



Coventry City Council

## Briefing note

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**To:** Health and Social Care Scrutiny Board      **Date:** 28<sup>th</sup> February 2024

**Subject:** Measles, Mumps and Rubella (MMR) Immunisations in Coventry

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### **Purpose**

1. This report aims to:
  - update the Health and Social Care Scrutiny Committee on the uptake of Measles, Mumps and Rubella (MMR) immunisation among children in Coventry.
  - give an overview of commissioning responsibilities and set out how partners are working together to build good immunisation rates and address areas of concern.

### **Recommendations**

2. Scrutiny Co-ordination Committee are recommended to:
  - 1) Note that the Coventry's MMR childhood immunisation rates for 2022/23 are below the national and regional averages.
  - 2) Note the work that partners are doing together to improve MMR uptake across Coventry and increase protection from the spread of measles and other vaccine preventable diseases.
  - 3) Agree that our ultimate goal in Coventry is to achieve high MMR immunisation uptake, building each success into the wider childhood immunisations programme to develop system resilience and outbreak prevention.

### **Background**

3. The World Health Organisation highlights that 'the two public health interventions that have had the greatest impact on the world's health are clean water and vaccines. Across the UK, the NHS provides free vaccinations against a range of diseases with the aim of preventing illness and death associated with infectious diseases. Immunisation also helps reduce the financial and capacity pressures on NHS treatment services.
4. Measles is a preventable viral infection which is highly contagious and on rare occasions can cause serious complications (e.g. blindness, pneumonia and meningitis) and can be fatal. Young babies, people who are immunosuppressed and pregnant women are at higher risk of complications. The MMR vaccine is the best way of protecting individuals, preventing outbreaks and protecting the most vulnerable individuals in a community.

5. MMR vaccination is routinely offered as part of the childhood vaccination schedule (summarised in Appendix 1). The MMR vaccine is safe, effective and is offered twice in childhood - at 1 year of age and as a pre-school booster at 3 years and 4 months. Two doses of the vaccine provide the best protection.
6. Uptake of the MMR vaccine has declined over the years, including in Coventry, which means more of the population are potentially vulnerable to catching measles. Since 1st October 2023, there has been an increase in measles cases across the country including Birmingham (300 confirmed), Coventry (26 confirmed), Solihull (13 confirmed) and Warwickshire (3 confirmed).

### **Roles and responsibilities**

7. Since the transfer of most public health to local government in April 2013, responsibility for immunisation has been fragmented with both NHS England (NHSE) and Coventry Warwickshire Integrated Care Board (ICB) holding lead roles on NHS immunisations delivery.
8. The NHSE West Midlands Screening and Immunisations team provide system leadership, support and oversight of ICB commissioning and delivery of NHS vaccinations including MMR. The ICB commissions services including managing introduction of new programmes, monitoring providers against national performance indicators, quality improvement and reduction of inequalities. This includes leading on the management of clinical queries and incidents.
9. The main providers of MMR immunisations in Coventry are GP practices (including practice nurses) and the School Age Immunisation Services. Coventry City Council public health team has an assurance function and influencing role in local commissioning, focused on ensuring plans meet local needs and promote immunisation uptake. For Coventry and Warwickshire, assurance is provided through the Health Protection Committee.

### **Childhood MMR coverage in Coventry**

10. The most up to date published MMR uptake results for Coventry are:

MMR status by Age	% uptake			Coventry RAG Rating PHOF herd immunity target of 95%*
	Coventry	West Midlands	England	
1 MMR dose at 2 years	86.8	88.9%	89.3	Red
MMR 1 dose by 5 years	91.4	92.6	92.5	Amber
MMR 2 doses by 5 years	81.7	83.7	84.5	Amber

The table shows that GP delivered childhood immunisation uptake in Coventry is consistently lower than the regional or national levels. There is greatest success at achieving one dose of MMR by the age of 5 years, however the requirement for herd immunity is measured based on achieving two doses of MMR. At GP practice level, Coventry MMR levels have a range of 71.3% (lowest) and 85.9% (highest) for two MMR doses.

The performance Red-Amber-Green (RAG) rating within the table is based on the Public Health Outcomes Framework (PHOF) targets. The PHOF target for all pre-school childhood immunisations is 95% as this is the World Health Organisation (WHO) target for herd immunity. Herd immunity is the level of vaccine uptake at which individual cases or outbreaks of vaccine preventable diseases are unlikely to occur.

### **Working together to improve MMR immunisation rates**

11. Since summer 2023 an additional effort has been made to increase protection from measles and the levels MMR vaccination. This work began before the first cases of measles were seen in Coventry.
12. Work has been undertaken across all partners locally to ensure we work more effectively together to grow the rates of immunisation in all communities, including those less likely to routinely come forward. Some key actions include:

### **Vaccinating Coventry Group**

13. Partners had established a Coventry focussed immunisation planning group, initially to focus on the Covid plan for this winter, but with the agreement repurposed to escalate the attention on measles. The group, chaired by Coventry City Council brings together a wide range of stakeholders including NHSE, ICB, primary care, and the Coventry and Warwickshire Partnership (which provides school aged vaccines). The aims include bringing all relevant parts of the system together to identify the best way of immunisations to the population of Coventry and reduce inequalities in accessibility. For example, in normal times delivery through GP practices works well, however during outbreaks pop-up approaches have been proven to work well (e.g. mobile units/buses, community settings).

