

# Communicating change in the immunisation programme – the UK experience

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# The challenge

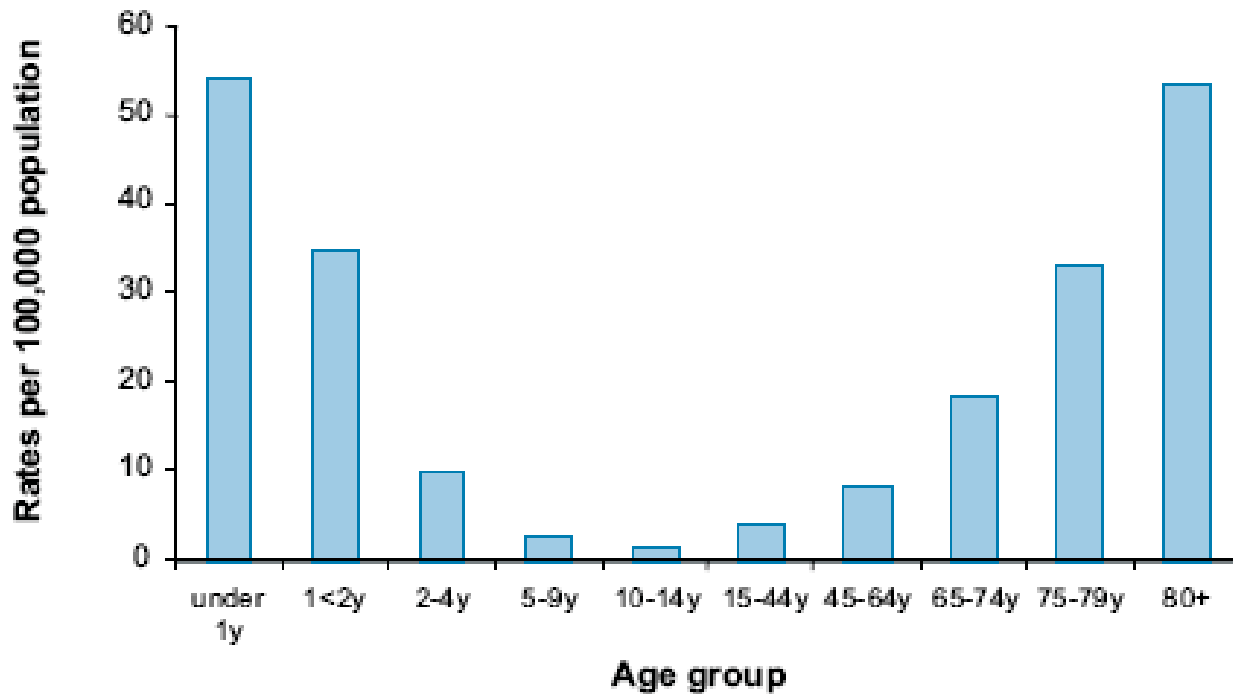


Figure 1 Invasive pneumococcal disease (IPD) rates by age per 100,000 population. Epidemiological year 2003-04 (July-June). England and Wales, HPA data.

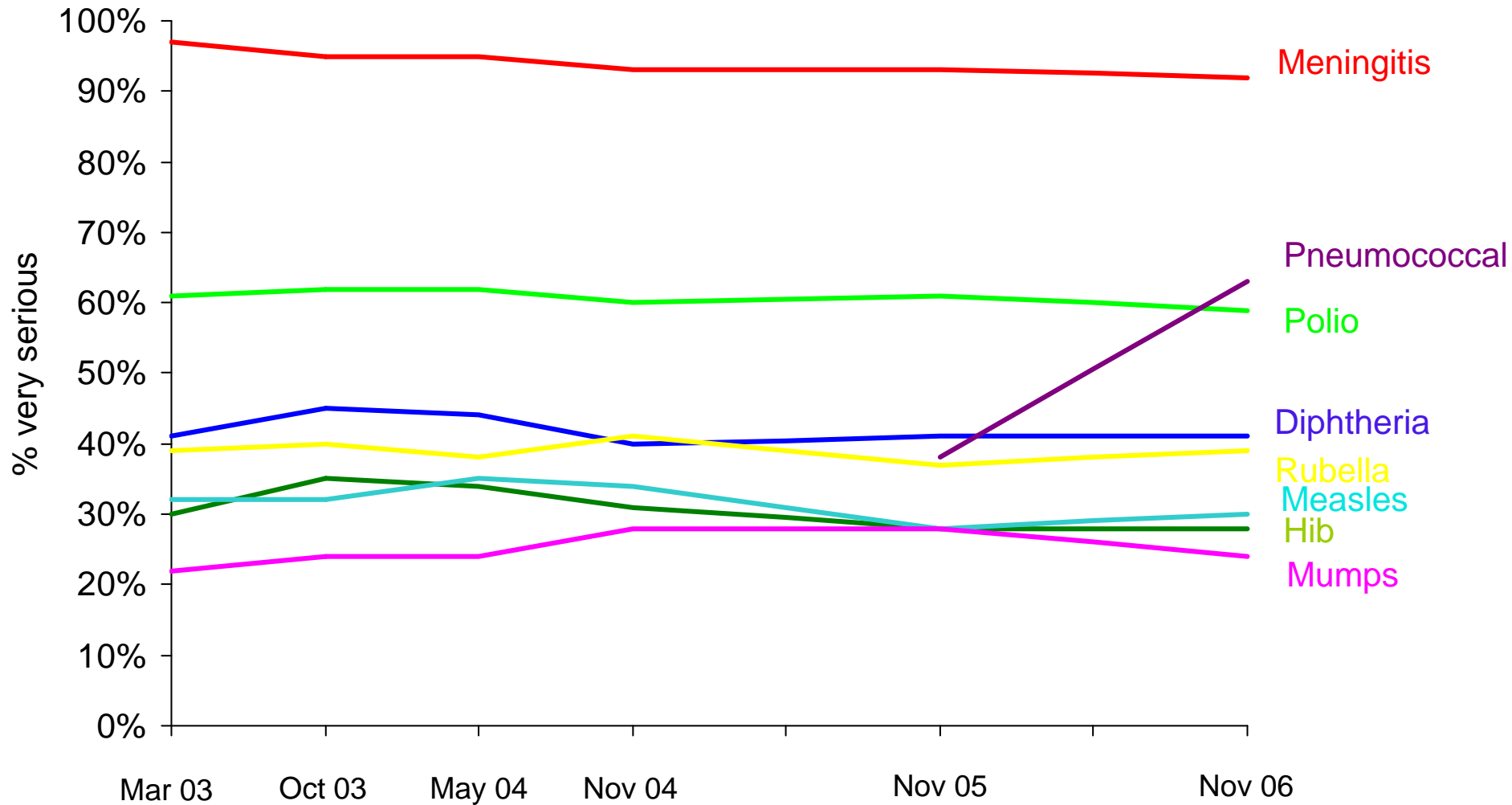
# What does that mean?

