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HEALTH AND WELLBEING BOARD

Thursday, 6 October 2022 at 6.30 pm Virtual / Teams

Contact: Jane Creer Board Secretary Direct: 020-8132-1211

Tel: 020-8379-1000

Ext: 1211

E-mail: <u>jane.creer@enfield.gov.uk</u>
Council website: <u>www.enfield.gov.uk</u>

PLEASE NOTE: VIRTUAL MEETING Join on your computer or mobile app

Click here to join the meeting

MEMBERSHIP

Leader of the Council – Councillor Nesil Caliskan (Chair)
Cabinet Member for Health & Social Care – Councillor Alev Cazimoglu
Cabinet Member for Children's Services – Councillor Abdul Abdullahi
Councillor Andy Milne – Conservative Member representative
Governing Body (Enfield) NCL CCG – Dr Nitika Silhi (Vice Chair)
NHS North Central London ICB – Deborah McBeal
Healthwatch Representative – Rikki Garcia
NHS England Representative – Dr Helene Brown
Director of Public Health – Dudu Sher-Arami
Director of Adult Social Care – Bindi Nagra
Executive Director People – Tony Theodoulou
CEO of Enfield Voluntary Action – Jo Ikhelef
Voluntary Sector Representatives: Vivien Giladi, Pamela Burke

Non-Voting Members

Royal Free London NHS Foundation Trust – Dr Alan McGlennan North Middlesex University Hospital NHS Trust – Dr Nnenna Osuji Barnet, Enfield and Haringey Mental Health NHS Trust – Andrew Wright Whittington Hospital – Siobhan Harrington Enfield Youth Parliament representative

AGENDA - PART 1 - SUPPLEMENTARY DOCUMENTS

3. LBE INFECTIOUS EPIDEMIOLOGY AND VACCINATION UPDATE (6:40 - 7:00PM) (Pages 1 - 18)

Gayan Perera, Public Health Intelligence Team Manager.

Including updates on Covid-19, Influenza, Polio, MPX Vaccination Programmes.

8. PHARMACEUTICAL NEEDS ASSESSMENT (8:00 - 8:10PM) (Pages 19 - 26)

Gayan Perera, Public Health Intelligence Team Manager.

Short Progress Update.



Immunisations update for Health and Wellbeing Board

ICP Immunisation and Screening Group

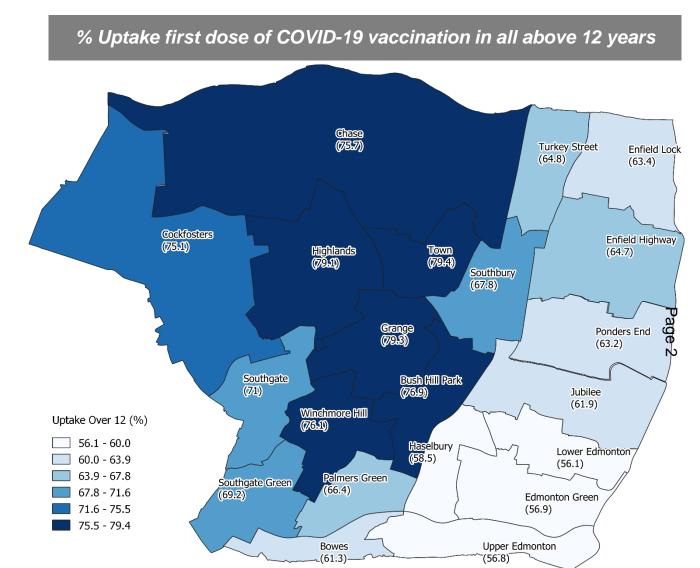
North Central London Integrated Care Board

Covid-19 Opdate

Borough	1st Dose uptake (%)		
Barnet	70.6%		
Enfield	68.1%		
Islington	64.1%		
Haringey	64.0%		
Camden	61.5%		

Borough	2nd Dose uptake (%)
Barnet	68.1%
Enfield	64.3%
Islington	61.6%
Haringey	61.3%
Camden	60.0%

Borough	Booster Dose uptake (%)
Barnet	51.3%
Islington	46.0%
Camden	45.2%
Enfield	45.1%
Haringey	43.1%



