

HWBB Report: Measles and MMR vaccination in Croydon, June 2019

APPENDIX B: Croydon Measles and Rubella Elimination action plan

Target 1: Achieve and sustain 95% vaccination coverage in the routine childhood immunisation programme

Recommendation number	Recommendation	Responsibility	Person to provide update	Outcome
1	Relevant up-to-date comms plan formulated: materials to be put in places families visit, such as GPs, early years settings, libraries	Public health coordinating comms leads: NHSE, CCG, PHE, public health (with support from behavioural change hub)	Ellen Schwartz/ Bernadette Alves	Improve public awareness . Consistency in messaging across comms teams.
2	Look to high performing boroughs to see how they achieve high uptake	NHSE- Bernadette Johnson with support from Helen Goodrum	Bernadette Johnson	Recreate specific actions that have worked elsewhere
3	Take a targeted approach to low uptake areas	CCG commissioners and NHSE	Helen Goodrum	Increase in uptake in 'hard to reach' populations

4	Education of healthcare workers and parents	Public health coordinating comms leads: NHSE, CCG, PHE, public health (with support from behavioural change hub)	Ellen Schwartz/ Bernadette Alves	Increased education and empowerment of healthcare workers and parents
5	Create and disseminate education videos	Public health coordinating comms leads: NHSE, CCG, PHE, public health (with support from behavioural change hub)	Ellen Schwartz/ Bernadette Alves	Increased education and awareness
6	Increase accessibility of vaccination appointments within GPs	CCG commissioners and GP lead	Helen Goodrum	Increased uptake through more accessible appointments

7	Make every contact count	Public health coordinating comms leads: NHSE, CCG, PHE, public health (with support from behavioural change hub)	Ellen Schwartz/ Bernadette Alves	Empower frontline workers to check and offer MMR
8	Compelling counter-narrative for the anti-vaccination movement	Public health coordinating comms leads: NHSE, CCG, PHE, public health (with support from behavioural change hub)	Ellen Schwartz/ Bernadette Alves	Decrease the proportion of public who believe MMR and vaccination myths
9	Ensure all GPs are maintaining accurate, up to date patient lists with a view to removing "ghost" patients. Work collectively with CCG colleagues (Quality and contracting) to ensure regular review of lists and review contractual obligations with regards to data submission and removing de-registered patients from lists.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	To ensure accurate reporting of uptake data to CHIS

10	Communicate public health concern and decreasing MMR coverage and uptake rates across London with all Directors of Quality, Director of Primary Care Commissioning and Directors of Public Health. Encourage collective working to ensure improvements in service delivery and attain 95% in MMR1 and MMR2 by 5 years.	PHE	Bernadette Johnson	Highlight key stakeholders to the increasing public health concern and impact decreasing rates have on population. Work collaboratively to drive improvements across the health system
11	Ensure all GP practices in each CCG area use robust call/recall systems in place to identify those eligible and invite/schedule appointments proactively.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Assurance that all GP practices are adhering to commissioning and contracting requirements for all childhood immunisations, including MMR
12	Identify GP practices that have not provided assurance that they have robust call/recall systems are in place and work collectively with CCG (quality and contracting colleagues) to establish.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure GPs are adhering to commissioning and contracting requirements for all childhood immunisations, including MMR
13	Ensure GP practices are using national READ code for MMR vaccination	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure accurate recording of vaccine uptake
14	Ensure all GP data sharing agreements are completed and that GP practices are sharing information with CHIS	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	To ensure accurate reporting of uptake data to CHIS

15	Ensure all GPs have a designated immunisation lead in the practice and for the lead to proactively identify all those with uncertain or incomplete MMR status. This should include a look back of those aged <5 years who have missed MMR vaccination.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure 100% offer of MMR1 and MMR2 immunisation as part of routine and catch up for those who have uncertain or incomplete MMR status
16	Designated immunisation Leads to ensure Measles Posters, Leaflets and information are accessible in the practice.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Promote MMR Immunisation and importance
17	Ensure importance of immunisation is routinely discussed with HV and information sharing with GP practice and included in commissioning of HV services	STP Commissioning Managers and LA DPH through HV commissioning	Bernadette Johnson	Ensure key messages are routinely discussed with new parents with information sharing undertaken.
18	Ensure MMR immunisation status is checked routinely as part of the school nurse health check at reception/year 1 (aged 4 to 5 years) and offer/refer	STP Commissioning Managers and LA-DPHs through SN commissioning	Bernadette Johnson	Establish routine checking of MMR status as part of school nurse role and inclusion of recommendation from MMR service specification
19	Work with LA DPH to ensure that information on the importance of immunisations are included in school packs/letters for parents	STP Commissioning Managers and LA, RCO (DFE), Matthew Olley, Amanda Goulden	Bernadette Johnson	Empower parents and Head teachers to recognize the importance of immunisations and maintain lists of children immunized (see Health Protection in schools and other childcare settings (Chapter 5)