- around 5000 cases of IPD in E&W
- 530 occurring in children under two years of age
- around 50 children under two died from IPD each year
- up to a half of those that survive are left with permanent disability

# Talking to parents

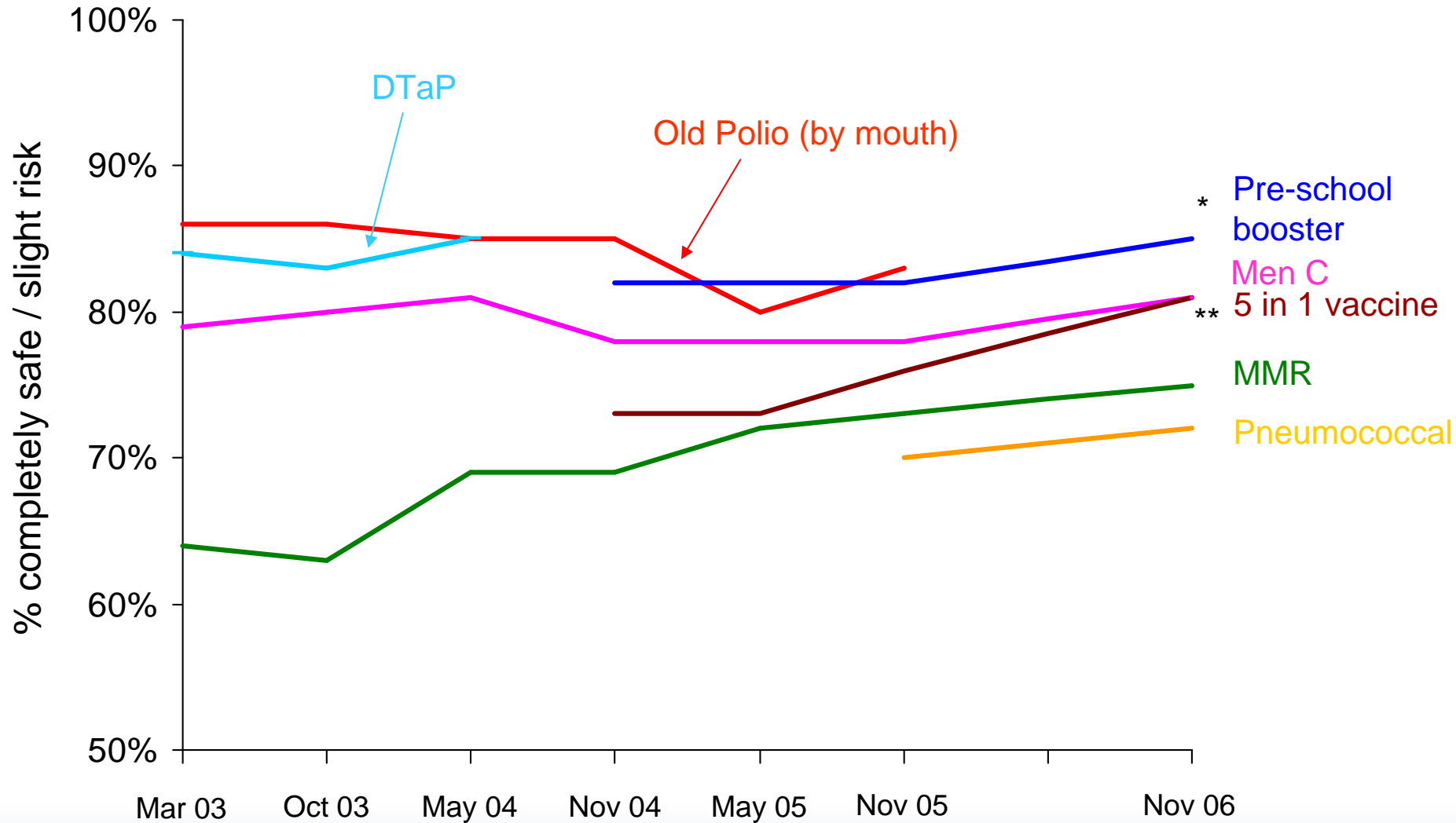
- 31 waves of research dating back to 1991
- over 1,000 personal interviews
- parents of 0-2 year olds
- attitudes towards immunisations and disease
- awareness of advertising and publicity