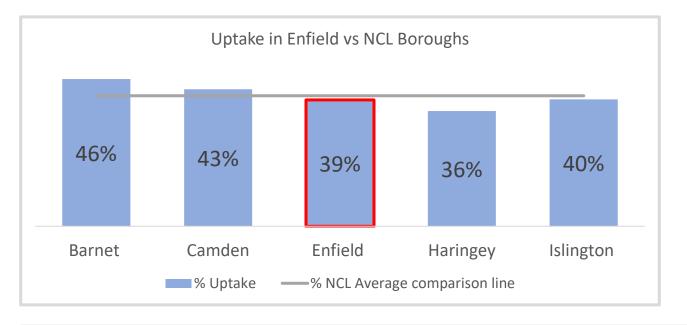
London average: 69.4% - 1st dose, 65.2% 2nd dose, 47.4% booster dose

Highest uptake amongst the **Asian Indian** (88%), **White British/NI** (84%) and **Asian Other** as well as **Asian Bangladeshi** (82%) communities.

Lowest uptake amongst the White Gypsy/Irish Traveller (32%) and Black Unknown (48%) communities.

Flu vaccination Update

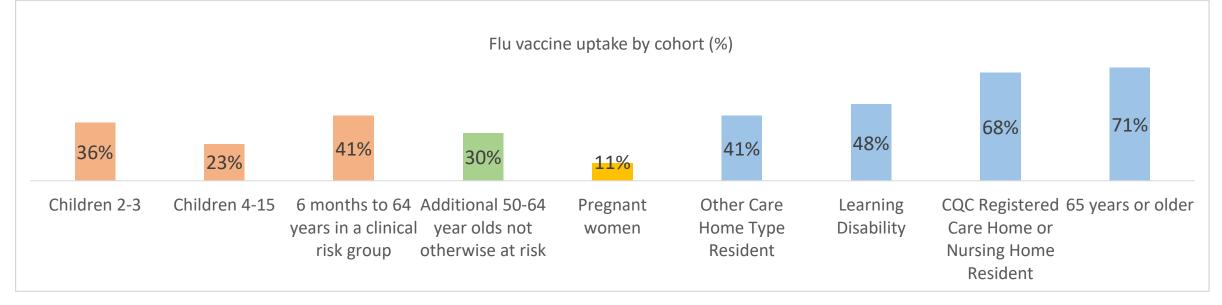
September 2021 – April 2022



Average Flu vaccine uptake across NCL: 40.8%

Highest uptake amongst the **White Irish** (60.3%), and **White British/NI** (59.7%) as well as **Asian Indian** (59.0%) communities.

Lowest uptake amongst the White Gypsy/Irish Traveller (14.2%) and Black Other communities (17.6%).



Childhood Immunisations

Vaccinations by Local Authority, April 2021- March 2022, via COVER Data (UKHSA)

	Percentage of children vaccinated by their 1 st birthday				
	Diptheria, Polio, Pertussis, Hib, HepB (DTaP/IPV/Hib/HepB)	Pneumococcal Disease (PCV)	Rotavirus	MenB	
	Primary Dose (%)	Primary Dose (%)	Primary Dose (%)	Primary Dose (%)	
England	91.8	93.8	89.9	91.5	
London	86.5	88.9	84.3	86.0	
Enfield	81.8	85.8	80.3	81.8	

	Percentage of children vaccinated by their 2 nd birthday					
	Diptheria, Polio, Pertussis, Hib, HepB (DTaP/IPV/Hib/HepB)	MMR	Hib/MenC	Pneumococcal Conjucate Vaccine (PCV)	MenB Ge 4	
	Primary Dose (%)	1st Dose (%)	Booster (%)	Booster (%)	Booster (%)	
England	93.0	89.2	89.0	89.3	87.6	
London	87.2	79.9	79.8	80.9	78.0	
Enfield	84.6	72.9	73.5	73.3	72.0	

	Percentage of children vaccinated by their 5 th birthday					
	Diptheria, Polio, Pertussis, Hib, HepB (DTaP/IPV/Hib/HepB)	Diptheria, Tetanus, Polio, Pertussis	MMR		Hib/MenC	
	Primary Dose (%)	Booster (%)	1st Dose (%)	1st and 2nd Dose (%)	Booster (%)	
England	94.4	84.2	93.4	85.7	91.7	
London	90.0	71.8	87.8	74.2	85.6	
Enfield	88.5	64.9	84.5	66.5	83.2	

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Flu vaccine for adults



 We are expecting high numbers of respiratory patients needing care in hospital this winter.

