CABINET

DATE 8th March 2023

REPORT OF Councillor Stan Shreeve, Portfolio Holder for

Health, Wellbeing and Adult Social Care

RESPONSIBLE OFFICERDerek Ward Director of Public Health

SUBJECT School Immunisation Funding

STATUS OPEN report – CLOSED appendices

FORWARD PLAN REF NO. CB 03/23/07

CONTRIBUTION TO OUR AIMS

Our vision for North East Lincolnshire is that all of our children are healthy, resilient, safe and are supported to achieve their full potential. This funding will help contribute to two of the priorities:

- To ensure all children and young people in our community have access to high quality, safe and effective health services when they need it, so they enjoy good health and wellbeing throughout their life
- To deliver high quality statutory, targeted and universal services for children and young people in our borough

EXECUTIVE SUMMARY

This report seeks endorsement to sign up to the NHS England contract and accept associated funding for the School Based Immunisation Programme commencing 1st September 2023. The contract runs for 5 years with an option to extend for a further 2 years. This is a direct patient care clinical contract and includes vaccinations to predominately children aged 4.5 to 18 years with the exception to include ad-hoc protected groups of children and young people at the request of NHS England.

RECOMMENDATIONS

It is recommended that Cabinet

- Endorses the sign up of the new contract and authorises the Director of Public Health to accept the funding allocation as per the contract and criteria for delivery.
- Delegates to the Director of Public Health, in consultation with the Portfolio
 Holder for Health, Wellbeing and Adult Social Care and the Portfolio Holder for
 Children and Education, the responsibility for delivery and implementation of the
 programme.
- 3. Authorises the Assistant Director for Law and Governance (Monitoring Officer) to execute all legal documentation arising.

REASONS FOR DECISION

The World Health Organization (WHO) says "The 2 public health interventions that

have had the greatest impact on the world's health are clean water and vaccines". Vaccination is the most important thing we can do to protect ourselves and our children against ill health and prevent up to 3 million deaths worldwide every year.

The School Based Immunisation Team have been successfully delivering vaccinations to children in North East Lincolnshire for 14 years. In 2017 the team was commended by Care Quality Commission (CQC) on the programme in its entirety, including uptake levels and a programme of safe clinical delivery.

Positive uptake across North East Lincolnshire for the School Based Immunisation Programme is built on well-established and effective working partnerships with a range of partners, as well as listening to the voice of families and children. The new NHS England contract has been designed to enable longer term planning of this service, and accepting this contract would secure the Council's ability to continue protecting the health of as many children as possible and the wider community.

1. BACKGROUND AND ISSUES

- 1.1 NHS England commissions the School Based Immunisation Programme to secure delivery of routine and flu immunisation for eligible school aged children and young people within schools and academies.
- 1.2 In North East Lincolnshire_the School Based Immunisation Programme has been delivered by the School Based Immunisation Team for the past 14 years under historic contract arrangements with NHS England. This was for 2 years as a seconded team and a further 12 years following TUPE into the Local Authority. In January 2023 NELC submitted a response to a new NHS England tender for delivery of this programme and is currently awaiting an outcome decision expected in April 2023.
- 1.3 Historically NHS England contract terms have been for a shorter time period and for separate vaccination programmes. Under this recent NHSE procurement exercise, a new single contract for all vaccinations is offered to providers along with a longer 5 year term and the option to extend for 2 years. This gives providers increased ability to plan, resource and develop their service to maximise uptake.
- 1.4 The School Nursing Immunisation Team consists of 1.8 WTE permanent nurses and 4 casual immunisation nurses and is supported by the wider School Nursing Service. This allows adequate flexibility in response to changes made to the immunisation schedule for children and young people, without having a detrimental impact on the delivery of the immunisations for children and young people, as well as being able to respond to any emergency outbreak as directed by NHS England or Public Health. Their clinical work is promoted and supported at school assemblies as part of wider delivery of School Nursing Services across educational settings.
- 1.5 Currently, the team provides; Human Papilloma Virus (HPV), Diphtheria, Tetanus and Polio (Td/IPV), Meningococcal ACWY (MenACWY), Measles, Mumps and Rubella (MMR) and Flu nasal/intramuscular vaccinations. Historically, the School Nursing Immunisation Team have also increased their vaccination programme, following requests from NHS England to deliver the COVID 12-15 vaccination. The

team were the first service regionally to complete this programme. The team have also expanded the delivery of the influenza (flu) to incorporate additional secondary school young people and 2-3 year olds as part of a wider think family approach to increase overall uptake.

