
MERTON	63.3	70.5	66.3
RICHMOND	67.8	75.6	75.1
SUTTON	71.0	78.1	72.4
WANDSWORTH	65.7	68.9	68.2
London	65.7	71.1	68.9

pregnant women	2019-20	2020-21	2021-22
SOUTH WEST LONDON HEALTH & CARE PARTNERSHIP (42.4	39.2	
CROYDON	40.5	34.0	32.6
KINGSTON	45.8	46.5	42.7
MERTON	44.2	44.8	39.3
RICHMOND	42.3	45.1	44.2
SUTTON	42.8	46.1	37.2
WANDSWORTH	45.9	45.5	43.1
LONDON	39.2	37.0	32.9

UKHSA (Dec,2022)

What are we doing to increase uptake of seasonal influenza vaccine this year?

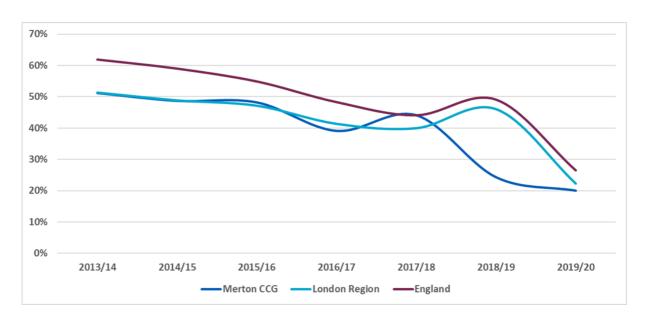
- There is evidence to suggest that practices who are well prepared and have uptake in their first couple of weeks continue to have good uptake throughout the season
- This means that the weekly checks by commissioners have little or no impact on improving flu uptake once the season has started. The focus therefore in learning from previous seasons has been on practices being prepared and

- undertaking advanced planning, particularly around identifying eligible cohorts, and estimating demand and supply, including considering extra staff capacity for opportunistic vaccinations
- CCG flu plans were developed at the start of the 2021/22 season, in line with the regional 'flu vaccination plan; these have been monitored throughout the 'flu season
- System colleagues have been keen to adopt learning from the Covid-19 vaccination programme and to look for opportunities to ensure ease of access and to reach those who might not readily come forward to access healthcare services
- There has been more detailed work undertaken on understanding where this is lower uptake by ethnicity and deprivation with a Health Inequalities group meeting weekly to review the position and discuss best practice and initiatives being taken forward by providers and by ICSs
- There is evidence to suggest that 'flu vaccinations are considered optional or preventative and are not seen as integral to an individual's care pathway or health maintenance. In light of this, we continue to change the narrative around 'flu vaccinations for the eligible cohorts and specifically for 'at risk' groups, including working with clinical networks and acute and primary care providers to embed primary care appointments (for checking co-morbidities and vaccination) into pathways. For example, all acute trusts across London are now commissioned to provide 'flu vaccination in clinics with clinical 'at risk' patients, and to provide vaccination advice. This is in keeping with NICE's recommendation of multicomponent interventions
- NHSE&I has been working with London CCGs to monitor uptake throughout the season, with key ICS Leads coming together at the London Flu Delivery Group on a weekly basis to discuss further initiatives and interventions
- The NHSE&I Communications Team has worked with local and national charities to spread the message, as well as utilising digital media to promote 'flu vaccination, sending tweets and Instagram messages throughout the 'flu season
- NHSE&I reviewed and improved the vaccination offer to London's statutory homeless and rough sleepers, and those within health inclusion groups, utilising pharmacy, general practices that care for the homeless population and commissioning voluntary organisations that provide outreach medical services to deliver vaccinations
- Training of staff is crucial to maintaining good vaccination uptake. PHE London and NHSE/I London continue to work together to ensure that vaccinators are updated on 'flu vaccination and that health care professionals are informed to address any vaccine hesitancy thereby reducing complacency and improving confidence and convenience
- Every year, we evaluate the impact of our annual London 'Flu Vaccination Plan. These evaluations are underway and include a 'flu wash up event. This event will be held on the 4th March 2022 and will focus on how to improve uptake across the eligible cohorts, looking at how we can apply learning from the Covid-19 vaccination programme. Colleagues from CCGs, LA, Trust, pharmacies, and GP Practices are invited to the event.