# Perceived severity of diseases



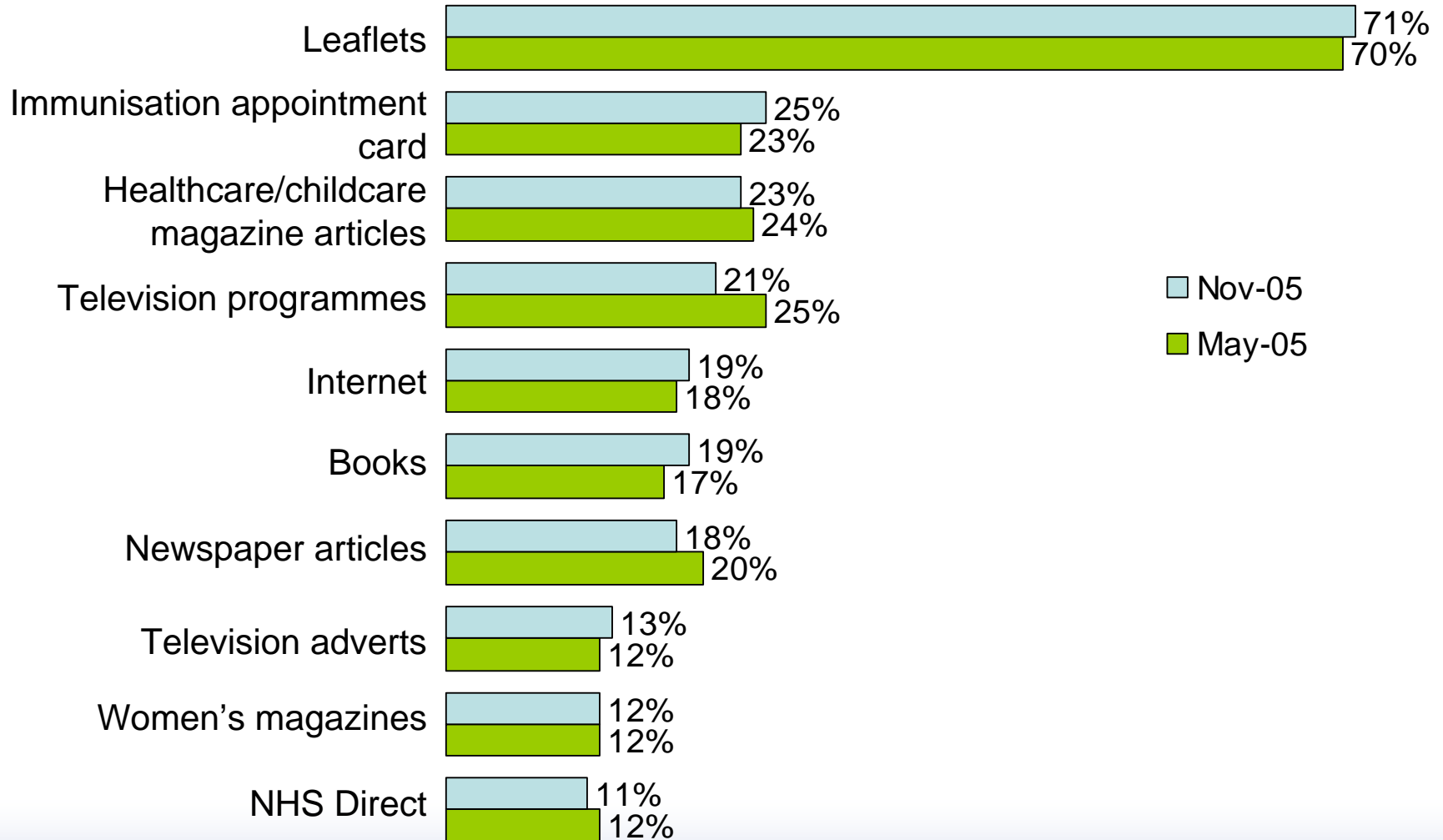
Base: All mothers of 0-2s (W30 n = 1016)

# Perceived safety of immunisations



Base: All mothers of 0-2s (W30 n = 1016)