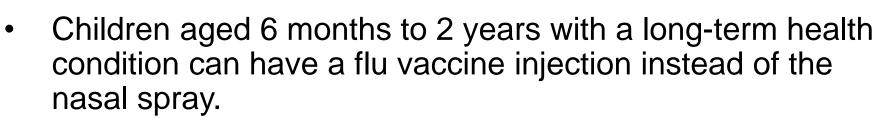
The flu vaccine is available free on the NHS for adults who:

- are 50 and over (including those who will be 50 years old by 31 March 2023)
- have certain health conditions
- are pregnant
- are in long-stay residential care
- receive a carer's allowance, or are the main carer for an older or disabled person who may be at risk if you get sick
- live with someone who is more likely to get a severe infection due to a weakened immune system
- frontline health and social care workers

Nasal spray flu vaccine for children



- The nasal spray flu vaccine is offered to children every year.
- Children aged 2 and 3 years will be given the vaccination at their GP surgery, usually by the practice nurse.
- All primary school-aged children will be offered the flu vaccine at school.
- Secondary school-aged children with a long term health condition that makes them at higher risk from flu will be offered the flu vaccine either at school or at their GP surgery.



 Nasal spray - if objected to on grounds of porcine content then alternative injectable vaccine can be offered.



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Who can get a COVID-19 Autumn Booster?



Autumn boosters will be offered to everyone who is:

- aged 50 or over
- pregnant
- aged 5 and over and at high risk due to a health condition or weakened immune system
- aged 5 and over and lives with someone who has a weakened immune system
- aged 16 and over and is a carer, either paid or unpaid
- a frontline health and social care worker

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What is the current advice on COVID-19 vaccination in pregnancy?



- Pregnant women are an at-risk group and are strongly recommended to get the COVID-19 autumn booster.
- Data about the impact of COVID-19 in pregnancy has shown that unvaccinated pregnant women are more at risk of severe disease than others their age.
- Catching COVID-19 in late pregnancy increases the mother's risk
 of getting seriously ill, can cause babies to be born prematurely or
 have a low birthweight and can increase the risk of stillbirth.
- It is safe to have the vaccine at any stage of pregnancy.
- COVID-19 vaccines are safe and protect mums and babies.

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How and where to get your vaccines





COVID-19 vaccines

Search "NHS booking service" online or go to nclhealthandcare.org.uk/covid



Flu vaccines

Search "free flu jab" online to find a pharmacy offering the jab on the NHS

Latest NCL ICB Covid and Flu updates can be found here:

https://nclhealthandcare.org.uk/keeping-well/covid-19-the-flu-and-your-health/

The Polio booster programme



- The number of children vaccinated in London is lower than it should be.
- All children aged 1 to 9 years old in London are now being offered a dose of polio vaccine, to help protect them from polio and reduce the risk of the virus continuing to spread.
 - This is the group which the UK Health Security Agency assessed to be at greatest risk.

For some children this may be an extra dose on top of their routine vaccinations. In other children it may bring them up to date with their routine vaccinations.

- Via the booster programme we want to prevent any case of paralysis therefore:
 - GPs are continuing to put on clinics at practice level i.e. clinics after school times and on weekends
 - GPs continuing with a robust call/recall system process –so parents will be contacted and following up those who haven't been vaccinated
 - PCNs supporting practices building up momentum in practices where uptake is slow
 - BEHMHT offering Schools catch up programme during school time, after school and weekends.



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What parents need to do now



Parents should check their child's red book to find out if their child is up-to-date with their polio vaccinations:

- If they are not, or if the parent is unsure, they should call their GP to book an appointment for their child to catch up on their routine vaccine dose
- If they are up to date, they will be offered an extra dose to boost their immunity. Parents can find a walk-in vaccination centre, or wait to be contacted by the NHS.
- The only children who do not need a polio dose now are children who have received their pre-school booster (usually given at 3 years 4 months) in the past 12 months.



Latest NCL ICB Polio updates can be found here:

https://nclhealthandcare.org.uk/keeping-well/baby-and-childhood-vaccinations/polio/

Monkey Pox Overview

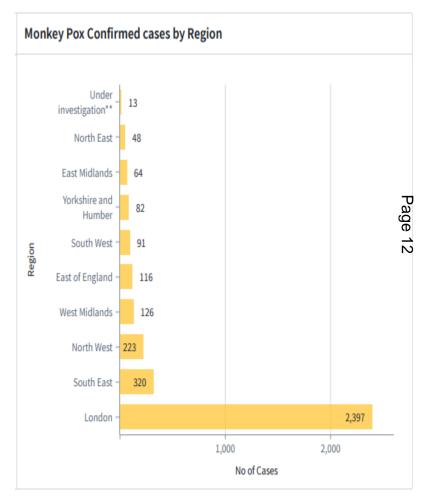


Regional Breakdown of confirmed cases, 4th October 22

UKHSA continues to work the NHS following a number of cases of monkeypox in England. It is a rare virus normally found in central Africa and are working hard to contain the outbreak and this is now a notifiable disease. There are over 2,397 confirmed cases in London which represents over 70% of the cases nationally

