

Communications Toolkit

Promotion of uptake of childhood vaccination programmes

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1 Background

1.1 [World Health Organisation Immunisation Awareness Week](#) runs from 24 to 29 April. To coincide, NHS England South requests support from across health and care networks in the delivery of a campaign to promote the uptake of childhood vaccinations.

1.2 Childhood vaccinations cover the range of vaccinations delivered from at around 8 weeks old up to when the child first goes to school at 5 years old. The full range of these vaccinations is described in the [vaccination schedule](#).

1.3 **All the resources for this campaign are [downloadable from our website here](#).**

2 Vaccine coverage data

2.1 NHS England's national performance standard is 95% coverage of the eligible population, with 90% the minimum preferred coverage. Reaching this minimum level of immunity not only helps the individual, but creates "herd immunity", preventing the incidences of infections which in turn protects those who for whatever reason may not to be able to be vaccinated and are therefore vulnerable.

2.3 For the purposes of this campaign, to inform targeting of activity and for use in messaging etc we will use a snapshot of data for two of the vaccinations given, which give a good indication of childhood vaccination performance at the point they would be first starting school, broken down by a local authority area:

- 4-in-1 Pre-school booster: Diphtheria, tetanus, pertussis (whooping cough), polio – percentage coverage of those at 5 years old
- Measles, Mumps, Rubella second dose – percentage coverage of those at 5 years old

2.6 While not a complete data-set of every single childhood vaccination programme, these provide enough of a clear indication as to areas of poor performance and to help "sell" the story in to local media without too many complicated statistics. This data is also publically-releasable. See **Appendix 1, which contains data for the 2016 calendar year**.

3 Disease prevalence

3.1 Prevalence of infections is another useful metric to describe to the public/media the levels of risk and seriousness of such illnesses. Data for the numbers of notified suspected cases of measles, mumps and rubella are provided and can be used publically to help demonstrate that these diseases are still in circulation and pose a risk. See **Appendix 2**.

4 Timing / key milestones

4.1 World Health Organisation Immunisation Week commences on **Monday 24 April and runs until Sunday 29 April**. All media / social media activity will be scheduled this week.

4.2 The campaign will launch on Monday 24 April and will run for the course of that week. As such, using the resources during that week will help increase the impact. **However, you are encouraged to continue using them and helping to raise awareness beyond the course of the campaign week wherever possible.**

5 Campaign objectives

- Raise awareness of the importance of childhood vaccination in **parents/carers and wider family members**
- Raise awareness of the importance of childhood vaccination in **health and care professionals**, enabling them to encourage parents/carers to vaccinate their child
- Raise awareness of the importance of childhood vaccination in **education and childcare professionals**, enabling them to encourage parents/carers to vaccinate their child
- Effectively **notify stakeholders – particularly GPs** - in advance to enable their operational readiness and support for the campaign
- **Engage key partnership organisations** in the campaign, gaining their advocacy of messaging and support in campaign delivery
- Generate region-wide **media and social media outputs**, with high reach and engagement in support of our campaign messaging
- **Inform our internal staff audiences** as to the importance of childhood vaccination and encourage them to promote the campaign with their family and friends.

6 Campaign key messages

6.1 This toolkit has been developed to deliver the following key messages:

- **Highly infectious diseases and potentially fatal diseases such as measles, mumps and diphtheria are still in circulation – if not vaccinated, your child is at risk**
- **Not vaccinating your child puts them at risk. Vaccination protects children for life from a range of highly infectious and potentially deadly diseases. Speak to your GP to ensure your child is protected**
- **A child must receive a number of doses of some vaccines to be fully protected. It is important to complete the vaccinations at the right times or your child may be vulnerable**
- **It is particularly important to ensure your child has the right vaccinations before they start school, when they come into contact with more potential sources of infection**
- **The reason some diseases have become rarer is because of the success of vaccination programmes. They can still come back and spread rapidly if people are not vaccinated**

- To help stop infectious diseases spreading, at least 90% of the local population need to be properly vaccinated
- Some vulnerable people – particularly sick children – cannot be vaccinated. They are put at risk if others around them have not been vaccinated as disease can be spread and they are less able to fight it
- The full [vaccination schedule is available](#). If in doubt, speak to your GP to check your child has had the right vaccinations and is protected
- Vaccines are thoroughly tested for safety and are continually monitored after they are introduced.