# Sources of information consulted before immunisations were due (prompted)



# Information gaps

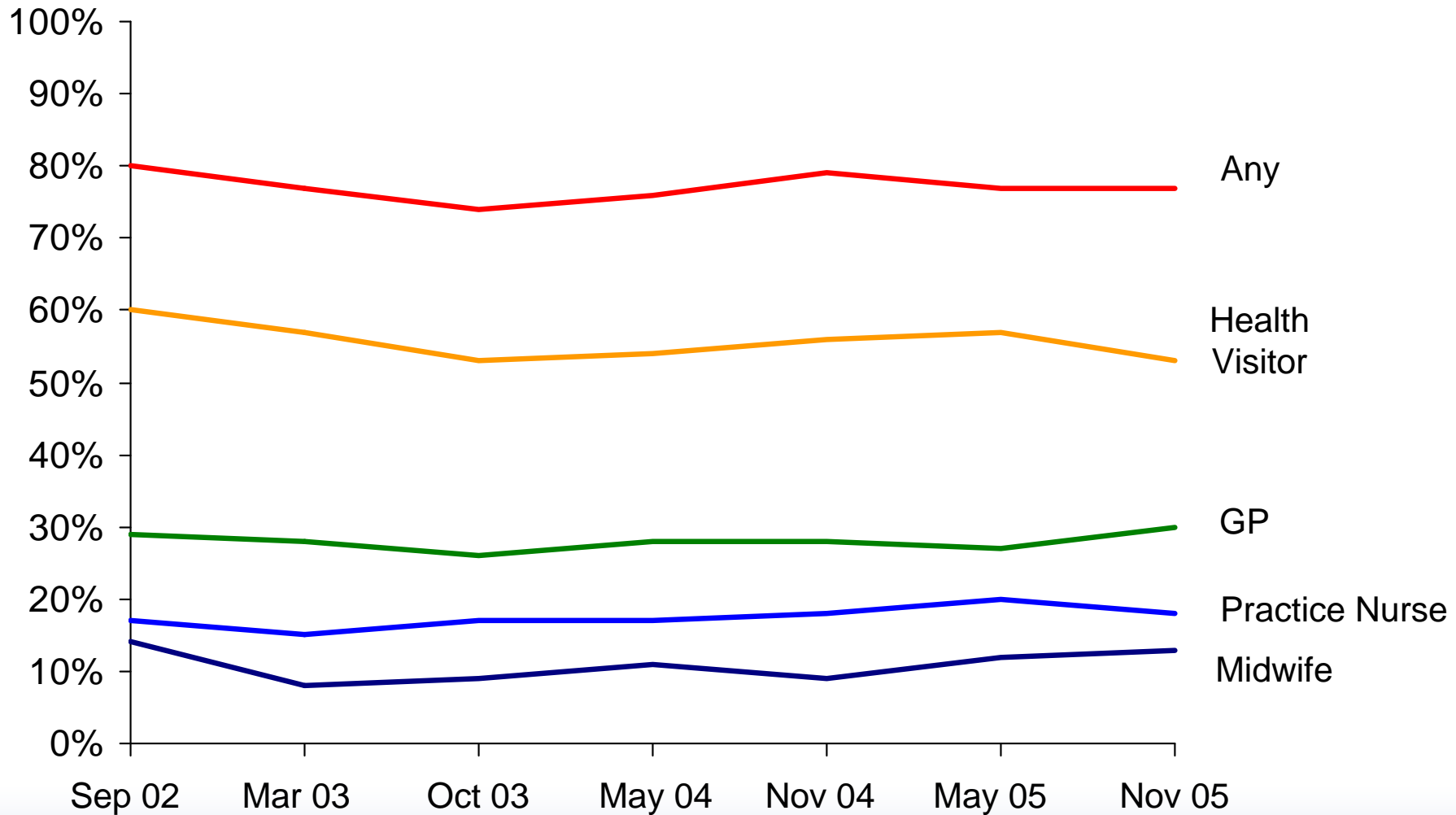
- 70% felt they had all the info about immunisation that they wanted before their child's immunisations were due.
- the most frequently mentioned requests were for more general information
  - **information on side effects**
  - **more information in general on all aspects**



# What do people want?

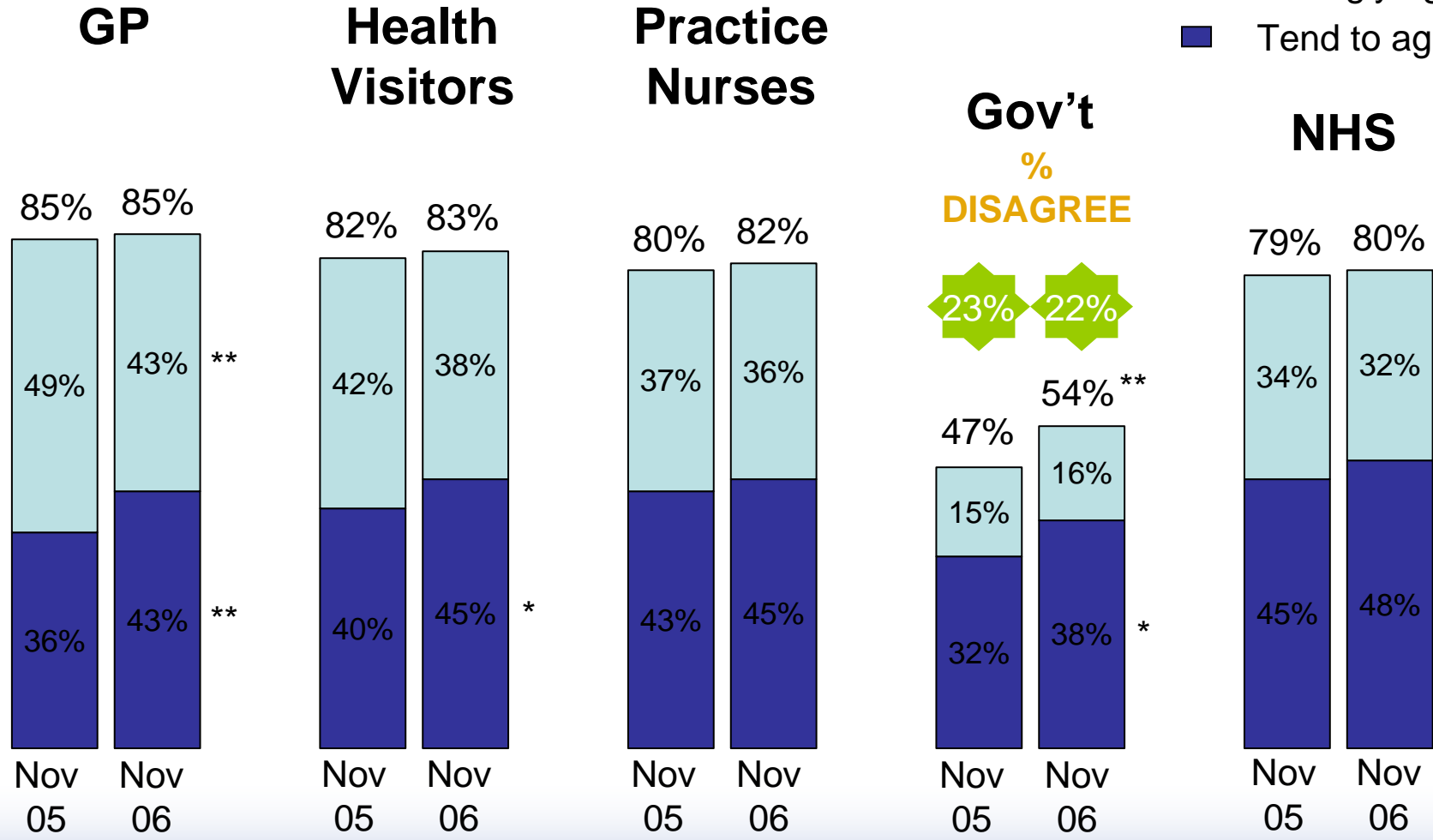
- clarity
- consistency
- facts
- range of information/resources
- Openness – talking to someone