### **Coventry and Warwickshire Schools Immunisation Service**

14. Informed by inequalities in school level MMR data the service has re-modelled the offer to school aged children. An enhanced pop-up MMR vaccination programme has been launched to increase take up by children whose parents may have found accessing primary care difficult. The design aims so reduce inequalities in provision and the harm caused by vaccine preventable disease.
15. Since February 2023, the school-based MMR pop-ups in Coventry have been opened to cover pupils, siblings, parents, and school's staff. Evidence shows the potential of this approach, as demonstrated by the impact of December 2023 'pop up' sessions in one of Coventry's most diverse primary schools. The sessions in December 2023, lifted MMR vaccination rates in pupils up from around 40% to 87%, and increased MMR vaccination levels amongst parents and teachers. This example is being referred to as good practice by UK Health Security Agency (UKHSA) and Department for Education. 'Pop-up' approaches are not entirely new as elements of it have been used before, but the recent cases facilitated a co-ordinated agreement across the health economy to deliver the model at scale.

### **Communications to increase public understanding**

16. Informed by the positive achievements during the covid response, local community champions have been engaged to raise knowledge and awareness. Local authority links with voluntary sector organisations have been targeted towards a shared objective of positively influencing those least likely to take up the offer of MMR vaccination and encourage them to come forward. The first phase of activity included creating a new leaflet-poster that incorporates local perspectives on style, content and branding. This resource has been referred to as innovative practice by UKHSA, other local authorities and the NHS.

### **Summary**

17. This paper provides a status report on MMR immunisation in Coventry and an overview of the collaborative working across health partners to continually improve protection against measles.

### **Finance and Human Resources**

18. NHS partners commission and fund MMR immunisation services. Vaccination Programmes aid the human resources and business continuity arrangements of organisations.

### **Legal**

19. Coventry Council's Director of Public Health is mandated to take steps to protect the health of the public and to provide oversight of and scrutiny of the local immunisation system

### **Equality Impact**

20. Immunisation is one of the most important public health interventions that protects the most vulnerable people in our communities. It targets children and young people, people living with long-term health conditions and older adults.

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## Appendix I:

**Table A: Routine Immunisation Schedule for Children and Young People**

Age Due	Vaccine Given	Main Providers
8 weeks	<ol style="list-style-type: none"> <li>1. Diphtheria, tetanus, pertussis, polio and Haemophilus influenza type b (Hib) (DTaP/IPV/Hib) and hepatitis B</li> <li>2. Pneumococcal conjugate vaccine (PCV)</li> <li>3. Meningococcal B (MenB)</li> <li>4. Rotavirus</li> </ol>	GP
12 weeks	<ol style="list-style-type: none"> <li>1. Diphtheria, tetanus, pertussis, polio and Haemophilus influenza type b (Hib) (DTaP/IPV/Hib) and hepatitis B</li> <li>2. Rotavirus</li> </ol>	GP
16 weeks	<ol style="list-style-type: none"> <li>1. Diphtheria, tetanus, pertussis, polio and Hib (DTaP/IPV/Hib) and hepatitis B</li> <li>2. Meningococcal B (MenB)</li> <li>3. Pneumococcal conjugate vaccine (PCV)</li> </ol>	GP
1 year	<ol style="list-style-type: none"> <li>1. Hib/MenC booster</li> <li>2. Pneumococcal conjugate vaccine (PCV) booster</li> <li>3. <b>Measles, mumps and rubella (MMR)</b></li> <li>4. Meningococcal B (MenB) booster</li> </ol>	GP
2-3 years	Live attenuated influenza vaccine (LAIV)	GP
School aged children (reception to year 11)	Live attenuated influenza vaccine (LAIV)	School Age Immunisation Service (SAIS)
3 years 4 months	<ol style="list-style-type: none"> <li>1. Diphtheria, tetanus, pertussis and polio (DTaP/IPV or dTaP/IPV)</li> <li>2. <b>Measles, mumps and rubella (MMR)</b></li> </ol>	GP
12 to 13 years	Human papillomavirus (HPV)	SAIS
14 years	<ol style="list-style-type: none"> <li>1. Tetanus, diphtheria and polio (Td/IPV)</li> <li>2. Meningococcal ACWY conjugate (MenACWY)</li> </ol>	SAIS

**Table B: Selective Immunisation Programme for Children and Pregnant Women**

<b><i>Target Group</i></b>	<b><i>Age and schedule</i></b>	<b><i>Disease</i></b>
Infants born to hepatitis B infected mothers	At birth, 4 weeks and 12 months old	Hepatitis B
Infants in areas of UK with TB incidence $\geq 40/100,000$	At birth	Tuberculosis (BCG vaccine)
Infants with a parent or grandparent born in a high incidence country	At birth	Tuberculosis (BCG vaccine)
Children aged 6 months to 17 years with long-term health conditions	During flu season	Influenza
Children aged 6 months and over who are immunosuppressed	Spring 2024 booster	Covid-19
Pregnant women	During flu season	Influenza
Pregnant women	From 16 weeks gestation	Pertussis