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Dear Laura

During the question for short debate on Vaccinations and Health Screening Services on Tuesday 14 May, you were concerned about training for midwives and health visitors and asked what the Government is doing to ensure that health visitors and midwives have the training, confidence and space in their consultations with parents to press the need for maternal immunisations. I am sorry that I was unable to respond to you at the time and I promised to write to you.

Health visitors, as leaders of the 'Healthy Child Programme', provide evidence-based information about immunisations during their conversations with parents. As part of the universal service offer, health visitors work with other professionals including midwives and general practice nurses to ensure parents are aware of the immunisations that are available.

Training is the responsibility of the provider organisation to ensure they have competent and capable staff. To support this, Public Health England (PHE) have published immunisation training standards<sup>1</sup> which set out a recommended minimum framework for training to meet the needs of all registered healthcare practitioners with a role in immunisation. This includes guidance for training nurses so that they are able to be clear and confident in discussing the risks and benefits of vaccination, including addressing any concerns that patients, parents or carers may have. In addition, NHS England will shortly pilot an assurance process for training providers to improve the quality and provision of training for registered healthcare practitioners.

In terms of the midwifery services themselves, NHS England, as part of the public health functions agreement, commissions whooping cough and flu immunisations for pregnant women. This forms part of the GP contract enhanced services, and part of community pharmacy services for flu. For timely access to these immunisations, NHS England have worked with provider organisations to commission the vast majority of midwifery service to also offer the immunisations, within the antenatal care pathway.

You also raised a query with regards to systems in place to help parents navigate services and remind them of what vaccinations are due. To this end, the majority of GP contracted immunisation

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<sup>1</sup> Available from: <https://www.gov.uk/government/publications/national-minimum-standards-and-core-curriculum-for-immunisation-training-for-registered-healthcare-practitioners>

services offered to children have a call/ recall element, whereby the practice has responsibility to contact parents directly (e.g. letter, text etc.) informing that their child is eligible and offering them an appointment for the immunisations. In addition, the Child Health Information's services (CHIS) including the systems supplier element has a minimum core function to provide a failsafe mechanism to identify children (to in effect list those) that are eligible/ remain eligible for vaccination, which they share routinely with GP practice. In many areas CHIS working with GP practice provide an enhanced service offering and slotting patients into GP immunisation appointments.

Information about the childhood vaccination programme is delivered by PHE's Start4Life programme via the Information Service for Parents (ISP) email program me, on the website and social media channels. The ISP emails include vaccine messaging in week 5, week 7, week 11, week 14, 11 months, 12 months, 38 months and four years on the childhood vaccination programme. This compliments further communications campaigns such as radio advertising, print leaflets in antenatal clinics, and working with various providers of pregnancy applications such as Bounty and Emma's Diary to ensure that the up to date routine immunisation information is provided to their users.

We are, however, aware that in some areas these reminder services do not function as well as they should. That is why the NHS Long Term Plan and Investment and Evolution: a five-year framework for GP contract reform announced a review of vaccinations and immunisation standards, funding and outcomes in 2019. This review has recently started and any proposals for change will be taken into consideration for the annual GP contract negotiations, for implementation from April 2020 onwards. The purpose of the review is to explore how to reduce the complexity of the current arrangements, improve value and increase impact and uptake.

Keeping uptake rates as high as possible is one of our top priorities and we will continually seek to improve our screening and immunisation services, seeking advice from experts and taking proactive action as necessary.

I hope that this letter goes some way to addressing your concerns. I will also place a copy in the House library.

With very best wishes

*Baroness*

**BARONESS BARRAN**

Baroness Wyld  
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