7 Messaging for health and care professionals

7.1 Partners are asked to utilise their local channels to reach health and care professionals, making them aware of the campaign, its messages and resources and requesting their support

- GP practices will be written to by NHS England, making them aware of the campaign, enabling them to prepare accordingly for the potential increase in enquiries and demand for vaccinations, and asked to support the campaign wherever possible - asked to raise awareness of the importance of vaccination and the risks to the child and the wider public if not vaccinated.
- Health Visitors and maternity service staff are to be made aware of the campaign and encouraged to support the campaign wherever possible with those they come into contact with - asked to raise awareness of the importance of vaccination and the risks to the child and the wider public if not vaccinated
- Where appropriate, health professionals are advised to use correct codings when recording vaccination administrations so as to support more accurate coverage data

8 Reaching education and childcare organisations

8.1 A key partner to assist in delivering messaging to parents will be local authority Child, Education and Family Services departments. Opportunities to be explored will include:

- Send information on the campaign and its messaging to childcare and education facilities – including schools, nurseries, children centres, parent & toddler groups, etc
- Send information on the campaign and its messaging to child minders, nannies and au-pairs
- All education/childcare organisations to share the pre-written letter to parents
- Work with individual organisations to promote the messaging through their channels – in particular social media and websites.

9 Other key partnership activity

9.1 We will seek the participation of the following key partners in the campaign, providing them with the communications toolkit and supporting guidance to encourage their support:

- Local authority Directors of Public Health and wider teams
- Elected representatives – local MPs and councillors holding a health/education brief
- Charitable organisations – particularly those representing more vulnerable groups such as the Teenage Cancer Trust and Children with Cancer UK
- Parent advice and support websites/forums etc – i.e. MumsNet
- Teaching / childminding professional website/forums – i.e. TES forum
- All internal communications channels to staff groups

10 Proactive media

10.1 NHS England South – in partnership with Public Health England - will issue a press notice through each of its four local office areas, utilising local spokespeople and including localised data. The press notice will be issued on Friday 21 April under embargo for Monday 24 April, with broadcast interviews offered with spokespeople across the course of the week.

10.2 Local authority partners can support the campaign by contributing quotes (Directors of Public Health may be most appropriate) to these local press releases.

11 Twitter / Facebook

11.1 In support of the campaign timing, running across 24 – 29 April, NHS England South's Twitter account [@NHSEnglandSouth](https://twitter.com/NHSEnglandSouth) has scheduled tweets in line with campaign messaging.

11.2 If you would prefer to retweet our content rather than share your own, you can follow and retweet us via [@NHSEnglandSouth](https://twitter.com/NHSEnglandSouth)

11.3 It is important to use the hashtag **#KidsJabs** with any Twitter or Facebook activity to enable us to monitor activity.

11.4 A Twitter / Facebook graphic has been produced to be used as an image, with key messages inserted into the Tweet or Facebook post. Ensure you use **#KidsJabs**

11.5 The A5 leaflet can be shared on Twitter. Please hashtag all Twitter messages with **#KidsJabs**. If you would prefer to retweet our content rather than share your own, you can follow and retweet us via [@NHSEnglandSouth](https://twitter.com/NHSEnglandSouth)

