

SLOUGH BOROUGH COUNCIL

REPORT TO: Health Scrutiny Panel

DATE: 17 January 2019

REPORT AUTHORS: Jo Jefferies, Consultant in Public Health, Public Health Services for Berkshire
Nisha Jayatilleke, Screening and Immunisation Lead, NHS England South
Paula Jackson, Screening and Immunisation Lead, NHS England South

CONTACT OFFICER: Dr Liz Brutus - Service Lead Public Health (SBC)
(For all Enquiries) (01753) 875142

WARD(S): All

PART I **FOR COMMENT & CONSIDERATION**

FIRST ANNUAL REPORT ON IMMUNISATIONS & SCREENING IN SLOUGH

1. Purpose of Report

- To provide a summary of the current commissioning and provider arrangements for immunisations and screening programmes and the organisations involved
- Provide an update on immunisation and screening programme coverage in Slough
- Highlight recent successes and key opportunities to maximise programme coverage and uptake with a view to reducing health inequalities in this area.

2. Recommendations

The Panel is recommended to:

1. Consider the actions being taken to deliver the national programmes for immunisation and screening and their progress in tackling health inequalities in Slough.
2. Review the proposed Local Action Plan in 3 – 6 months to ensure it has actions tailored to the needs of Slough and relevant partners are addressing the relatively lower uptake and health inequalities in both immunisation and screening.
3. Request an Annual Report on Immunisation and Screening from NHS England every year.

3. The Slough Joint Wellbeing Strategy, the JSNA and the Five Year Plan

3a. Slough Joint Wellbeing Strategy Priorities

The current programme is aimed at supporting local residents to improve their health and wellbeing through improved prevention and early detection as provided through

the national immunisation and screening programmes. In particular, this work supports the Joint Wellbeing Strategy priorities:

- Protecting vulnerable children
- Increasing life expectancy by focusing on inequalities

Data from the immunisation and screening activities contribute to further developing the base of the Joint Strategic Needs Assessment and understanding the needs and health inequalities of our population..

3b. **Five Year Plan Outcomes**

The primary outcomes where delivery will be enhanced by the paper are:

- Outcome 1: Slough children will grow up to be happy, healthy and successful
- Outcome 2: Our people will be healthier and manage their own care needs

4. **Other Implications**

(a) Financial

There are no financial implications directly resulting from the recommendations of this report and outlined activities are within the current budget and resources.

(b) Risk Management - None

There are no identified risks associated with the proposed actions.

(c) Human Rights Act and Other Legal Implications

There are no Human Rights Act implications to the content of this report

(d) Equalities Impact Assessment

The content of this report does not require an Equalities Impact Assessment.

5. **Supporting Information**

Context

- 5.1 NHS England is responsible for commissioning screening and immunisation programmes in England. Locally this is co-ordinated and managed across Thames Valley by the Public Health Commissioning team at NHS England, South East under an agreement known as Section 7a.
- 5.2 Historically, Slough has had some of the lowest uptake of screening and immunisation programmes in the South East of England, contributing to poor health in both adults and children and our health inequalities. Over the last 5 years, there have also been various changes in the organisation of the commissioning and delivery nationally. This combined annual report, for the first time, therefore outlines the picture of immunisations and screening in Slough, their current provision, the challenges and opportunities and future plans.

- 5.3 Panel Members may find it helpful to consider ‘The Ten Questions to Consider If You’re Scrutinising Local Immunisation Services’¹ which have relevance for both Immunisation and Screening. In view of Slough’s focus on health inequalities, Question 10 is particularly relevant. (See Appendix.)