- 1.6 Vaccines teach your immune system how to create antibodies that protect you from diseases. It's much safer for your immune system to learn this through vaccination than by catching the diseases and treating them. Once your immune system knows how to fight a disease, it can often protect you for many years. In addition, having a vaccine also benefits your whole community through "herd immunity". If enough people are vaccinated, it's harder for the disease to spread to those people who cannot have vaccines. For example, people who are ill or have a weakened immune system.
- 1.6 The School Nursing Immunisation Team are one of the areas within Yorkshire and Humber that have consistently high uptake of vaccine programmes. For example, published data for 2020/2021 shows local uptake of the HPV vaccine in Year 8 as 83% for girls and 77% for boys in North East Lincolnshire compared to 76% and 70% respectively for the region and 76% and 71% for England.
- 1.7 As nationally, our region saw a decline in the uptake of the Influenza vaccination programme 20/21 and 21/22 academic year due to the impact of the challenges experienced across England in respect of the coronavirus pandemic, the implementation of electronic consent as directed by NHS England and increased vaccine hesitancy. However, the School Based Immunisation Team has worked hard to improve uptake levels and anticipate these reaching similar levels again in the next year.
- 1.8 The School Nursing Team help to meet the requirements detailed within the School Nursing Service Specification and indicators noted in the Joint Strategic Needs Assessment (JSNA) and the Outcomes Framework under Health Protection.
- 1.9 The new contract has a greater focus on ensuring that all children and young people in the eligible cohorts are able to access an immunisation, which enables the team to continue to further develop clinics and out of school immunisation sessions.

2. RISKS AND OPPORTUNITIES

Risks identified with not accepting this contract are as follows:

- Inability to achieve the School Nursing Immunisation specification as set out by NHS England
- Loss of financial value to School Nursing Service budget
- Loss of highly skilled registered nurses who would TUPE to the new provider
- Reduction in School Nursing staffing levels.
- Potential reduction in uptake across North East Lincolnshire due to new provider not having existing relationships with educational settings and subsequent risk to population Public Health.
- Decrease in herd immunity across the borough

Opportunities for delivery of the new immunisation programme include:

- The tender opportunity is to continue to provide the vaccination programme for a period of 5 years from 1st September 2023 with the option to extend by an additional 2 years. This provides an opportunity to grow and develop the vaccination programme building on an already robust and well delivered programme.
- A consistent holistic approach for our local children and young people to be able to be immunised with the additional support of the School Nursing Team
- Consistent and seamless delivery of the immunisation programme to children and young people locally to meet need, as the service would not require a mobilisation period.
- The service has a current Equality Impact Assessment in place for the delivery of the Immunisation Programme, which confirms that the delivery of the programme is fair and does not present barriers to participation or disadvantage any protected groups from participation.

3. OTHER OPTIONS CONSIDERED

Option One - do not bid

- There was a risk that no other provider submitted a bid, or that another provider wouldn't deliver to the same levels as the current service, risking a drop in vaccination uptake levels.
- The current team not continuing with the service would mean that the substantive staff would transfer to any new provider under TUPE, but the causal staff may not be employed by any new provider. This would also lead to a loss in revenue from the wider School Nursing Team and interoperability of services across the two teams.

Option Two - submit a bid

- This presented an opportunity to continue to deliver a well-established service with one of the best levels of uptake in the region, based on welldeveloped good relationships with schools and other Child health services. Continued revenue into the school nursing team and resilience/interoperability of the team.
- This supported the stability of the current School Based Immunisation Team as well as the School Nursing Team.

