



Health Select Committee
24th March 2010

**Report from the Director of
Policy & Regeneration**

For Action

Wards Affected:
ALL

Immunisation Task Group – Final Report

1.0 Summary

- 1.1 This report sets out the findings and recommendations of the Immunisation Task Group that are being presented to the Health Select Committee for approval.

2.0 Recommendations

- 2.1 The Health Select Committee is recommended to endorse the Immunisation Task Group's recommendations for them to be passed to the council's Executive and to the NHS Brent Board for approval.

3.0 Details

- 3.1 The final report of the Immunisation Task Group is attached at appendix 1. The task group was established by the Health Select Committee to consider the issues relating to childhood immunisation in Brent. Members had been concerned that immunisation rates in Brent across the range of childhood vaccines were low and wanted to look in more detail at the reasons why this was. In addition, at the time that the task group was beginning its work, swine flu was a major health issue for the local and national NHS. The task group didn't feel it could carry out this review without considering the role out of the swine flu vaccination programme.

- 3.2 The task group worked to the following terms of reference:

The Immunisation Task Group -

- Assessed NHS Brent's approach to childhood immunisation, looking at current immunisation levels and the plans in place to improve childhood immunisation levels.
- Assessed the progress that NHS Brent has made against the five work streams in its 2008-2013 Commissioning Strategy Plan –
 - MMR catch up programme

- HPV (Human Papilloma Virus) immunisation programme (immunisation against cervical cancer)
- Improving public awareness
- Immunisation system management
- Capacity and capability in the workforce
- Considered how NHS Brent is taking steps to improve data management. This is to ensure that there is accurate information on the number of young people who need to be immunised and on the numbers of people who've received the correct vaccinations.
- Considered best practice in immunisation work from around the UK and see how this could be applied in Brent.
- Consulted with key stakeholders (such as GPs, nurses, parents etc) to find out how they think services can be improved.
- Considered if information (since discredited) on the safety of the MMR vaccine is still acting as a barrier to parents seeking immunisation for their children.
- Considered whether the promotional work undertaken to encourage parents to get their children immunised is adequate in a borough such as Brent with its diverse populations. This will include a review of the measles campaign that took place in autumn 2008 to see whether vaccination levels increased at that time.
- Considered how NHS Brent is preparing for the availability of the swine flu vaccination and whether systems are in place to ensure that those people who need it most are able to receive it.
- Made recommendations to NHS Brent and partners, based on the findings of this work.

3.3 The members of the task group were:

- Councillor Ann John OBE (chair)
- Councillor Eddie Baker
- Councillor Sami Hashmi

3.4 The task group has developed 12 recommendations that it hopes can be endorsed by the Health Select Committee. The members of the task group are of the view that these recommendations can make a positive contribution to the childhood immunisation programme in Brent and ensure more young people are vaccinated against preventable disease. The recommendations address the following subject areas:

- Immunisation data management
- Accountability for the delivery of vaccinations
- Educating NHS and local authority staff on the benefits of vaccination
- Working in partnership with the council to improve immunisation rates

3.5 To date the task group hasn't received any feedback on the recommendations from NHS Brent or the council's Children and Families Department. Any feedback received before the 24th March will be reported to councillors at the Health Select Committee meeting.

4.0 Financial Implications

4.1 None

5.0 Legal Implications

5.1 None

6.0 Diversity Implications

6.1 None

7.0 Staffing/Accommodation Implications (if appropriate)

7.1 None

Background Papers

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