

MUNICIPAL YEAR 2019/2020 - REPORT NO.

MEETING TITLE AND DATE

Health and Wellbeing Board

Executive Director of People Services

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Agenda - Part:

Item:

Subject: Influenza vaccination update

Wards: All

Cabinet Member consulted:

Cllr Mahtab Uddin

Approved by:

Stuart Lines

1. EXECUTIVE SUMMARY

Influenza (flu) and its complications form a key factor in NHS winter pressures impacting on those who become ill, the NHS services that provide direct care, and on the wider health and social care system that supports people in at-risk groups

Vaccination is the best method for the prevention and control of influenza and vaccination can reduce illness and lessen severity of infection¹.

This report is to provides an update on

- Seasonal influenza vaccination for children, pregnant women, over 65 age groups and the high-risk group
- Seasonal flu uptake by frontline (%) in frontline health and care workers staff

The uptake of flu vaccine by staff needs to be sustained and the lower uptake among the nurses need to be investigated and mitigated.

The uptakes of the influenza vaccine by pregnant women and children in Enfield were among the lowest in London. The public attitude towards the vaccine and awareness of its benefits are crucial in childhood flu vaccination uptake.

The uptakes of flu vaccine among those with medical conditions and older people were also low.

Currently, the local flu vaccine campaigns were run by the LBE with small resources. A coordinated stronger campaign by key organisations is required to improve the uptake of flu vaccines from the very low rates.

¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4362519/>

2. RECOMMENDATIONS

The board is asked

2.1 To note the performance in influenza vaccination in Enfield in comparison to London and England.

2.2 To encourage HWB members to actively work towards improving the influenza vaccine uptake under National immunisation programme, and to support the work to sustain the staff flu vaccine uptake.

3. BACKGROUND

Influenza is an acute viral infection of the respiratory tract characterised by a fever, chills, headache, muscle and joint pain, and fatigue. The risk of serious illness or complications from flu is greater in children under six months of age, older people, pregnant women and those with underlying health conditions and can therefore have a significant impact at population level².

Flu is a key factor in NHS winter pressures impacting on those who become ill, the NHS services that provide direct care, and on the wider health and social care system that supports people in at-risk groups

Vaccination is the best method for the prevention and control of influenza and vaccination can reduce illness and lessen severity of infection³.

In England in 2018/19, influenza vaccine uptake was **slightly lower** than that seen the previous season for 65+ year olds, those aged 6 months to under 65 years of age with 1 or more underlying clinical risk factors, and pregnant women. Influenza vaccine uptake in Health Care Workers (HCWs) **increased** compared to the previous season.

Priority groups for flu vaccination are⁴:

- People aged 65 years of over (including those becoming age 65 years by 31 March 2018)
- People aged from six months to less than 65 years of age with a medical condition
- All pregnant women (including those women who become pregnant during the flu season)
- All children in reception class and school years 1, 2, 3 and 4 (aged 4-5 to 8-9 years old)

² <https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2018/09/phe-sw-flu-review-2017-18.pdf>

³ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4362519/>

- People living in long-stay residential care homes or other long-stay care facilities

4. Report

4.1 Health and Care Front-line staff flu vaccination

Health and social care workers who have regular close contact with patients, residents and clients are likely to have more exposure to infection and can further spread the infection to their family and people they care for. Influenza is very infectious, but immunisation is highly effective in working-age adults.

Immunisation is therefore recommended for staff directly involved in social care, especially for staff in nursing and care homes that look after older people. Staff immunisation can reduce the transmission of influenza to vulnerable residents, some of whom may have impaired immunity and thus reduced protection from any influenza vaccine they have received themselves ⁵.

All the major NHS providers commissioned by Enfield CCG and the council have been making good progress in vaccinating frontline staff.

However, within staff group flu vaccination, the uptake by qualified nurses was much lower than doctors, other qualified clinical staff and support (management and administrative) staff. vary. The staff flu uptake at Royal Free London was lower than London average.

| | All Frontline Healthcare Workers | All Doctors | Qualified Nurses (including GP Practice Nurses) | All other professionally qualified clinical staff | All support staff |
|-----------------------------------|----------------------------------|-------------|---|---|-------------------|
| Barnet Enfield and Haringey (BEH) | 58.8% | 61.9% | 51.2% | 56.4% | 69.6% |
| North Middlesex hospital | 70.4% | 87.3% | 46.5% | 100% | 92.0% |
| Royal Free | 49.4% | 50.3% | 46.3% | 55.6% | 49.1% |
| London region | 49.7% | 53.9% | 50.5% | 49.3% | 47.4% |

Table-1 Seasonal Flu Vaccine Uptake (Frontline Healthcare Workers), 1 September 2018 to 28 February 2019

4.2 Council staff flu vaccine uptake

NHSE has commissioned local pharmacies to offer frontline line care workers flu vaccination_ free of charge. LBE actively promoted staff flu vaccination for all staff and frontline care workers <https://new.enfield.gov.uk/news-and-events/flu-jab-does-the-job/>

⁵ <https://www.england.nhs.uk/south/wp-content/uploads/sites/6/2018/09/care-home-toolkit-18-19.pdf>

Although the data were not available for the uptake of flu vaccination at local pharmacists, we received the data from Wells pharmacy on the flu vaccine uptake by other members of staff, including those who work in schools.