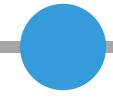
On 21 June, UKHSA and JCVI published new guidance on offering the Imvanex vaccine to men considered to be at higher risk of exposure. An individual's eligibility would depend on a number of factors but would be similar to the criteria used to assess those eligible for HIV pre-exposure prophylaxis (PrEP) – applied regardless of HIV status.

North Central London ICB were required to create a Monkey Pox network across the system to support diagnostics/testing and the delivery of vaccinations.

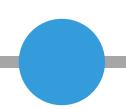


Monkey Pox System Response















Developed
consistent
assessment,
management and
follow up pathways
for Emergency
Department (ED)
presentations of
suspected Monkey
Pox

Developed a
pathway from ED,
NHS 111 and
Primary Care to
Sexual Health
services for the end
to end
diagnostic/testing for
Well patients

Established the
Royal Free to act
as a vaccination
hub for staff and
also to work
directly with
UKHSA on post
exposure
vaccinations for
confirmed contacts

Established a
system wide preemptive vaccination
programme
delivered through
Sexual Health
service providers inline with JCVI
guidance and UKSA
Vaccination Strategy
with a limited
vaccine supply

Over 7,500 first dose vaccinations have been delivered through the Mortimer Market Centre Sexual Health Clinic operated by CNWL Focus now moves to delivery of Second doses of the vaccine alongside first doses and planning is underway

The vaccine supply constraints have been removed and the new Intradermal technique is the preferred delivery method

Communications



- Webinar Briefing on winter 2022/23 vaccinations for North Central London attended by almost 150 people
- Letter sent from all boroughs to parents of children (aged 1- 9 year old) about polio vaccinations
- SMS Messages send from GP surgeries to parents inviting them to contact the practice about the polio vaccine
- Content in Jewish communal media promoting uptake ahead of High Holy Days
- Working with trusted community voices to get the latest information about vaccination to our communities
- Provided information to midwives for pregnant women on vaccination in pregnancy that is accessible in 20 languages
- Provide a single source of truth on vaccines that system partners use to inform their communications
- Year-round work with Caribbean and African Health Network on public health messaging

Local Schemes



Initiative name	Initiative Description	Lead Provid	er/s Planned end date
Young people engagement project	Two health and wellbeing events - one aimed at parents (so they have a better understanding of the issues young people are facing) and one for young people. The event for young people is open for anyone to attend from a network of churches RCCE have links with, the outcome of which they want to create a small number of youth champions who will share messages to their own networks. They want to fund them to create regular content online (Tik Tok, snapchat, Instagram) for three months.	Revival Christian Enfield	Church of November/December
Eastern European Outreach workers	Extension of hours for Romanian, Bulgarian, Turkish and Roma outreach workers - Comms and marketing - street team for health promotion - Community health and Lifestyle conversation events	Edmonton Con Partnersh	
Comms post	Extension of LBE Covid Comms Officer post from Jan 23 - Mar 23	LBE	Mar-23
Additional flu years	School age immunisations (Flu): Confirmation of Additional school years 7, 8 & 9 for the 2022/23 flu season. London Region additional staff planned to support the expanded programme in school and arrange additional dates in the community sites to ensure vaccination can be offered to all identified cohorts. Aim is to use additional HCA/imms nursing bank/fixed term outreach to proactively support the catch up of the flu vaccination programme in both primary (reception) and secondary schools from Oct 2022-March 2023	ВЕН	Jan-23
2/3 years targeted flu Local Enhanced Service	General Practice Incentive Scheme targeting pre-school children	General Pra	ctice March-23
Polio outreach work	Primary Care Networks to boost uptake rates amongst catch up cohorts	Primary Care n	etworks March-23

Local Schemes continued.



