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## Factors affecting uptake of MenACWY vaccination programme in schools: Insights from a London wide study

**Lucy Rumbellow**<sup>1,2</sup>, **Claire Winslade**<sup>1,2</sup>, **Jane Seok**<sup>1,2</sup> and **Catherine Heffernan**<sup>1,2</sup> <sup>1</sup>NHS England, UK <sup>2</sup>Public Health England, UK

Statement of the Problem: In June 2015, a national publicly funded meningococcal ACWY (MenACWY) immunization programme was introduced in the United Kingdom (UK). This was in response to the rapid rise of invasive meningococcal disease caused by the capsular group W (Men W) particularly amongst adolescents (10-18 years) and young adults (19-25 years). The immunization programme is commissioned by NHS England (NHSE) as part of its Section 7a immunization programmes. It is offered as a routine vaccination to adolescents aged 14 or 15 (UK school years 9 or 10) alongside the teenage booster in the school-based vaccination programme. Uptake is low in London compared to national (76% in Year 9 and 63.1% in Year 10 compared to 84.1% and 77.2% nationally in 2016). It is also lower than the HPV programme given in year 8 (85% in 2016). We set out to explore the factors impacting upon good service delivery in order to improve the commissioning of the services and thereby the uptake.

Methodology &Theoretical Orientation: The study design was two-fold. In May 2015, we surveyed our 18 school aged vaccination provider organizations (which cover 32 boroughs and a population of over 1,500,000 school age children) to assess their preparedness for delivery of the MenACWY immunization programme. Five barriers to successful implementation were anticipated: consent forms not being returned; staff capacity; lack of administrative staff; lack of finances and; increasing volume of child flu vaccine delivery. We resurveyed our providers (now reduced to 11 organizations) in July 2017 to see if the same barriers remained and used the survey as a purposive sampling frame for in-depth interviews to explore the facilitators and barriers to MenACWY uptake in schools.

**Findings:** All anticipated barriers remained to good delivery. Six representatives from six organizations agreed to be interviewed. Five main themes emerged from the thematic analysis: people largely accepting but; lack of school support and engagement; poor return of paper consent forms; parents not understanding that MenACWY is different to Men C given to infants and; school delivery impedes meaningful engagement with adolescents.

Conclusion & Significance: MenACWY are a well-accepted vaccine yet reported uptake is lower than expected in London. Delivery of the programme is affected by the mechanics of school based delivery including poor return of paper consent forms. Normalizing of school aged vaccination programmes is needed including building relationships with school staff and the wider school community and utilizing digital consent forms and other forms of communication.

## **Biography**

Lucy Rumbellow is an Immunization Commissioning Manager at NHS England (London Region), England. She has over 10 years' experience working in public health, health and well-being and is a registered public health practitioner on the UK public health register.

lucy.rumbellow@nhs.net

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