



Human Papillomavirus (HPV) vaccination coverage in adolescent females in England: 2015/16

Main findings

- 2015/16 is the first year HPV vaccine coverage for the two-dose schedule has been calculated in school Year 9 females in England
- 85.1% of Year 9 females completed the two-dose HPV vaccination course, compared to 86.7% completing a three-dose course in 2013/14
- HPV vaccine coverage for the priming dose was 87.0% in Year 8 females in 2015/16, 2.4% lower than priming dose coverage in 2014/15
- 85/152 (56%) local authorities offered two doses of HPV vaccine in all schools within the 2015/16 school year and the completed course coverage for these areas ranged from 47.4% to 93.8%
- During the 2015/16 academic year, the commitment to deliver on the childhood flu vaccine programme (extended to school years 1 and 2), school leaver booster programme (diphtheria/tetanus/polio vaccine), and the MenACWY routine and catch-up programme may have impacted on the capacity of school immunisation providers to deliver the HPV vaccination programme in some areas

Summary

Annual coverage for the first year (2014/15) of the two-dose HPV vaccine schedule was published in December 2015 and provided national data for the priming dose offered to Year 8 females only. This report presents annual HPV vaccine coverage data in England for the second year of the two dose schedule, in school year 2015/16. Full data tables are available by NHS England local team (LT), former area team (AT) for trend analysis, and by local authority (LA). UK HPV coverage data by country is also tabulated.

HPV immunisation coverage for the priming dose in Year 8 in 2015/16 was 87.0%, compared with 89.4% in 2014/15. Only one former area team (Thames Valley) achieved higher priming dose coverage in 2015/16 compared to 2013/14, the last year when there were three doses routinely offered to all females in school year 8 (Figure 1). Five of 13 NHS England local teams, six former area teams, and 54 of 152 local authorities achieved over 90% coverage for the priming dose in Year 8 females. Year 8 local authority coverage for at least one dose ranged from 68.4% to 100%.

HPV vaccine coverage in England for females completing a two-dose HPV schedule by school year 9 was 85.1%, compared to 86.7% of school year 8 females completing a three-dose course in 2013/14. Nine of 25 former area teams had higher completed course coverage in 2015/16 compared to 2013/14 (Figure 2). One NHS England local team (Wessex), three former area teams and 43 local authorities across England achieved over 90% two-dose coverage in Year 9 females. Year 9 local authority two-dose coverage across England ranged from 43.7% to 99.1%.

In England, for operational purposes, the recommendation from September 2014 was to offer the first (priming) HPV vaccine dose to females in Year 8 and the second dose 12 months later in Year 9 (aged 13 to 14 years), as this would reduce the number of immunisation sessions required in schools. However some local areas have scheduled the second dose from six months after the first and offered both doses in the same school year. A total of 85 local authorities offered two doses of HPV vaccine to the routine cohort, school Year 8, in 2015/16 (compared to 86 in 2014/15), and coverage for completed courses in these local authorities ranged from 47.4% to 93.8%.

Figure 1. Dose one (priming) HPV vaccine coverage by former NHS England Area Team for the routine cohort (Year 8) in academic years 2013/14, 2014/15 and 2015/16: England

