

**Lancashire Health & Wellbeing Board**  
Meeting to be held on 16<sup>th</sup> October 2014

Electoral Division affected:  
All

**Screening and Immunisation Programmes update**  
(Appendices 1 to 4 refer)

Contact for further information:

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**Executive Summary**

This report provides an initial overview of immunisation and screening programmes locally and proposes an assurance process for the Lancashire Health and Wellbeing Board.

**Recommendations**

The Lancashire Health and Wellbeing Board are asked to:

- i. note the local arrangements in place to monitor the performance, quality and safety of screening and immunisation programmes.
- ii. seek quarterly assurance from NHS England and Public Health England on the performance of all screening and immunisation programmes for its residents. The assurance report should include the following:
  - a. information on uptake and coverage, highlighting particular issues of local relevance
  - b. a summary of any serious incidents and their impact on the local population
  - c. a programme of activities aimed at improving uptake and coverage locally
- iii. seek an annual report from NHS England and Public Health England on the performance of all screening and immunisation programmes for its residents.

**Background and Advice**

## 1. Issue for consideration

- 1.1. National immunisation and screening programmes exist to provide good protection against infectious diseases and promote early diagnosis of a number of serious conditions. Their effectiveness and cost effectiveness depends on the existence of a systematic approach, strict adherence to quality markers, and co-ordinated multidisciplinary working.
- 1.2. Effective delivery of screening and immunisation programmes will contribute to the stated goals with the Lancashire Health and Wellbeing Strategy, across Starting Well, Living Well and Ageing Well Programmes. It is therefore important for the Lancashire Health and Wellbeing Board to seek regular assurance on the local performance and safe delivery of these national programmes.
- 1.3. This report provides an initial overview of immunisation and screening programmes locally and proposes an assurance process for the Lancashire Health and Wellbeing Board.

## 2. NHS Screening Programmes

- 2.1. Eleven NHS screening programmes (figure 1) identify important diseases early enough to achieve better outcomes:

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*Figure 1. NHS SCREENING PROGRAMMES*

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NHS Breast Screening Programme  
NHS Cervical Screening Programme  
NHS Bowel cancer Screening Programme  
NHS Abdominal Aortic Aneurysm Screening Programme  
NHS Diabetic Eye Screening Programme  
NHS Newborn Hearing Screening Programme  
NHS Newborn and Infant Physical Examination Programme  
NHS Newborn Bloodspot Screening Programme  
NHS Sickle Cell and Thalassaemia Screening Programme  
NHS Infectious Diseases in Pregnancy Screening Programme  
NHS Down's Syndrome and Fetal Anomaly Screening Programme

## 3. NHS Immunisation Programmes

- 3.1. Immunisation is one of the most effective public health measures to protect individuals and the community from serious infectious diseases (figure 2).

- 3.2. National programmes are targeted to specific groups such as newborn babies, children, pregnant women and frontline health and social care workers.

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*Figure 2. INFECTIOUS DISEASES FOR WHICH NHS IMMUNISATION IS AVAILABLE*

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Diphtheria	Rubella
Tetanus	Seasonal influenza
Pertussis (whooping cough)	Human Papilloma Virus
Polio	Shingles
Haemophilus influenza type b	Hepatitis B
Pneumococcus	Tuberculosis
Rotavirus	Chicken pox
Meningitis C	Hepatitis A
Measles	Typhoid
Mumps	Cholera

- 3.3. The detailed immunisation schedule is available at:

<http://www.nhs.uk/Conditions/vaccinations/Pages/vaccination-schedule-age-checklist.aspx>

#### **4. Commissioning responsibilities**

- 4.1. Since April 1st 2013, NHS England has been responsible for the commissioning of immunisation and screening programmes. Locally, this responsibility is discharged through NHS England's Lancashire Area Team. Public Health England also plays a key role by employing expert teams of public health specialists who are 'embedded' into the Area Teams to support the delivery of screening and immunisation programmes.
- 4.2. Local authorities also have a role to play as they are responsible for ensuring plans are in place to protect the health of their population, improve health and reduce health inequalities<sup>1</sup>. The Director of Public Health must provide local leadership and liaise with local councillors, schools, communities, CCGs and primary care to ensure there is sufficient uptake of immunisation and screening programmes.

#### **5. Delivery**

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<sup>1</sup> [http://www.local.gov.uk/publications/-/journal\\_content/56/10180/4068839/PUBLICATION](http://www.local.gov.uk/publications/-/journal_content/56/10180/4068839/PUBLICATION)

5.1. The majority of immunisation programmes and the cervical screening programme are delivered in general practice. Community service providers (Lancashire Care NHS Foundation Trust and Blackpool Teaching Hospitals NHS Foundation Trust) employ immunisation teams to deliver school-based vaccination programmes (HPV, Meningitis C, the school-leavers' booster and seasonal influenza). Screening for bowel and breast cancer, diabetic retinopathy and abdominal aortic aneurysm are mostly delivered by NHS acute trusts while antenatal and newborn screening programmes are delivered by maternity service providers.

## **6. Performance monitoring and oversight**

6.1. Information on immunisation and screening performance is collected nationally by NHS England from the various providers on a quarterly basis. Comparative data is then published in the following quarter.

6.2. The NHS England Lancashire Area Team has established a multi-agency Lancashire Screening and Immunisation Oversight Group. This reports to the Lancashire Quality Surveillance Group and has oversight of local Programme Boards for all screening and immunisation programmes. (Appendices 1a and 1b)

6.3. The Lancashire Screening and Immunisation Oversight Group meets quarterly to review and address issues relating to quality, performance, serious incidents and risks.

6.4. The latest performance reports for local immunisation and screening programmes are appended to this paper (Appendices 2 and 3). An update paper for DsPH (September 2014) summarising key issues for each group of programmes is also provided (Appendix 4).

## **7. Recommendations**

7.1. The Lancashire Health and Wellbeing Board are asked to note the arrangements in place to monitor the performance, quality and safety of screening and immunisation programmes

7.2. It is recommended that the Lancashire Health and Wellbeing Board seek quarterly assurance from NHS England and Public Health England on the performance of all screening and immunisation programmes for its residents. The assurance report should include the following:

- information on uptake and coverage, highlighting particular issues of local relevance
- a summary of any serious incidents and their impact on the local population
- a programme of activities aimed at improving uptake and coverage locally

7.3. It is recommended that the Lancashire Health and Wellbeing Board seek an annual report from NHS England and Public Health England on the performance of all screening and immunisation programmes for its residents.

### **Consultations**

N/A

### **Implications**

This item has the following implications, as indicated:

The Lancashire Health and Wellbeing Board will receive regular assurance on the local performance and safe delivery of national screening and immunisation programmes.

### **Risk management**

Effective delivery of screening and immunisation programmes is a key contribution to the delivery of the Lancashire Health and Wellbeing Strategy through preventing ill health, promoting healthy pregnancy, reducing infant mortality and reducing avoidable deaths. If the Lancashire Health and Wellbeing Board do not receive regular assurance on the local performance and safe delivery of national screening and immunisation programmes, they will not be able to oversee and monitor the delivery of the strategy.

### **List of Background Papers**

Paper	Date	Contact/Directorate/Tel
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Reason for inclusion in Part II, if appropriate