219 members of staff accessed Wells pharmacy for flu vaccination in 2018/19 winter. The number could have been much higher had the stock not been depleted.

4.3 Adults vaccination at GPs: over 65, those with medical conditions and pregnant women

Adult flu vaccination at Enfield GPs were significantly below National averages and Enfield's pregnant women uptake is one of the three lowest in London.

- 64.8% of GP registered patients aged 65 years and over in Enfield received the vaccine in the stated period, compared to 72.0% nationally.
- 40.7% of those in the 6 months to under 65 years at-risk¹ category received the vaccine in the stated period, compared to 48.0% nationally
- 28.9% of pregnant women received the vaccine in the stated period, compared to 45.2% nationally

The three London CCGs with the highest proportions of those aged 65 years and over who received the vaccine were Tower Hamlets (70.8%), Bromley (69.8%) and Sutton (68.8%), whereas the three CCGs with the lowest proportions were Hammersmith & Fulham (56.5%), Kensington & Chelsea (57.8%) and Westminster (58.8%).

The three London CCGs with the highest proportions of those in the 6 months to under 65 years at-risk category who received the vaccine were Tower Hamlets (50.6%), Newham (49.6%) and Harrow (48.8%), whereas the three CCGs with the lowest proportions were Hammersmith & Fulham (32.3%), Bexley (36.9%) and Richmond upon Thames (38.0%).

The three London CCGs with the highest proportions of pregnant women who received the vaccine were Wandsworth (46.8%), Tower Hamlets (45.9%) and Kingston upon Thames (45.1%), whereas the three CCGs with the lowest proportions were **Enfield** (28.9%), Hackney (31.3%) and Hounslow (32.3%).

Table 2a. Percentage of GP Patients Vaccinated Against Influenza^a

| | Aged 65 and over | Clinical at risk ^b | All pregnant women |
|---------|------------------|-------------------------------|--------------------|
| Enfield | 64.8% | 40.7% | 28.9% |
| London | 65.4% | 44.4% | 41.0% |
| England | 72.0% | 48.0% | 45.2% |

^a1 September 2018 to 28 February 2019, ^b Clinically at risk patients, aged 6 months to under 65 years old.

Source: <https://www.gov.uk/government/statistics/seasonal-flu-vaccine-uptake-in-gp-patients-winter-2018-to-2019>

4.4 Children flu vaccination

4.4.1 Children flu vaccination in GP practices

Children flu vaccination was given in primary care (for 2-3-year-olds) and in schools (reception to Year-5). Children flu vaccination in primary care in Enfield is one of the three lowest in London.

21.6% of 2-year olds and 24.4% of 3-year olds received the vaccine in the stated period, compared to 43.8% and 45.9% respectively across England as a whole. The three London CCGs with the highest proportions of 2-year olds who received the vaccine were Kingston upon Thames (43.4%), Bromley (43.3%) and Wandsworth (40.3%), whereas the three CCGs with the lowest proportions were **Enfield** (21.6%), Hackney (22.3%), and Westminster (24.6%)

The three London CCGs with the highest proportions of 3-year olds who received the vaccine were Bromley (46.8%), Kingston upon Thames (44.4%) and Richmond upon Thames and Wandsworth (both 39.7%), whereas the three CCGs with the lowest proportions were Hackney (23.6%), **Enfield** (24.4%) and Westminster (24.7%)

Table 2b. Percentage of Children (GP patients) Vaccinated Against Influenza^a

| | Aged 2 years | Aged 3 years | All 2 and 3 year olds |
|---------|--------------|--------------|-----------------------|
| Enfield | 21.6% | 24.4% | 23.0% |
| London | 31.8% | 33.0% | 32.4% |
| England | 43.8% | 45.9% | 44.9% |

^a1 September 2018 to 28 February 2019

Source: <https://www.gov.uk/government/statistics/seasonal-flu-vaccine-uptake-in-gp-patients-winter-2018-to-2019>

4.4.2 Children flu vaccination in schools

Similarly, children flu vaccination in schools were also lower than London and England averages, but better than Tower Hamlets that had the lowest overall uptake in the Country across all primary school years.