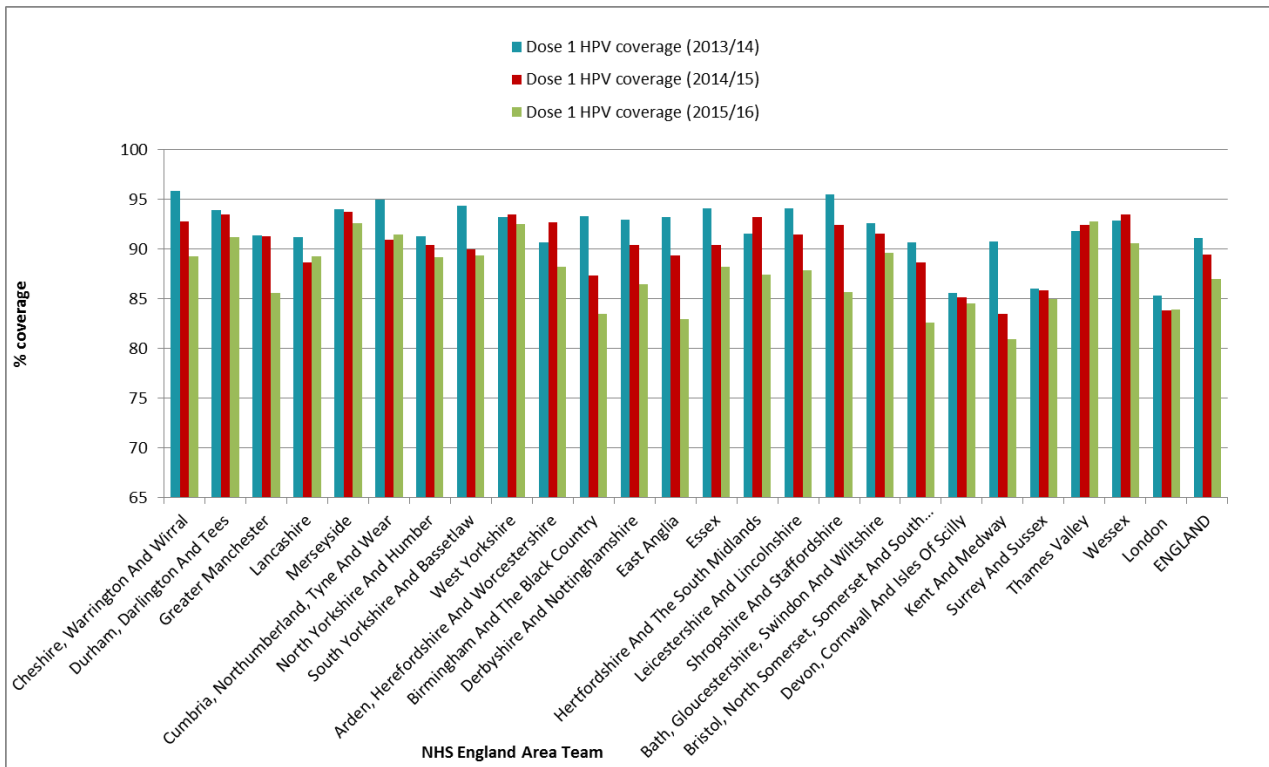
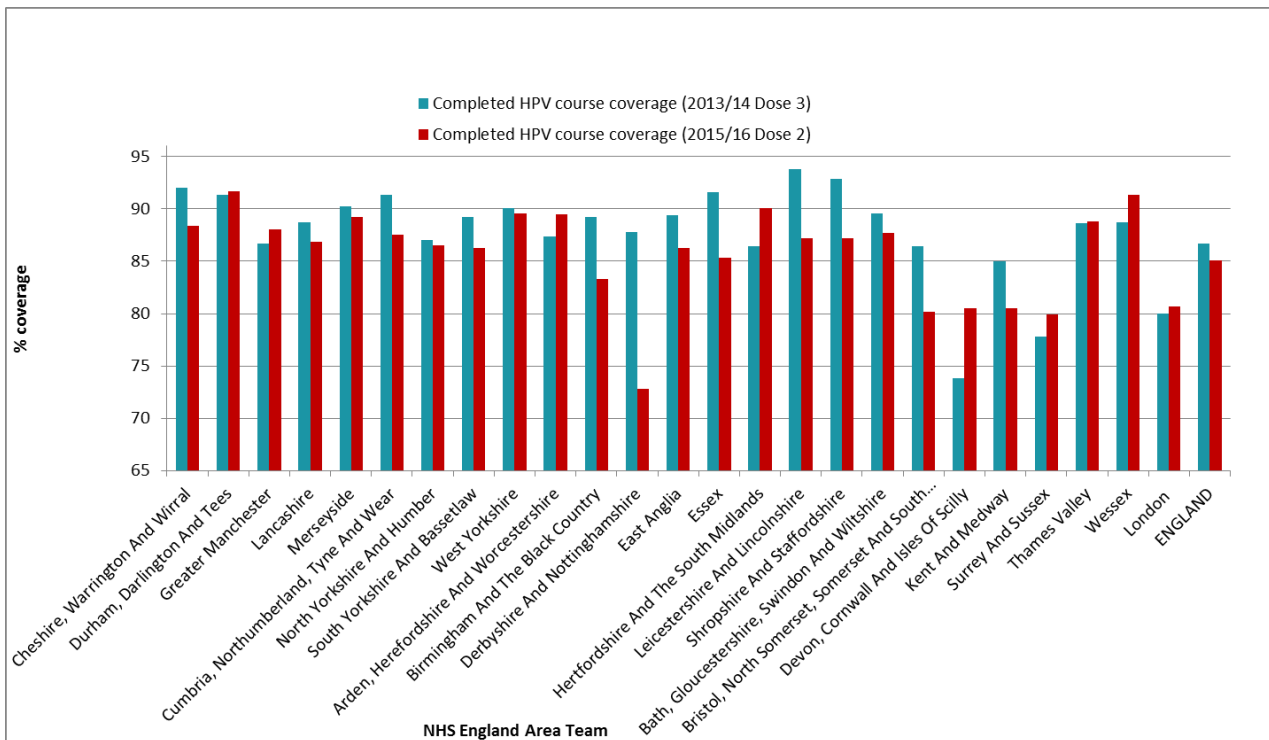