Executive summary of Immunisations and Screening Report

- 5.4 The full report is in the Appendix but summarised below.
- 5.5 NHS England has continued to commission the services set out under the Section 7A agreement to a high standard, offering continued protection to the public. Data and evidence demonstrates that public health protection remains world class and we have achieved real success. Increasing access to screening and immunisation programmes, contributes to the wider prevention agenda and the implementation of the Five Year Forward View.
- 5.6 Some of the recent successes that have benefitted the local population include programmes to increase uptake and improvements to data quality for closer monitoring of progress. Examples include the development of a GP toolkit with tips and advice for primary care colleagues to improve immunisation uptake for their patients. The toolkit is implemented in many practices across Slough. In addition, data on immunisations delivered in primary care are now auto-extracted from the clinical record and entered electronically on the Child Health Information System (CHIS) which is not only more efficient but has also improved the accuracy of the data. The LA, the school immunisation provider and NHS England have worked together to agree how they will address cultural and language barriers to further improve uptake in groups with lower historic vaccination rates.
- 5.7 As part of the Thames Valley Cancer Alliance GP Quality Improvement Scheme, there are initiatives in place to improve cancer screening coverage as well as the safe mobilisation of the Diabetic Eye Screening programme following a contract review.
- 5.8 Successful collaborative working has enabled improvements in some outcomes, however there is still opportunity to improve uptake of cancer screening programmes and childrens immunisations, particularly PCV (pneumococcal) booster, second dose MMR, and the Hib/MenC booster. It is important to have a thorough understanding of opportunities and challenges that need to be considered in Slough to be able to support families take up the offer for vaccination and to work collaboratively with stakeholders to improve vaccine uptake.
- 5.9 There are several new opportunities ahead to implement and embed changes that will further improve screening and immunisation services locally. These include the introduction of a new screening test in the bowel screening programme, incorporating HPV primary screening into the cervical screening programme and a new booster seasonal flu immunisation for people aged 65 and over.

¹ The Ten Questions to Consider If You’re Scrutinising Local Immunisation Services. Centre for Public Scrutiny. 2016. Available at: <https://www.cfps.org.uk/10-questions-ask-youre-scrutinising-local-immunisation-services/>

- 5.10 Governance and reporting arrangements are also being tightened. The Shared Public Health Team is scoping an annual Health Protection Report, drawing together key metrics and issues. The Terms of Reference of the Berkshire Health Protection Committee is also under review to ensure the committee fulfils its system assurance role, with partners providing assurance to the Strategic DPH and holding each other to account. In addition, NHS England is revising the quarterly Berkshire screening and immunisation dashboard to improve clarity and enable access for Public Health Consultants in each Local Authority.
- 5.11 The Report focuses on the commissioning and delivery of the screening and immunisation programmes but we also need to consider the wider determinants of health (including for example, income levels, education and skills, employment, housing and environmental factors). These affect both overall health and wellbeing and decision-making about health.

6. **Comments of Other Committees**

- 6.1 None

7. **Conclusion**

- 7.1 The national Screening and Immunisation programmes provide important opportunities for protecting health and wellbeing and preventing avoidable disease with cost-effective and evidence-based interventions. However, their uptake also acts as marker of health inequality in certain groups which we must be vigilant to.
- 7.2 Historically, Slough has had lower than average uptake of both screening and immunisations, reflecting a variety of issues including accessibility, acceptability and availability of interventions delivered by the system as well as individuals' beliefs and understanding of the programmes. Poor uptake of these programmes (and other health improvement activities) is also more likely in individuals and key groups in Slough who already experience the worst health outcomes with associated worsening impact on health inequalities. Social and environmental factors – the wider determinants of health – also affect our population's health and shape their individual health and wellbeing decisions on matters such as taking up invitations for screening and immunisation.
- 7.3 Through concerted local partnership working, there has been some encouraging progress in recent years however considerable challenges remain across the various immunisation and screening programmes in Slough. These challenges will benefit from the proposed national and local plans being developed and/or currently delivered. The programmes will also benefit from ongoing monitoring of their impact on Slough's health.

8. **Appendices**

1. Immunisation and Screening Programmes - an update for Slough. Dec 2018.
2. The Ten Questions to Consider If You're Scrutinising Local Immunisation Services. Centre for Public Scrutiny. 2016