Oxfordshire Health and Wellbeing Board Detailed performance report – April 2015

1. Details

Strategic Priority: Preventing infectious disease through immunisation

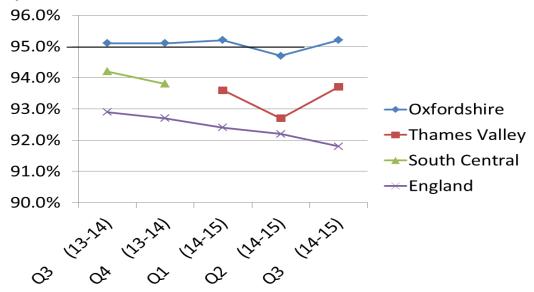
Strategic Lead: Sally Bradshaw (Consultant in Public Health) Last updated:

PROGRESS MEASURE: At least 95% children receive dose 1 of MMR (measles, mumps and rubella) vaccination by age 2

Current indicator RAG Rating

Green

2. Trend Data Uptake of MMR dose 1 Oxfordshire CCG October 2013 to March 2015



3. What is the story behind this trend? - Analysis of Performance

- The MMR vaccine, given as part of the routine childhood vaccination schedule protects
 against measles, mumps and rubella. Two doses of MMR vaccine are required to provide
 satisfactory protection. The first dose should be given between 12 to 13 months of age
 with a second dose at 3 years 4 months of age (or soon after)
- Call and recall for MMR vaccination is by letter to the child's home address from the Child Health Information Service (CHIS)
- Parents/Carers are invited to contact their GP surgery to arrange vaccination
- A maximum of 3 reminders are sent by CHIS to the child's home address in the event of vaccination not being given and where there is no documented evidence of refusal
- Data on MMR vaccination uptake is collected by CHIS, shared with the local NHS England Area Team and reported quarterly as part of the national COVER data collection
- Uptake of MMR dose 1 in Oxfordshire is consistently higher than regional and national averages and prior to Quarter 2 (2014-15) exceeded the national target of 95%
- During Quarter 2 (2014-15) uptake of MMR dose 1 fell below the national target of 95%
- During Quarter 3 (2014-15) uptake of MMR dose 1 exceeded the national target of 95%

4. What is being done? - Current initiatives and actions

Actions

GP practices with data anomalies are identified by the CHIS team

□ Identifying variations in uptake

Vaccination uptake is monitored at practice level and is scrutinised quarterly by NHS England Screening and Immunisation team to identify practices with low uptake rates

p Providing support to practices

GP practices with low uptake rates are contacted by a member of the NHS England Screening and Immunisation team and offered support

Commentary

- GP practices with data anomalies have been contacted to ascertain the accuracy of the data
- GP practices with low uptake have been identified
- Screening and Immunisation
 Coordinators offer practice visits and
 resources to raise awareness of
 vaccination with patients and staff

5. What needs to be done now? - New initiatives and actions

Action

□ Continue to check provisional data for anomalies and follow up with GP practice to improve data accuracy

By Whom & By When

CHIS - ongoing

■ Continue to monitor practice level data and scrutinise quarterly to identify practices with low uptake rates and offer appropriate support

Screening and Immunisation team ongoing

Explore the feasibility of funding to the community trust to develop a clinical post offering childhood immunisation (0-5 years) promotion and, if necessary, community based immunisation across Oxfordshire. The focus of this project/post will be on health inequalities including hard-to-reach groups / geographies / populations in order to achieve 95% uptake of the 0-5 year childhood immunisation programme.

NHS England (South Central) - TBC