

Title	Measles situational report and preparedness update
Audience	Hackney Councillors and Senior Leadership
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1. BRIEFING PURPOSE AND OVERVIEW

1.1. This briefing aims to provide:

- An [overview of the national, regional](#) and [local measles risk](#)
- [Support answering questions from the media and the public on this topic](#)
- [An overview of the preparedness work being undertaken locally](#)

2. NATIONAL AND REGIONAL UPDATE

- 2.1. Measles cases have been rising with a national incident recently announced after an outbreak of over 200 cases in the West Midlands. Latest published data for London shows that from 1 January to 30 November 2023, there were 209 laboratory confirmed measles cases in England with 104 cases in London (50%).
- 2.2. The majority of London's measles cases have been in children aged under 10 years.
- 2.3. There is a high risk of measles outbreaks in London as it is the region with the lowest vaccination coverage. In London, 87% of 5 year olds have had their first dose of the MMR vaccine, and 74% are fully immunised, compared to 93% and 84.5% respectively for England.
- 2.4. A [risk assessment](#) by the UKHSA, published in July 2023, estimated that a measles outbreak of between 40,000 and 160,000 cases could occur in the capital.

3. LOCAL PICTURE

- 3.1. There are currently no cases of measles in Hackney.
- 3.2. However, Hackney remains particularly vulnerable to large outbreaks of measles due to low MMR vaccination coverage. Hackney has the lowest MMR coverage in the country.
- 3.3. Data from 2022/23 showed that, in City & Hackney, 81% of 5 year olds had their first dose of the MMR vaccine and 56% were fully immunised.
- 3.4. Hackney's low immunisation coverage can be, at least in part, explained by population factors. Population groups that have lower vaccination uptake levels

compared to the general population include those living in the most deprived areas; those with large families; certain ethnic groups for example, Black Caribbean, Somali, White Irish and White Polish populations, and Orthodox Jewish populations. Uptake also tends to be lower in more urban areas.

4. RESPONDING TO MEDIA ENQUIRIES AND QUESTIONS FROM THE PUBLIC

4.1. Key messages to the public

- Measles is a serious illness; between 20 and 40% of affected cases can require hospital admission. In rare cases, tragically, measles can be fatal.
- Babies and young children, pregnant women, and people with weakened immunity, are at increased risk of complications from measles.
- Measles spreads very easily between those that are unvaccinated, especially in schools and nurseries.
- The principal control measure for measles outbreaks is vaccination (there is no specific treatment).
- Two doses of MMR vaccine will offer over 99% lifelong protection.
- Hackney remains particularly vulnerable to large outbreaks of measles due to low MMR vaccination coverage.

4.2. Key messages about the MMR vaccine

- MMR is a highly effective and safe vaccine. Children should receive 2 doses of MMR for maximum protection. The vaccine not only protects them, but also limits the chances of the virus spreading more widely, for example to children who are too young to have the vaccine and to adults who may be more vulnerable to the disease.
- The MMR vaccine is part of the routine NHS schedule of childhood vaccines administered:
 - 1st dose just after the child's first birthday
 - 2nd dose at 3 years 4 months and certainly before children start school full time
- Parents should check their children are fully vaccinated with 2 MMR doses, by checking their red book or with their GP practice. Younger and older adults can also do this. Anyone not up-to-date with their vaccines should make an appointment with their GP as soon as possible.
- Animal-product free / porcine-free vaccines are available on request.
- The following quote from Rabbi Ardler provides reassurance that childhood immunisations are kosher: *"I confirm that there are no kashrus problems with vaccines administered either orally or by injection or nasal spray even if they have a porcine element. I hope this information will be of assistance in reassuring the community and promoting uptake of vaccines."* Rabbi Ardler

4.3. Media enquiries

- Hackney Council Press Team has been receiving an extremely high number of measles-related enquiries from the media. These have mostly been directed towards the Director of Public Health, although other system partners have been receiving similar, if not duplicative, enquiries, as have teams in

other local authorities. To enable consistent and efficient responses to these enquiries, we have prepared some [reactive media responses](#) to the most common lines of enquiry.

5. OVERVIEW OF LOCAL ACTIVITY TO PREPARE FOR OUTBREAKS

- 5.1. Preparation for outbreaks largely consists of two elements:
- Increasing MMR coverage, with a particular focus on population groups with the lowest uptake
 - Supporting local settings and system partners to prepare

Preparedness work to increase vaccine coverage

- 5.2. The responsibility for commissioning and delivering vaccination programmes lies with the NHS, however, public health works with NHS, local GPs and community partners to increase, and reduce inequalities in, vaccination coverage. Activities include:
- Developing and maintaining communication channels and trust with population / community groups with lower MMR coverage including the Charedi community, Gypsy, Roma Traveller community and through the Hackney Faith Forum.
 - Working with the above communities to understand barriers to vaccine uptake and co-produce communication materials as well as initiatives to address uptake barriers.
 - Providing key updates and resources via our City and Hackney Public Health Community Champions programme via regular forums and newsletters.
 - Support improved access to vaccines for example through home visits, delivering vaccines through schools, nurseries and within community settings.
 - Work with the council communications team to develop targeted comms assets to be regularly disseminated through a wide range of channels.

Preparedness work to support local settings

- 5.3. Settings that are particularly vulnerable to measles outbreaks include;
- Schools and early years settings
 - Asylum seeker accommodation
 - Homeless accommodation
 - Healthcare settings (i.e. A&Es and GP practices)
- 5.4. Public health has delivered targeted presentations and developed resources to support these settings to understand the risk of measles locally, how to reduce the risk of outbreaks within their setting, what to do if cases are identified in the setting and how to reduce the risk of spread.

Preparedness work through system coordination

- 5.5. Supporting system partners (including health visitors, school nurses, staff working in children centres, nurseries and schools) to encourage vaccination uptake through a MECC approach. We convene system partners to facilitate the delivery of consistent messaging and a coordinated approach.
- 5.6. Collaborating closely with Primary Care and immunisations colleagues across NEL & region to share up-to-date resources and guidance.
- 5.7. Surveillance of local data and sharing this with relevant partners. Advocating for better data access to support for granular analyses.