



16 January 2015

Agenda Item: 4

Children's Trust Board Sponsor: Dr Kate Allen

SCHOOL AGE VACCINATION SERVICE VISION 2015-16 ONWARDS

Purpose of the Report

1. To inform colleagues of plans for the delivery of immunisation programmes to school-age children in Nottinghamshire, including the NHS England Derbyshire & Nottinghamshire Area Team's vision and plans for future delivery of these programmes.
2. To inform colleagues of the procurement plan and discuss how members of the Board can support the process and work together to increase uptake of immunisation.

Information and Advice

Background

3. Following the implementation of the Health and Social Care Act in April 2013, NHS England Area Teams are required to commission all immunisation programmes in accordance with the Section 7A agreement and as described in *Public Health Commissioning Intentions 2014/15*¹. Each programme should be commissioned against the national service specifications as listed below.

Table One: School age vaccination programmes

Service specification	Immunisation Programme
No. 6	Meningitis C immunisation programme
No. 11	Human papillomavirus (HPV) programme
No.12	Td/ IPV (teenage booster) immunisation programme
No. 13A	Seasonal Influenza Immunisation programme for children 2014/15
	Seasonal Influenza Immunisation programme for children 2015/16

4. In addition, Bassetlaw is taking part in the South Yorkshire & Bassetlaw Area Team's pilot of children's seasonal influenza programme for Key Stage One (school years 0 – 2) in line with national guidance, while the Derbyshire & Nottinghamshire Area Team are planning to implement the roll out of the

¹ <http://www.england.nhs.uk/wp-content/uploads/2014/03/ph-comms-intent.pdf>.

extended children's seasonal influenza programme in 2015-16 to children in Key Stage One.

Current service provision

5. The Area Teams have inherited a range of delivery models and service providers from predecessor organisations as shown in Appendix A. These delivery models were commissioned to meet the needs of the former Primary Care Trust populations and to ensure the effective delivery of the national recommended programmes at that time.
6. The current arrangements appear to no longer meet the increasingly complex immunisation needs of local children and young people. The existing mixed delivery arrangements do not represent the most cost effective and efficient delivery approach for commissioners or service providers and the new programme demands indicate a timely need for a fresh approach.
7. This separation of commissioning functions presents an opportunity to consider fresh approaches immunisation commissioning.
8. In Nottinghamshire, it should be noted that provision of this service is different for Bassetlaw. Bassetlaw is covered by the South Yorkshire & Bassetlaw Area team and here the Screening and Immunisation team already commission a dedicated vaccination and immunisation team, consisting of three nurses and a healthcare support worker. This team provides school-age vaccination services, as well as staff immunisations, follow-up work for non-attending pre-school children, and staff training.

Service Delivery Challenges

9. Appendix B describes some of the local operational challenges service providers face in the delivery of specific immunisation programmes for school aged children in Nottinghamshire and Nottingham.
10. There is a mixed delivery model of school aged vaccination services across the Area Team geography (including Derbyshire and Derby City also, not detailed here), each with varying constraints and challenges as follows:
11. Significant capacity pressures exist within primary care that has been heightened by the requirement to introduce four new immunisation programmes for infant and adults since 2013.
12. There is a risk that the increased demands on primary care providers may negatively impact on their ability to sustain the high pre-school vaccinations uptake rates currently achieved by the majority of practices. The preschool service is highly valued and appropriate.
13. School nurse providers report similar challenges in meeting existing service specification requirements due to capacity and recruitment challenges and competing work demands.

14. The existing provision through multiple and differing school aged vaccination services is fragmented (especially so in Nottingham City and Nottinghamshire) and as a consequence, inequalities in access to immunisations are not being adequately addressed and parents and young people may be unclear about how to access vaccinations.
15. This fragmentation also creates inequalities and potential confusion for parents of children for 'cross border' children, even within the Area Team county and city boundaries.
16. There is also a need to consider the capacity of current providers to adequately respond to requests for national catch up campaigns or outbreaks requiring mass vaccination, particularly where these are school based outbreaks.

Rationale for Change by Derbyshire & Nottinghamshire (N&D) NHS England Area Team

17. The Area Team has inherited a range of delivery models and service providers, from predecessor organisations, for the delivery of school age vaccination. The introduction of a number of new school age immunisation programmes, with further programmes anticipated, coupled with the local service challenges as previously outlined, has prompted a review of delivery models to ensure future immunisation services are robust, sustainable and above all achieve high uptake.
18. The current arrangements appear to no longer meet the increasingly complex immunisation needs of local children and young people. The existing mixed delivery arrangements do not represent the most cost effective and efficient delivery approach for commissioners or service providers and the new programme demands indicate a timely need for a fresh approach.
19. This separation of commissioning functions presents an opportunity to consider fresh approaches to immunisation commissioning.