Figure 2. HPV vaccine coverage for completed courses by former NHS England Area Team in 2013/14 (three doses in Year 8) and 2015/16 (two doses by Year 9, administered in 2014/15 and 2015/16): England



Note for Figure 2: Completed course coverage data are not available for 2014/15 due to the change in the delivery model as described above. Therefore, completed course coverage for schoolgirls who started their course in Year 8 in 2014/15 is reported at 2015/16

Background

Methods and previous data collections

Full details of the cohort definitions and methodology can be found in the [user guide](#) for data providers on submitting HPV vaccine coverage data for the 2015/16 academic year.

[Historical annual HPV vaccine coverage reports](#) from 2008/09 to 2014/15 and associated data tables can be found on the PHE website.

Factors affecting HPV vaccine coverage estimates in 2015/16

- Coverage of the completed course may be under-estimated as ‘mop-up’ vaccinations given in GP practices are not included in the returns for some LAs
- Coverage (of one and/or two doses) may be over-estimated in some LAs due to movements of students in and out of schools during the academic year not being accurately reflected in the denominators and/or numerators for some LA returns
- The change from a three to a two-dose schedule has resulted in fewer opportunities to offer in-year mop-up to those girls who miss out on a vaccine dose
- When delivering the three-dose course (2008/09 to 2013/14) providers returned to all schools approximately one month after the first clinic (to administer the second dose) and were more easily able to ‘mop up’ any missed first doses promptly. In areas where only the first HPV dose is delivered in Year 8 providers may now only be able to offer HPV mop-up during sessions to deliver the other teenage programmes at the school
- The commitment to deliver on the childhood flu immunisation programme (extended to school years 1 and 2 from 2015/16), school leaver booster programme (Td/IPV vaccine), and the MenACWY routine and catch-up programme (from 2015/16) may have impacted on the capacity of school immunisation providers to deliver the HPV programme
- Some areas have changed providers during the two academic years (2014/15 and 2015/16) which are covered by this survey. This may have temporarily impacted on the delivery of the HPV programme
- Many areas have planned catch-up activities for the 2016/17 academic year to address cancelled school sessions or missed doses in the 2015/16 academic year. It is expected that coverage for the 2015/16 Year 9 cohort will increase during 2016/17 and final coverage for this cohort (Year 10 in 2016/17) will be collected as part of the 2016/17 annual collection

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