11.6 All social media resources are [downloadable from our website here.](#)

11.6 Pre-scripted Twitter messages are as follows:

- Vaccination protects children from a range of highly infectious and potentially deadly diseases. Ensure your child is protected. #KidsJabs
- Children need the right vaccinations before starting school, as they come in contact with more potential sources of infection #KidsJabs
- Highly infectious and potentially fatal diseases such as measles are still in circulation – if not vaccinated, your child is at risk #KidsJabs
- If in doubt, speak to your GP to check your child has had the right vaccinations and is protected <http://www.nhs.uk/Conditions/vaccinations/Pages/childhood-vaccination-schedule.aspx> #KidsJabs
- A child needs a number of doses of some vaccines to be fully protected <http://ow.ly/j7TF30aJdIK> #KidsJabs #VaccinesWork
- These are the routine vaccinations that are offered for free on the NHS to all babies and kids in the UK <http://www.nhs.uk/Conditions/vaccinations/Pages/childhood-vaccination-schedule.aspx> #KidsJabs
- Studies show that vaccines don't overload a child's immune system. Watch this animation to find out why <http://ow.ly/P7na30aJgWN> #KidsJabs
- To help stop infectious diseases spreading, at least 90% of the population need to be properly vaccinated <http://www.nhs.uk/Conditions/vaccinations/Pages/reasons-to-have-your-child-vaccinated.aspx> #KidsJabs
- Check out these common vaccination myths and facts! <http://ow.ly/drl230aJjsw> #KidsJabs #VaccinesWork
- Some diseases are now rare because of the success of vaccination programmes but can still come back and spread if people are not vaccinated.
- All medicines have side effects but vaccines are among the safest and the benefits far outweigh any risks <http://www.nhs.uk/Conditions/vaccinations/Pages/benefits-and-risks.aspx> #KidsJabs
- All vaccines are thoroughly tested for safety and are continually monitored after they are introduced #KidsJabs
- Because of vaccinations, we no longer see smallpox, and polio has almost been eradicated <http://www.nhs.uk/Conditions/vaccinations/Pages/vaccination-saves-lives.aspx> #KidsJabs
- Some vulnerable people (particularly sick children) can't be vaccinated. They are put at risk if others around them haven't been vaccinated #KidsJabs

12 Website / Digital resources

12.1 Partners are encouraged to ensure that information on the campaign and the messaging is available on websites and is used in any newsletters / communications. In addition to the key messages as above, the following resources are [downloadable here](#):

- Image/logo for use in newsletters and for use on websites etc
- Article copy for use in newsletters and on websites (see below)
- Videos for use in Twitter, Facebook and on websites – links as follows:
 - **Vaccinations part 1:** An animation explaining how vaccination works to help prevent and eventually eradicate diseases:
<http://www.nhs.uk/Video/Pages/vaccinationanimation.aspx>
 - **Vaccinations part 2:** An animation explaining how vaccination works to help prevent and eventually eradicate diseases:
<http://www.nhs.uk/Video/Pages/Vaccinationanimation2.aspx>
 - **Measles: Rachel's story:** Mum Rachel recounts how he she decided not to vaccinate her child Lola, who went on to contract a various serious Measles infection. Following a period of time in hospital in a critical condition, she recovered but has been left with serious and lasting health problems:
<http://www.nhs.uk/video/Pages/measles-rachel.aspx>
 - **Vaccinations don't overload a child:**
<http://www.nhs.uk/video/Pages/vaccines-and-your-childs-immune-system.aspx>

Newsletter/website/internal news article copy – this can be amended as required:

Is your child protected? New campaign reminds parents of the importance of childhood vaccinations

This week it is World Immunisation Awareness Week, and the NHS is reminding parents and carers of the importance of vaccinating their child against a host of serious diseases.

The vaccination jabs which children receive in their early years – between birth and when they first go to school – are very important in helping them build protection against infections such as meningitis, diphtheria, polio, measles and mumps.

These diseases are in circulation and an infection can cause serious complications, particularly for a child. But it is not only the child who is protected, vaccination programmes protect the whole population by making it harder for a disease to spread to others.

It is particularly important that children are fully up-to-date with all their jabs before they start school for the first time, which is when they come into contact with more potential sources of infection.

The vast majority of parents do ensure their child has been fully protected, but there are many children who are missing doses and are therefore at risk.

More information is available on the [NHS Choices website](#), and if in any doubt that your child is missing important vaccinations you should speak to your GP.

Play your part and help spread the message to family and friends and help to ensure children are fully protected.