Vision for school-aged children vaccination service

20. The N&D Area Team has a vision for the future delivery of school age vaccination services as follows:

To commission a dynamic, high performing and dedicated immunisation service(s), that will encompass all routine and reactive immunisation programmes for school aged children. The new service will engage all children and young people and their parents and will be well known to the communities they serve. They will demonstrate expertise in the field of immunisations and above all be committed and passionate about achieving high uptake rates and reducing health inequalities.

21. The vision has been approved by the Derbyshire and Nottinghamshire Immunisation Programme Boards. It has also been supported in principle by the Directors of Public Health and Public Health Consultant leads. The vision has also been shared with Health and Wellbeing Boards.

Population

22. The new services will be commissioned to meet the needs of approximately 312,747 children attending 1020 schools (including Independent and Special Schools) in Derbyshire County, Derby City, Nottinghamshire County and Nottingham City².

Procurement Plan

23. To achieve this vision, the Area Team is seeking to procure new immunisation service provider(s) by January 2015 to enable provision of services by no later than September 2015.

24. Arden, Herefordshire and Worcestershire (AHW) Area Team have initiated a regional procurement proposal for new dedicated immunisation service provider(s) of school aged vaccinations. The Area Team (AHW) has engaged Greater East Midlands (GEM) Commission Support Unit (CSU) to procure this service(s). Derbyshire and Nottinghamshire Area Team (as are a number of other Midlands and East Area Teams) are party to this process.

25. The 6 Area Teams have worked together to gain local market views through an Early Market Engagement (EME) exercise. Potential providers have now submitted their pre-qualification questionnaires and a core team have been assembled to review the PQQ responses. Successful potential bidders will then be 'Invited to Tender' as part of the next stage of the procurement process.

Working Together to Increase uptake

26. The aim is to commission new dedicated immunisation service providers who will be required to work hand in glove with schools and other relevant service providers but the Screening and Immunisation Team will not be taking on new roles or work in relation to immunisation delivery.

Next Steps

27. Local Authority Public Health Consultant Leads for children's services are invited to participate in the evaluation of the service bids by the Area Team during December 2014/ January 2015.

28. The Screening and Immunisation Team (SIT) on behalf of the Area Team wish to seek the views and comments of Local Authority public health and education lead colleagues, Clinical Commissioning Groups, Public Health

² Source : National Statistics- Department of Education schools, pupils and their characteristics Jan 2013

England Centre and Local Medical Committee stakeholders, regarding our vision and proposed procurement plan.

RECOMMENDATION/S

- 1) That board members note the proposals and implementation of the procurement plan
- 2) That board members discuss ways of maximising uptake of vaccinations across the County and agree to receive annual reports in relation to children's immunisation programmes.

Name of Report Author(s)

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Background Papers

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

Appendix A

Table One: Service delivery within Nottinghamshire County, Bassetlaw and Nottingham City boundaries

Immunisation programme	Age	Service provider Nottingham City	Service provider Nottinghamshire County	Service provider Bassetlaw
Teenage Meningitis C (commenced September 2013)	14 years	General practice	General practice	Nottinghamshire Healthcare Trust Health Partnership – stand-alone dedicated vaccination and immunisation team deliver all programmes to all children of school age
Human papillomavirus	11-12 years	Nottingham CityCare	Nottinghamshire Healthcare Trust Health Partnership	
Td/ IPV (teenage booster	School year 9 /10	Nottingham CityCare and general practice (75:25)	Nottingham Healthcare Trust Health Partnership	
Seasonal Influenza Immunisation programme for children 2014/15	2, 3, 4 years	General practice	General practice	
Seasonal Influenza Immunisation programme for children 2015/16	All school aged children 5- 16 years	To be confirmed	To be confirmed	

Appendix B Local operation challenges

Nottingham City and Nottinghamshire County

Td/IPV (teenage booster/ Meningitis C

The delivery of Td/IPV (teenage booster) in Nottingham City is divided between Nottingham CityCare and general practice (75:25) which can create challenges in terms of leadership of the programme and performance management. Currently neither provider has systems in place for assertive outreach or other community initiatives to improve access. There is variation across Nottingham City general practices as to whether practices run a formal call and recall system for teenage vaccinations.

In the County, the teenage booster vaccination is delivered by the school nursing service across Nottinghamshire County by Nottinghamshire Healthcare Trust Health Partnership. The service does not currently offer an assertive outreach service for Td/IPV (teenage booster) and so are not able to currently meet all requirements of this service specification

General practices in Nottinghamshire County do not currently run a formal call and recall system for teenage vaccinations as the teenage booster vaccination is delivered predominantly by the school nursing service. This may create a risk of inequity for young who attend out of area schools or do not regularly attend school.

General practices in City and County have been asked to deliver the revised Meningitis C schedule in accordance with national guidance. However the lack of established call and recall services for teenagers will likely result in poor access and uptake and further fragments service delivery.