5 Shingles

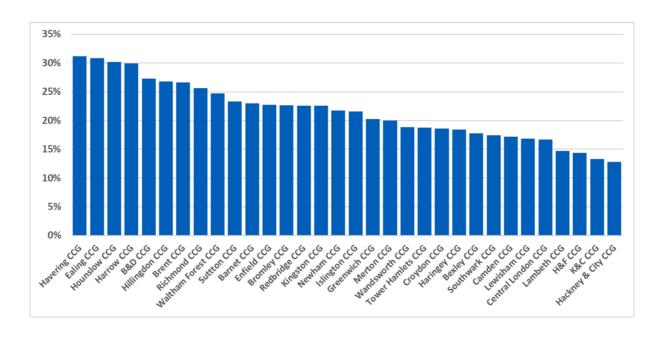
- The Shingles vaccination programme commenced in September 2013. Shingles vaccine is offered to people who turn 70 years with a 'catch up' for 78 years. However, anyone who turned 70 since 2013 remains eligible. Adults remain eligible until their 80th birthday.
- The latest available published data is for 2019/20. Figure 2 illustrates the percentage uptake by CCG in London for years of the programme for the routine age 70 cohort.
- Uptake of the shingles vaccine has been steadily decreasing since the programme was introduced in 2013, both in London and nationally.
- There has been a considerable drop in the uptake amongst 70-year olds in Merton. This places Merton 14th from the bottom of uptake when the London CCGs are ranked in descending order (see Figure 3).
- Uptake of the shingles vaccination programme was adversely affected by COVID-19 pandemic with the programme initially suspended in 2020 and the slow recovery has also been impacted by the live vaccine not being able to be administered alongside the co-administration of 'flu and COVID-19 vaccine. This fall in uptake is seen across the UK.
- NHSE/I provided a training webinar in late 2020 to all practice staff across London to help promote the importance of the vaccine and shared an updated <u>Shingles Toolkit</u> for all practices to use. Impact of these efforts will be evaluated in the next few months.

Figure 2
Shingles Uptake for Merton CCG compared to London and England averages
for 2013/14 to 2019/20



Source: PHE (2020)

Figure 3
Shingles Uptake for London CCGs 2019/20 with CCGs ranked from highest uptake to lowest



Source: PHE (2020)

6 PPV

- Pneumococcal Polysachride Vaccine (PPV) is offered to all those aged 65 and older to protect against 23 strains of pneumococcal bacterium. It is a one-off vaccine which protects for life. This vaccination tends to be given alongside the flu vaccination during the flu season as the patient is usually present at the flu appointment.
- For the past few years, there has been a global shortage of this vaccine and this is reflected in the uptake nationally and regionally. To note PPV is reported as a cumulative figure.
- The latest available published data is for 2019/20. For 2019/20, 63.7% of the London over 65s population and 64.4% of Merton's population had received PPV. This compares to 69% nationally.
- It is worth noting that the over 65s population are largely protected against pneumococcal invasive disease and pneumonia from the PCV-13 programme given as part of the 0 to 5s routine childhood immunisation schedule, because young children are the main source of spread of these infections. PPV23 is an additional vaccine to help protect this population from the remaining 13 strains not covered in the PCV-13 vaccine.

7 Next Steps: What are we doing to improve uptake in Merton?

- In 2021, five ICS Immunisation Boards were set up across London and Merton is covered by the SWL ICS Immunisation Board. This board comprises of ICS accountable officer for immunisation, NHSE/I immunisation commissioners and other partners. The board is working on the strategy and action plans to improve uptake and coverage and reduce health inequities in access across the SWL boroughs.
- In 2021, NHSE/I has implemented a network of immunisation coordinators across London to support GP practices with their delivery of Section 7a immunisation programmes. This includes helping health care professionals with patient invite and reminder systems, coding, accurate data collection and submission and helping them to increase vaccine acceptance amongst their registered populations.
- NHSE/I has commissioned UKHSA to deliver immunisation training remote to all vaccinators in London. Confident and competent staff are crucial to dealing with vaccine hesitancy and preventing vaccine incidents and having access to annual updates for immunisation training.
- NHSE/I immunisation commissioning team (London) have also been working locally with the SWL ICS Flu Delivery Group, the local CCG lead, Public Health team and local providers to focus and identify local barriers, improving access for vulnerable or underserved groups and improving public acceptability. One example of this is our London Flu Delivery Group which meets weekly

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- throughout the flu season. Key agenda items are local communications, data analysis, current vaccination uptake, national updates, school engagement and sharing best practice.
- SW London ICS Flu Delivery group intends to extend its scope to cover immunisations more broadly and to monitor improvement actions / performance data.