Local authority (by NHS England local office areas)	Total eligible children in 2016	Total children vaccinated with both doses MMR	Total children not vaccinated with both doses MMR	% uptake of both doses MMR	Total children vaccinated with 4-in-1 pre-school booster	Total children not vaccinated with 4-in-1 pre-school booster	% uptake of 4-in-1 pre-school booster
Bath and North East Somerset	2057	1918	139	93	1884	173	92
Bracknell Forest	2163	1947	216	90	1943	220	90
Buckinghamshire	5485	5156	329	94	5160	325	94
Gloucestershire	6674	5798	876	87	5498	1176	82
Oxfordshire	6145	5714	431	93	5733	412	93
Reading	3064	2694	370	88	2535	529	83
Slough	2792	2230	562	80	2199	593	79
Swindon	3155	2922	233	93	2876	279	91
West Berkshire	1956	1802	154	92	1784	172	91
Wiltshire	5889	5396	493	92	5386	503	91
Windsor and Maidenhead	2077	1743	334	84	1715	362	83
Wokingham	1930	1721	209	89	1768	162	92
Bournemouth	1952	1733	219	89	1621	331	83
Dorset	3433	3203	230	93	3196	237	93
Hampshire	16832	14898	1934	89	14949	1883	89
Isle of Wight	1405	1187	218	84	1169	236	83
Poole	1455	1328	127	91	1341	114	92
Portsmouth	2595	2352	243	91	2284	311	88
Southampton	3447	3162	285	92	2927	520	85
Brighton and Hove	3075	2520	555	82	2326	749	76
East Sussex	5938	5213	725	88	5176	762	87
Kent	19089	16425	2664	86	15901	3188	83
Medway	3936	3276	660	83	3088	848	78
Surrey	12281	9375	2906	76	9088	3193	74
West Sussex	9053	7744	1309	86	7372	1681	81
Bristol	6213	5397	816	87	5529	684	89
Cornwall	6218	5649	569	91	5633	585	91
Devon	8223	7504	719	91	6864	1359	83
Isles of Scilly	16	16	0	100	16	0	100
North Somerset	2546	2257	289	89	2302	244	90
Plymouth	3206	2923	283	91	2902	304	91
Somerset	6269	5632	503	90	5830	439	93
South Gloucestershire	3371	3078	293	91	3132	239	93
Torbay	1540	1415	125	92	1334	206	87

[Data source - COVER](#)

Notes: Eligible children turning five years old throughout 2016. A child may be counted in both MMR and pre-school booster vaccine columns so these should not be totalled together.

Key: A minimum of 90% of a local population need to have been vaccinated to create “herd immunity” to prevent outbreaks spreading. Cells highlighted red show those beneath that minimum target.

Counts of notifications of Measles, Mumps, Rubella and Whooping cough, with notification date between 01/04/2016 and 31/03/2017, in residents of PHE South Region, by Upper tier local authority.

Upper Tier Local Authority	Measles	Mumps	Rubella	Whooping cough
Bath and North East Somerset	2	19	1	12
Bournemouth	4	11	1	14
Bracknell Forest	2	9	0	4
Brighton and Hove	9	22	1	43
Bristol, City of	9	53	1	27
Buckinghamshire	11	40	5	28
Cornwall	6	53	5	44
Devon	40	154	2	59
Dorset	9	39	6	29
East Sussex	11	32	8	79
Gloucestershire	7	33	3	39
Hampshire	23	225	14	191
Isle of Wight	0	12	1	3
Isles of Scilly	0	0	0	0
Kent	54	138	8	90
Medway	10	23	1	8
North Somerset	1	11	0	8
Oxfordshire	8	90	4	66
Plymouth	4	33	0	15
Poole	0	9	2	1
Portsmouth	8	14	3	2
Reading	0	15	1	3
Slough	2	4	1	0
Somerset	14	57	0	46
South Gloucestershire	6	22	0	6
Southampton	2	34	0	21
Surrey	23	119	4	176
Swindon	2	19	3	7
Torbay	8	17	0	9
West Berkshire	2	14	1	2
West Sussex	14	54	2	71
Wiltshire	4	38	1	22
Windsor and Maidenhead	5	13	1	4
Wokingham	0	10	0	7
South Region Total	300	1436	80	1136

Data Source: PHE Notifications of Infectious Diseases (NOIDs)