20	Work with Regional School Commissioners (DFE) to ensure immunisations are checked routinely prior to starting school with regular checking throughout term time.	Debbie Green, Amanda Goulden and Matthew Olley	Bernadette Johnson	Ensure routine checking is included in RSC audit- Health Protection in schools and other childcare settings (Chapter 5)
21	Work in partnership with CCG colleagues to review variance in GP practice uptake and to promote 95% uptake rates.	STP Commissioning Managers and LA DPH	Bernadette Johnson	Improve awareness and uptake rates of MMR immunisation

Target 2: Achieve and sustain 95% coverage with two doses of MMR vaccine in older age cohorts through opportunistic and targeted catch up (>5 years old) <18 years old

Recommendation Number	Age group	Recommendation	Responsibility	Person to provide update	Outcome
1	<18	Immunisation team to visit all special needs schools including PRUs	Immunisation team	Veronique Black	Uptake increased in special needs schools
2	<18	Allow young people to give their own consent- linked with the new curriculum	Immunisation team	Veronique Black	Empower young people to choose and actively seek to be vaccinated
3	<18	The new curriculum includes health education as statutory requirements- make sure this covers vaccines	Immunisation team and Zoe Barkham healthy schools programme (joint)	Veronique Black	Check curriculum and ensure schools implement effectively
4	<18	Use Palace for Life as another opportunity to provide evidence-based information	Comms plan	Ellen Schwartz/ Bernadette Alves	Increase opportunity to educate parents and carers on the importance of vaccination, increase those checking child immunisation status.

5	<18	MMR offer with HPV and school boosters	Immunisations team	Veronique Black	Increased uptake of MMR in school students
6	<18 and >18	Make every contact count	Public health coordinating comms leads: NHSE, CCG, PHE, public health (with support from behavioural change hub)	Ellen Schwartz/ Bernadette Alves	Empower frontline workers to check and offer MMR
7	<18 and >18	Investigate if the se gelatine-free alternative vaccine is in place in all GP practices as wel as schools	NHS England and CCG Commissioners	Bernadette Johnson	Increased acceptability of vaccine
8	<18 and >18	Identification of 'hard to reach' groups understanding their barriers and needs	Public health lead- with behavioural insights team (local and national)	Ellen Schwartz/ Bernadette Alves	Have knowledge of barriers to allow effective intervention
9	<18 and >18	Identify why some GPs have lower rates	Public health lead- with behavioural insights team (local and national)	Ellen Schwartz/ Bernadette Alves	Insight into practice variation
10	<18	Clinics for home-schooled children	Immunisations team, Director of Education	Veronique Black	Increases uptake of MMR in home-schooled children
11	<18	Investigate if the GP contract allows for catch up immunisations to secondary school- need to check	Bernadette Johnson	Bernadette Johnson	Increase availability of catch up opportunities for unimmunised secondary school children

12	<18	One clinic of school nursing per week- targeting New Addington	Immunisations Team, with support from Practice Variation, Public Health and Behaviour Hub	Veronique Black	Increase uptake in New Addington as an identified target area
13	<18 years old	Ensure all GPs have a designated immunisation lead in the GP practice and for the lead to proactively identify all those with uncertain or incomplete MMR status. This should include a routine catch up of those aged 5 years and older who have missed MMR vaccination.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure 100% offer of MMR1 and MMR2 immunisation as part of routine and catch up for those who have uncertain or incomplete MMR status
14	<18 years old	Ensure all GPs check the immunisation status of all new GP registrants and offer MMR vaccine to complete the course.	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure 100% offer of missed immunisations including MMR improving uptake and coverage.
15	<18 years old	Ensure all School Aged Immunisation providers routinely check the MMR status of all adolescents (School Year 8, 9 and 10). Providers to administer MMR vaccines to complete immunisation course.	STP Commissioning Managers	Bernadette Johnson	Establish routine checking and administration of MMR in adolescents with incomplete or uncertain MMR status
16	<18 years old	Ensure SAV providers routinely report administration of MMR	STP Commissioning Managers	Bernadette Johnson	Ensure accurate and robust data reporting

		directly to the GP, CHIS on a weekly basis.			
17	<18 years old	Ensure SAV providers routinely report immunisation uptake figures to NHS England commissioners.	STP Commissioning Managers	Bernadette Johnson	Ensure accurate and robust data reporting
18	<18 years old	Work with Local Authority PH leads and SAV providers to establish local peer champions to empower and identify importance of immunisations in school settings.	STP Commissioning Managers, LA DPH and SAV providers	Bernadette Johnson	Ensure adolescents are empowered on importance of immunisation and preparation for school leaver/ university
19	>18 years old	Ensure all GPs have a designated immunisation lead in the practice and for the lead to proactively identify all those with uncertain or incomplete immunisation status. This should include a routine catch up of those aged 18 years and older who have missed MMR vaccination, those of childbearing age and new registrants	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure 100% offer of MMR1 and MMR2 immunisation as part of routine and catch up for those who have uncertain or incomplete MMR status
20	>18 years old	Ensure University Health Centre have a designated immunisation lead in the practice and promote immunisations including MMR and MenACWY and their importance during fresher's week	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Ensure opportunistic offer of all immunisations to Improve uptake of vaccine
21	>18 years old	Work with University Health and Well Being Lead and Health Centre to establish "fresher" peer champions	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Promote importance of MMR and ACWY immunisation