Option Three - Submit a hybrid bid with another provider

 This option was complex, as it would likely require additional work to understand any legal requirements as well as contractual responsibilities on multiple providers. It could also require additional work around the HR and finance elements, and contract management.

Decision

Option Two was chosen both for the minimal risks and the opportunity to maintain good relationships with schools and being able to deliver a high uptake in our area.

4. REPUTATION AND COMMUNICATIONS CONSIDERATIONS

The positive reputational implications for the Council will include:

- Opportunity to continue to deliver a well-established service with one of the best levels of uptake in the region, based on well-developed good relationships with schools, academies, GP's and Primary Care settings.
- Continue to deliver a holistic offer to the population groups residing in North East Lincolnshire.
- Offering immunisations in clinics as well as schools, so children who are electively home educated can access this service
- identifying suitable times for schools to release children for their immunisations, to limit the impact on learning and working with the community around vaccine hesitancy.
- Contributing to delivery of an immunisation programme to increase "herd immunity"

There is potential for negative reputational implications for the Council should we not be successful in being awarded the contract, which potentially will include:

- TUPE of existing substantive staff to the new provider
- Losing revenue from the wider School Nursing Team and interoperability of services across the two teams.
- Reputational damage for the Service as the long-standing provider across the borough who is not successful in being awarded the contract.

5. FINANCIAL CONSIDERATIONS

All bids for contracts across the region are currently being reviewed by NHS England therefore it is part of a live procurement at this point in time. As such all information regarding finances is contained within the closed Appendix A.

6. CHILDREN AND YOUNG PEOPLE IMPLICATIONS

This contract will have a positive impact on all children by supporting their health, and so enabling to make the most of opportunities to grow and learn. The Immunisation Team currently deliver vaccinations to children outside of school such as those educated at home, and they work with families around vaccine hesitancy

7. CLIMATE CHANGE AND ENVIRONMENTAL IMPLICATIONS

- 7.1 The bid to NHS England required and will be assessed on service delivery that supports climate and environmental improvements. The School Immunisation Team already deliver their service with these aims in mind, and continually look for further ways to support this agenda.
- 7.2 Currently, the Immunisation team with the School Nursing service actively support the carbon reduction agenda set out by our employer North East Lincolnshire Local Authority. Immunisation sessions are booked in cooperation with Schools but also with the minimum amount of transportation requirements. Any catch up sessions are booked so that they are close to each School again to reduce the amount of additional traveling required. The Immunisation nurses

are local and as such the traveling to the main base and subsequent Schools is minimal. Where possible the Immunisation nurses will car share to reduce the carbon footprint of travelling to an immunisation session. Each School visit is organised in collaboration with the School to maximise the number of young people seen for immunisation at each session, again this reduces the number of visits to Schools made and reducing the carbon emissions of car journeys.

7.3 Consent forms for children and young people to receive their immunisations are online with Schools supporting the contact with parents electronically. This supports the 'NHS Delivering Net zero emissions' agenda with a paper light agenda. However, we are aware that locally we have an issue with digital poverty which impacts on parents/guardians being able to complete the online consent form, and as such we are able to provide paper consent forms for use or take consent via a telephone call as required. This was following a survey completed with Schools who identified which method was best for their school communities to reduce waste and improve immunisation uptake.

8. CONSULTATION WITH SCRUTINY

There has been no consultation with Scrutiny to date, however reports will be considered as part of programme design and delivery

9. FINANCIAL IMPLICATIONS

Financial details of the contract are provided in Appendix A. which is a closed item, as bids for the contract are currently being reviewed by NHS England.

10. LEGAL IMPLICATIONS

The service will work with the legal department as required in accepting and delivering this contract if awarded.

11. HUMAN RESOURCES IMPLICATIONS

If contract not accepted, the current staff of 1.8 WTE nurses would TUPE to the new provider should there be one, and this has been discussed with People and Culture. There is no guarantee that any new provider would employ the 4 casual nurses who are currently part of the School Immunisation Team therefore these contracts would be terminated should we not be successful.

12. WARD IMPLICATIONS

This proposal positively impacts on all wards

13. BACKGROUND PAPERS

There are no background papers

14. CONTACT OFFICER(S)

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