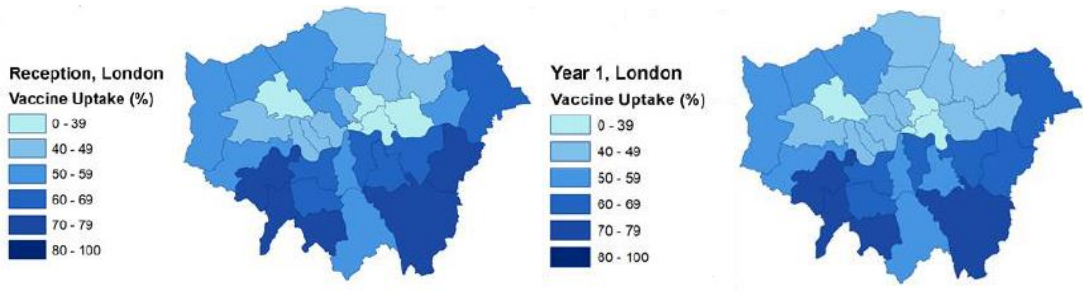
Table 3. Percentage of Children in School Vaccinated against Influenza: Reception to Year 5^a

| | Reception | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
|---------------------|-----------|--------|--------|--------|--------|--------|
| Enfield | 47.9% | 46.0% | 43.7% | 42.1% | 39.0% | 35.9% |
| London ^b | 53.7% | 52.7% | 50.2% | 48.9% | 46.5% | 44.6% |
| England | 64.3% | 63.6% | 61.5% | 60.4% | 58.3% | 56.5% |

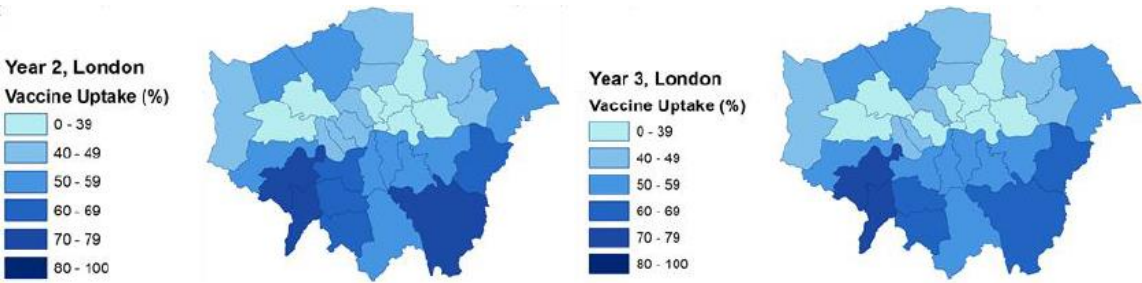
^a1 September 2018 to 31 January 2019, ^b London PHE centre

Source: <https://www.gov.uk/government/statistics/seasonal-flu-vaccine-uptake-in-children-of-primary-school-age-winter-2018-to-2019>

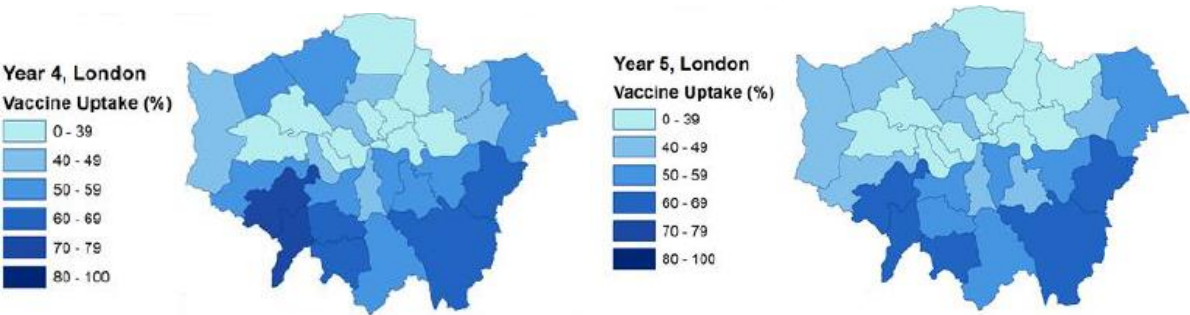
Figure-1 Vaccine uptake (%) in school years reception and 1, 01/09/18 and 31/01/19



Vaccine uptake (%) in school years 2 and 3, 01/09/18 and 31/01/19



Vaccine uptake (%) in school years 4 and 5, 01/09/18 and 31/01/19



5. ALTERNATIVE OPTIONS CONSIDERED

Not applicable.

6. REASONS FOR RECOMMENDATIONS

The improvement in flu immunisation uptake rates in Enfield will improve unnecessary illness among the vulnerable residents (children, pregnant women, those with medical conditions and older people) and avoid burden on GPs, A&E and other health services.

7. COMMENTS OF THE DIRECTOR OF FINANCE, RESOURCES AND CUSTOMER SERVICES AND OTHER DEPARTMENTS

7.1 Financial Implications

Not directly from the report.

7.2 Legal Implications

Health and Social care Act 2012 mandated local authorities to assure health protection where cancer screening forms one.

8. KEY RISKS

Cancer is the first cause of mortality in Enfield and it is important for the cancer patients to live well with cancer for longer.

9. IMPACT ON PRIORITIES OF THE HEALTH AND WELLBEING STRATEGY

- a. Enabling people to be safe, independent and well and delivering high quality health and care services
- b. Creating stronger, healthier communities
- c. Reducing health inequalities – narrowing the gap in life expectancy
- d. Promoting healthy lifestyles

10. EQUALITIES IMPACT IMPLICATIONS

If the facts in the report are considered well in local health and care, health inequalities will be reduced.