# Whether discussed immunisations with a health professional before the immunisations were due



# Trust of advice about immunisation given by health professionals and government

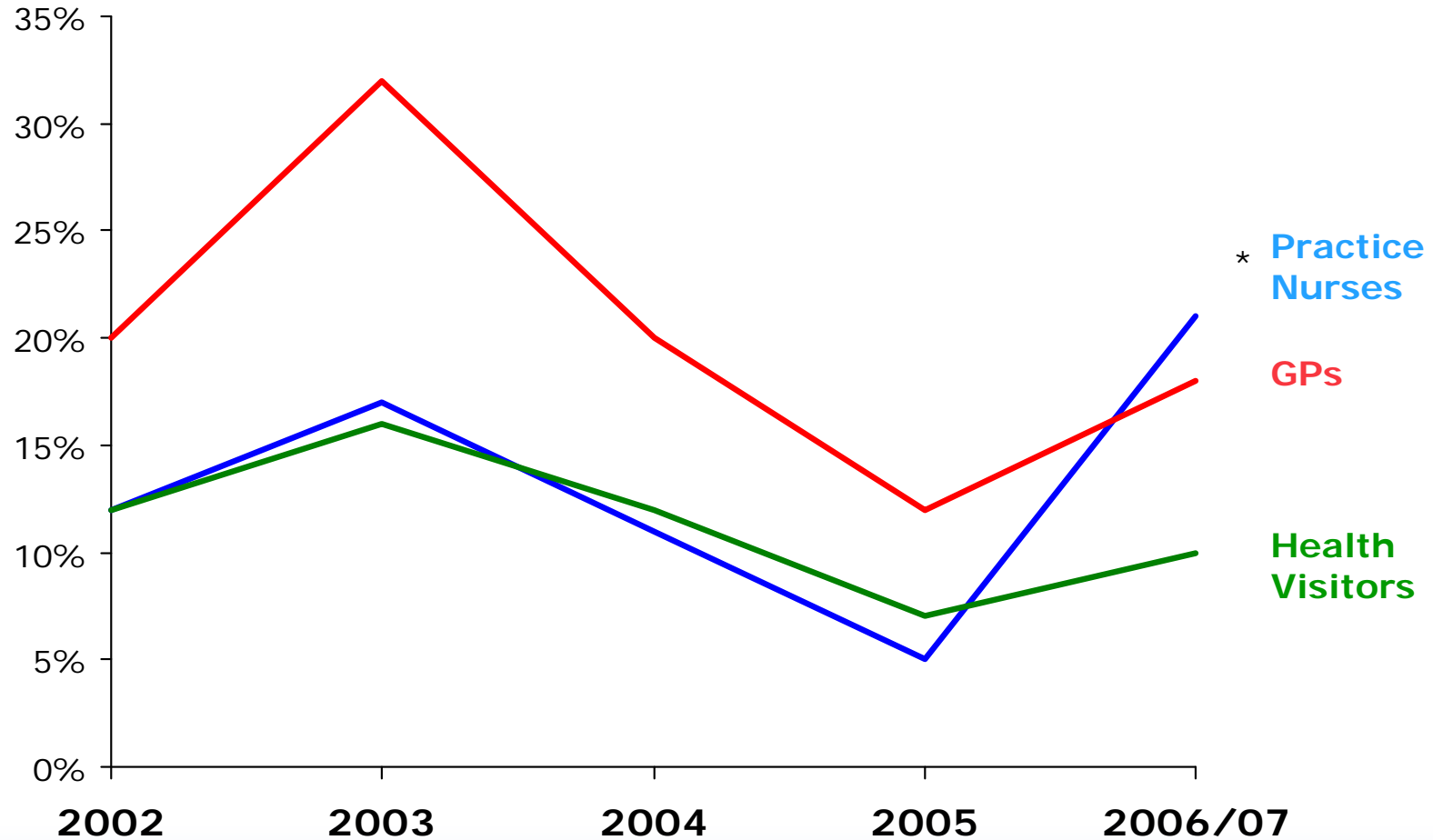
■ Strongly agree  
■ Tend to agree



# Talking to health professionals

- over 1,000 telephone interviews conducted with GP's, health visitors and practice nurses
- feedback on information and training, advising parents and personal concerns