22	>18 years old	Work with London Universities Health and Well Being Lead to ensure Immunisation information are included in "offer packs"	STP Commissioning Managers and CCG Quality and Contracting Leads	Bernadette Johnson	Promote importance of MMR and ACWY immunisation
23	>18 years old	Signposting to MMR vaccination during pop-up clinics at universities in fresher's week as part of Men ACWY campaign	Karen Bernard / Catherine Heffernan	Bernadette Johnson	Increased uptake of MMR in university students

Target 3: Strengthen measles and rubella surveillance

Recommendation Number	Recommendation	Responsibility	Person to provide update	Outcome
1	Find out immunisations rates by early years setting	Education team	Zoe Barkham	Identify target areas
2	Promote the process of what happens in a suspected measles or rubella case to all healthcare workers- to encourage lab testing and cofirmation	PHE	Bernadette Johnson	Educate health care workers

4	Share MMR vaccination coverage by CCG and at practice level from ImmForm + COVER	STP Commissioning Managers	Bernadette Johnson	COVER and ImmForm reports
5	Discuss CCGs and practices with uptake rates lower than 95% in London and share monthly updates	STP Commissioning Managers	Bernadette Johnson	Share information with CCG quality and Contracting Leads
6	Provide read codes used for MMR vaccination in new registrants and those with incomplete vaccination from abroad are being routinely used across London	STP Commissioning Managers	Bernadette Johnson	Share information with CCG and GPs
7	Establish MMR section on London web-page with essential information and resource links	Jack Copas	Bernadette Johnson	MMR webpage NHS England web-page
8	Circulate information on ordering process for national resources/ campaign materials	STP Commissioning Managers	Bernadette Johnson	Detailed within Letter
9	Include routine MMR review as standing item agenda at Performance and Quality Boards	STP Commissioning Managers, CCGs, DPH and Providers	Bernadette Johnson	Share information across the health system
10	Communicate regular updates at NHS England/ Public Health England Assurance Boards and Director of Public Health reports	Debbie Green, Amanda Goulden, Catherine Heffernan	Bernadette Johnson	Provide assurance on progress and uptake of MMR

Target 4: Ensure easy access to high-quality, evidence-based information

Recommendation Number	Recommendation	Responsibility	Person to provide update	Outcome
1	Include information on risk to immediate family	Immunisations team and CCG Commissioners	Veronique Black	Risks made clear to the public by front line staff
2	Ensure MMR part of looked after children and foster parents agreement	Education Department- Shelley Davies	Zoe Barkham	Agreements checked and required changes made
3	Investigate use of real-time practice data to improve analysis and information sharing- e.g. through Solis	CCG- practice variation team	Helen Goodrum	Regular information sharing- through immunisations group
4	Regularly review data	Public health	Ellen Schwartz/Bernadette Alves	Regular information sharing- through immunisations group
5	Front-line workers equipped with key evidence-based information e.g. PHE webinars	PHE	Bernadette Johnson/Claudette Allerdyce	Healthcare staff equipped with evidence-based knowledge
6	Information packs for school starters and parents	Immunisations team and Education Team	Veronique Black	Education of parents and carers
7	Use of questionnaires for school starters	Immunisations team and Education Team	Veronique Black	Increase awareness of vaccination status

8	Use assemblies to give evidence-based information	Immunisations team and Education Team	Veronique Black	Improve pupil awareness of importance of vaccination
9	Have immunisations as a standing agenda item at head teachers meetings	Zoe Barkham	Zoe Barkham	Increase awareness in teachers
10	Use nurse immunisations update on 3rd September to promote this as a priority.	Catherine Wallace	Catherine Wallace	Improve nurse awareness of effective methods to increase uptake
11	Circulate letter outlining public health concern and partnership approach to improving MMR uptake rates in London	Matthew Bazeley/ Yvonne Doyle	Bernadette Johnson	Partnership letter
12	Work with CCG colleagues to ensure targeted communications with practices with low MMR uptake rates	STP Commissioning Managers	Bernadette Johnson	Targeted comms to promote uptake locally
13	Ensure regular MMR updates in London GP Bulletin outlining importance with essential information payment claims, read codes etc.	NHS England communications	Bernadette Johnson	GP Bulletin
14	Work with NHS England communications team to promote MMR vaccine on social media	NHS England communications	Bernadette Johnson	Regional communications to promote uptake

15	LAs to work with local communications teams to promote MMR vaccine uptake locally	Public health coordinating comms leads: NHSE comms lead (name?), CCG comms, PHE comms, local comms (with behavioural change team)	Ellen Schwartz/ Bernadette Johnson	Local communications to promote uptake
16	NHS England and DPH to send joint letter to University Health and Well-being Lead on an annual basis establishing recommended actions for improved uptake rates of MMR and Men ACWY vaccine	Joint Letter from NHS England/ LA DPH	Bernadette Johnson	Letter
17	DPH letters to schools to promote checking of immunisation status and information to parents	DPHs	Ellen Schwartz/ Bernadette Johnson	Letter and Information to be included in parent packs