Initiative name	Initiative Description	Lead Provider/s	Planned end date
Increase uptake of booster in over 65s	A PCN initiative covering all patients over 65 whom previous campaigns take up using text messaging has been less effective. Current research and discussions with PPGs shows that this cohort respond to an appointment made by phone call via landline, We will contact patients /carers by appointment	Enfield Southwest PCN Woodbery Practice	Dec-22
Evergreen Walk-in Covid and Flu vaccine service and telephone invitation for vaccine hesitant patients	2. To contact by telephone vaccine hesitant residents in the autumn cohort who had not responded to SMS invites and other publicity, or where no mobile telephone number exists or is active. We will use each patient contact to address any questions and concerns to help increase the uptake of the vaccine.	Evergreen Surgery - LVS site	01 September - 30 November
Vaccination Service	Enfield Integrated learning Disability Service to provide support to the COVID and Flu vaccination service to ensure those individual case of clients with complex learning disabilities who have vaccine hesitancy/refusal/anxiety are supported to be offered and administered the vaccine. This will include specific Band 7 nursing support 2 days per week for 6 months to provide vaccine awareness sessions for parents, carers, support workers and service users with a learning disability, vaccine administration care planning, support to develop service user specific reasonable adjustments, additional MDT support (including Speech and Language Therapist, Psychology, Psychiatry) to provide additional service user specific resources and recommendations (easy read information, medication advise to support with anxiety management, needle desensitisation programmes), direct vaccine support and administration, expert advise on Mental Capacity Act and Best Interests decision making, liaison with families, liaison with GP an other Primary Care Professionals and Vaccine administrators. Objective 1 - Support those with a learning disability to access mainstream vaccination services Objective 2 - Support those with additional complex needs to access vaccination programs Objective 3 - Support those with a learning disability to have choice and control in vaccine decision making Objecti ve 4 - Reduce inequality in access to vaccination programs	Enfield Integrated Learning Disability Service	6 months post funding award



Q&A

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Enfield Pharmaceutical Needs Assessment 2021/22

Update

6th October 2022

Striving for excellence





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Why do we need to produce a revised Pharmaceutical Needs Assessment?

- Enfield Health and Wellbeing Board have a statutory duty to publish a Pharmaceutical Needs Assessment (PNA) at least every three years, under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.
- The current PNA was published early in 2018 and was due for revision and publication early 2021. However, due to the impact of COVID-19 it lead to the postponement, with a revised publication date of October 2022. During this period a supplementary statement process remained in place to cover changes in provision.
- The process to produce the revised Pharmaceutical Needs
 Assessment took 12 months to complete.

What have we completed so far?

- Enfield PHI team are collected data for the PNA Needs Assessment.
- Soar Beyond undertook a public survey of all commissioners who are responsible for commissioning services from community pharmacies in Enfield (even if they do not commission services currently).
- Public consultation took place for draft PNA between Monday 13th June at 1 pm to Friday 12th August 2022. (37 responses received)
- We will publish the final PNA report on our JSNA website before 20th October 2022.

Needs analysis

- Enfield has 59 community pharmacies (as of 29 March 2022) for a population of around 333,000, which includes two Distance Selling Pharmacies.
- 54 x 40-hour community pharmacies
- 3 x 100-hour community pharmacies
- 2 x Distance Selling Pharmacies (DSPs)
- Enfield has an average of 17.7 community pharmacies per 100,000 population compared with 20.6 per 100,000 in England.

Health needs for our local population

- Enfield has the highest prevalence for hypertension (13%) out all of the NCL boroughs; it also has a higher value than London for stroke prevalence (1.2%) but it is lower than in England (1.8%)
- Enfield has a **higher prevalence of CHD** (2.3%) than London but it is lower than in England (3%)
- Enfield (8.3%) has the highest prevalence of diabetes out of all the NCL boroughs
- Compared with London (4.17%) and England (3.97%), Enfield has a higher prevalence of dementia (5.34%) in over-65s
- Flu vaccination rates in the 65+ age group (70.9% v England 80.9%) and at-risk group (42.7% v England 53%) are low

- Walking: 93% of the population can walk to a pharmacy within 15 minutes (99.4% within 30 minutes)
- Driving off-peak: 97.1% of the population can drive to a pharmacy within 5 minutes (100% within 10 minutes)
- **Driving at peak:** 93.4% can reach a pharmacy within 5 minutes (100% within 10 minutes)
- **Public transport:** Approximately 99% can reach a community pharmacy within 15 minutes (afternoon is faster than morning).
- Up to 100% of people can reach a pharmacy within 30 minutes.

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Conclusions

- The Steering Group provided conclusions and recommendations on the basis that funding is at least maintained at current levels and or reflects future population changes.
- There is no evidence to suggest there is a gap in service that would equate to the need for additional access to Necessary Services outside normal hours anywhere in Enfield.



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