# Personal concerns about childhood immunisations



# Current personal concerns

## Main concern:

- Feeling that babies are given too many immunisations (67% PNs, 51% GPs, 49% HVs)

## Secondary concerns:

- About the schedule, and too many changes to it
- Some HVs were influenced by parental views

# Central advocacy

- evidence based policy
- evidence based information
- evidence based communication
- financial commitment
- political support
- network of specialists

# Changes from 4<sup>th</sup> September 2006

- the addition of a pneumococcal conjugate vaccine (PCV) at 2, 4 and 13 months of age;
- a dose of MenC vaccine at 3 and 4 months;
- a booster dose of Hib and MenC vaccine (given as a combined Hib/MenC vaccine) at 12 months of age.



When to immunise	Disease protected against	Vaccine given
<b>Two months old</b>	Diphtheria, tetanus, pertussis (whooping cough), polio and <i>Haemophilus influenzae</i> type b (Hib)  Pneumococcal infection	DTaP/IPV/Hib  Pneumococcal vaccine (PCV)
<b>Three months old</b>	Diphtheria, tetanus, pertussis, polio and <i>Haemophilus influenzae</i> type b (Hib) Meningitis C (meningococcal group C)	DTaP/IPV/Hib  MenC
<b>Four months old</b>	Diphtheria, tetanus, pertussis, polio and <i>Haemophilus influenzae</i> type b (Hib)  Meningitis C  Pneumococcal infection	DTaP/IPV/Hib  MenC  PCV
<b>Around 12 months old</b>	<i>Haemophilus influenzae</i> type b (Hib) and meningitis C	Hib/MenC
<b>Around 13 months old</b>	Measles, mumps and rubella (German measles)  Pneumococcal infection	MMR  PCV
<b>Three years four months to five years old</b>	Diphtheria, tetanus, pertussis and polio  Measles, mumps and rubella	DTaP/IPV or dTaP/IPV  MMR
<b>Thirteen to eighteen years old</b>	Tetanus, diphtheria and polio	Td/IPV

# New information campaign

- public information
- health professional information
- seminars
- press
- website
- TV advertising

12<sup>th</sup> July 2006

## IMPORTANT CHANGES TO THE CHILDHOOD IMMUNISATION PROGRAMME

Dear Colleague

We are writing to you with further information about changes to the routine childhood immunisation programme. This follows our letter of 8<sup>th</sup> February 2006\*.

From 4<sup>th</sup> September 2006, the following changes will be introduced:-

- Pneumococcal vaccine will be introduced to the routine childhood immunisation programme, and the schedule for MenC and Hib vaccines will be modified.
- The new routine schedule given in Annex 1, Table 1 will be introduced. This schedule requires an additional immunisation visit at 12 months of age.
- A pneumococcal vaccination catch-up programme will be carried out for children aged under two years.

The Joint Committee on Vaccination and Immunisation has endorsed these changes.

There is sufficient pneumococcal vaccine currently available to allow some flexibility to bring forward part of the catch-up programme. Children born between 5 September 2004 and 3 August 2005 can be vaccinated earlier than suggested in Table 4. This flexibility may assist general practices in organising



## From the Chief Medical Officer, the Chief Nursing Officer and the Chief Pharmaceutical Officer

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Sir Liam Donaldson  
MSc,MD,FRC'S(Ed),FRCP,FFPHM

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Professor Christine Beasley CBE  
RN

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Dr Keith Ridge  
BPharm, MSc, PhD, MRPharmS

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PL/CMO/2006/1, PL/CNO/2006/1,  
PL/CPHO/2006/1

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### For action

- PCT Chief Executives
- PCT Directors of Public Health
- Immunisation Co-ordinators
- Consultants in Communicable Disease Control
- Medical Directors of NHS Trusts
- Chairs of Primary Care Trusts
- General Practitioners
- Directors of Nursing

## 18. Information for parents and healthcare professionals

To support the new changes to the childhood immunisation schedule, NHS Immunisation Information has produced a range of information resources. New leaflets and factsheets for parents and healthcare professionals will be sent directly to general practices, community pharmacies, health promotion units, NHS Direct call centres and NHS Walk in centres in August. These resources should be shared with the primary care teams involved in giving or advising about immunisation.

Further copies of these resources can be ordered from Department of Health Publications by e-mail: [dh@prolog.uk.com](mailto:dh@prolog.uk.com); or telephone: 08701 555 455 (please use the 6 digit Smart code printed on the back of these materials). Resources will also be available to view and download from the [www.immunisation.nhs.uk](http://www.immunisation.nhs.uk) website by the end of July.

[www.immunisation.nhs.uk](http://www.immunisation.nhs.uk) website pages will be updated to reflect the changes to the programme, and a new section for Hib/MenC immunisation is being created. These new pages will go live from the 4<sup>th</sup> September.

A national advertising campaign will run to raise awareness among parents about the new programme.



A guide to  
**immunisation for babies**  
up to 15 months of age

**i**mmunisation  
the safest way to protect your child for life

Includes information on a new  
vaccine for babies aged  
2, 3 and 4 months

# Childhood immunisation publications

from the Department of Health

It is very important that only the most up-to-date versions of immunisation leaflets are used by health professionals and the public. The immunisation programme is subject to change and old materials may not match current circumstances. This sheet shows the leaflets introduced in 2006 together with those previous versions that should be removed from display and destroyed.



For more information on immunisation and immunisation publications visit: [www.immunisation.nhs.uk](http://www.immunisation.nhs.uk) where you can view and download a complete catalogue of childhood immunisation publications from NHS Immunisation Information.



A guide to  
**Childhood  
immunisations**

for babies up to  
13 months of age



**i**mmunisation

the safest way to protect your child



# Pre-school immunisations

A guide to vaccinations  
for 3- to 5-year-olds



**i**mmunisation

the safest way to protect your child



# Pneumococcal vaccine

Catch-up programme for children under two years of age





## Factsheet

Pneumococcal  
conjugate vaccine (PCV)  
for children



 **mmunisation**  
the safest way to protect our children

**Factsheet**

*Haemophilus influenzae* type b  
(Hib) and meningococcal  
serogroup C (MenC) vaccines  
for children



The 'Green Book'  
chapters on  
*Haemophilus*  
*influenzae* type b,  
Meningococcal  
and Pneumococcal

## Recommended schedule for pneumococcal catch-up vaccination from 4th September 2006

Child's date of birth	Recommended time period in which catch-up vaccination should be given						Child's age at vaccination (months)
	4 Sept to 3 Oct	4 Oct to 3 Nov	4 Nov to 3 Dec	4 Dec to 3 Jan	4 Jan to 3 Feb	4 Feb to 3 Mar	
5/9/04 to 3/11/04							23
4/11/04 to 3/12/04							22
4/12/04 to 3/1/05							22
4/1/05 to 3/2/05							21
4/2/05 to 3/3/05							21
4/3/05 to 3/4/05							20
4/4/05 to 3/5/05							20
4/5/05 to 3/6/05							19
4/6/05 to 3/7/05							19
4/7/05 to 3/8/05							18
4/8/05 to 3/9/05							13
4/9/05 to 3/10/05							13
4/10/05 to 3/11/05							13
4/11/05 to 3/12/05							13
4/12/05 to 3/1/06							13
4/1/06 to 3/2/06							13
4/2/06 to 3/3/06*							8, 10
4/3/06 to 3/4/06*							7, 9
4/4/06 to 3/5/06*							5, 7
4/5/06 to 3/6/06*							4, 6
4/6/06 to 3/7/06*							4, 6

Indicates the month in which the child should be offered PCV











\*Children in this age group will receive a booster dose of PCV at 13 months of age and a dose of Hib/MenC at 12 months of age.

Please note that there are sufficient supplies of PCV vaccine for all children born between 5/9/04 and 3/8/05 to be offered PCV as soon as it is practically possible after the start of the programme. This will provide general practices with the flexibility to immunise eligible children over a shorter time period.

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Welcome to NHS Immunisation Information

The most comprehensive, up-to-date and accurate source of information on vaccines, disease and immunisation in the UK.



## Immunisation schedule

Find out which immunisations your child needs and when.

Select by age group, or see the full schedule.



Select an age group

Two months old

[Go ▶](#)



See full schedule

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## News

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## Hot topics

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- ▶ 11 Oct 2006  
[\[MMR\]: No Evidence of Persisting Measles Virus in Peripheral Blood Mononuclear Cells From Children With Autism Spectrum Disorder](#)
- ▶ 29 Sep 2006  
[\[MMR\]: MMR, DTP Vaccines Not Linked to Encephalopathy](#)
- ▶ 28 Aug 2006  
[\[Pneumococcal\]: Pneumococcal vaccine launch – Department of Health press release](#)

- ▶ [Important changes to the routine childhood immunisation programme](#)
- ▶ [PGDs for Pneumococcal and Hib–MenC vaccine](#)
- ▶ [Health professional slides for changes to the childhood immunisation programme](#)
- ▶ [Immunisation – Why our children must be protected DVD video](#)
- ▶ [New immunisation programme publications](#)
- ▶ [Hib/MenC replaces single Hib vaccine](#)



Pneumococcal vaccine  
Catch-up programme for children under two years of age

- m** eningitis
- b** lood poisoning
- p** neumonia
- e** ar infections

- materials live on immunisation website July
- direct mailing of info pack and sample copies of leaflets to PCTs 21<sup>st</sup> August
- materials available to order and began distribution 21<sup>st</sup> August

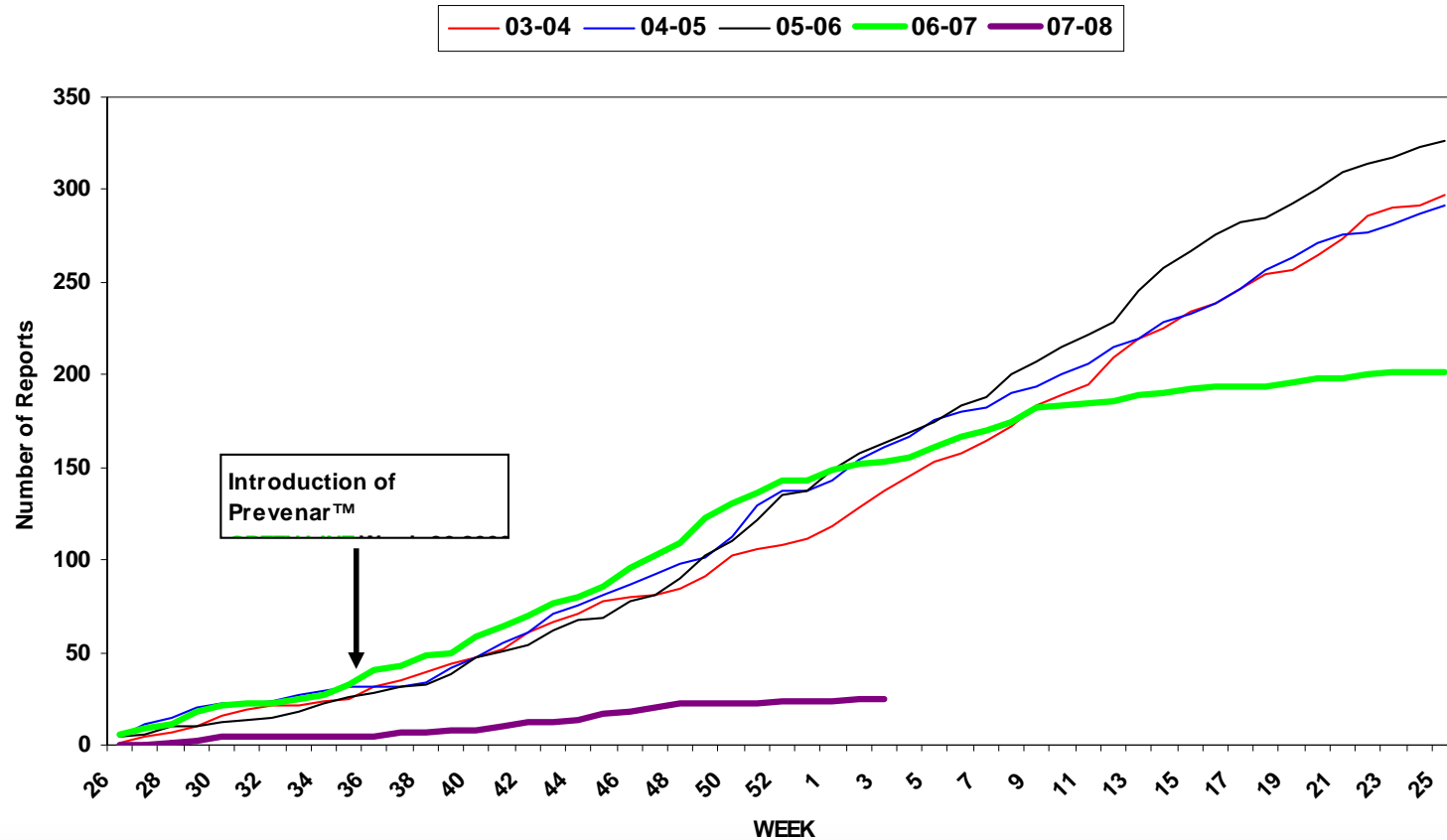
# What were the challenges?

- complex programme with many changes
- more vaccines
- time of implementation
- supply/disposal of material
- three injections at once



# Was it worth it?

Cumulative weekly number of reports of Invasive Pneumococcal Disease due to any of the seven serotypes in Prevenar™ : Children aged < 2 Years in England and Wales by Epidemiological Year: July-June (2003- To Date)



# Completed primary immunisations (all antigens) by 12 months: October to December 2007

Strategic Health Authorities (SHAs)/Country	PCT/HB/AR*† (total)	DTaP/IPV/Hib3 %	MenC2 %	PCV2 %
<b>English SHAs</b>				
North East	12 (12)	95.0	94.0	94.9
North West	24 (24)	93.2	92.5	89.9
Yorkshire and the Humber	14 (14)	92.8	91.3	90.7
East Midlands	9 (9)	92.8	92.8	92.8
West Midlands	17 (17)	92.9	93.2	93.0
East of England	14 (14)	93.1	92.2	91.6
London	25 (31)	79.3	73.9	75.3
South Central	9 (9)	94.0	93.6	92.1
South East Coast	8 (8)	88.3	87.9	87.9
South West	14 (14)	92.8	93.6	92.1
<b>England (Total)</b>	<b>146 (152)</b>	<b>90.5</b>	<b>89.3</b>	<b>89.1</b>
<b>Wales</b>	<b>3 (3)</b>	<b>95.3</b>	<b>94.7</b>	<b>94.9</b>
<b>Northern Ireland</b>	<b>4 (4)</b>	<b>96.5</b>	<b>97.1</b>	<b>92.1</b>
<b>Scotland</b>	<b>14 (14)</b>	<b>96.6</b>	<b>96.2</b>	<b>96.4</b>
<b>United Kingdom</b>	<b>167 (173)</b>	<b>91.4</b>	<b>90.3</b>	<b>90.1</b>

\* Primary Care Trusts/health boards/administrative regions  
 † Number of trusts reporting DTaP/IPV/Hib3 coverage