Public Health England

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Quarterly vaccination coverage statistics for children aged up to 5 years in the UK (COVER programme): October to December 2020

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Contents

Introduction

This report summarises UK quarterly vaccine coverage data for each routine childhood vaccination for children who reached their first, second, or fifth birthday during the evaluation quarter. Analyses are presented at NHS England local team (April 2018 configuration) and devolved administration levels only.

Third quarterly report for 2020/21: main points

Key points from the report include:

- 12-month UK and country-level coverage for all antigens evaluated at the first birthday decreased when compared to the previous quarter
- UK DTaP/IPV/Hib/HepB3 coverage decreased by 0.5% to 92.1%, PCV2 by 1.6% to 91.3%, MenB2 by 0.7% to 92.4% and Rotavirus by 0.6% to 90.3%.
- at the country-level, Scotland achieved at least 96% coverage for all antigens at 12 months except rotavirus, in Wales coverage was at least 95% and in Northern Ireland at least 93%
- in England, 12-month coverage DTaP/IPV/Hib/HepB3 decreased by 0.6% to 91.5%, PCV2 by 1.8% to 90.6%, Rotavirus by 0.5% to 89.9% and MenB by 0.6% to 91.9% when compared to the previous quarter
- the introduction of social distancing in response to the COVID-19 pandemic from late March 2020, when some of this cohort would have been scheduled for completing doses of these vaccines, may have contributed to these modest decreases
- the larger 1.6% decrease for UK PCV2 coverage and observed across all countries, is mostly attributable to the changed PCV vaccine schedule from two- to one-dose for babies born on or after 1 January 2020 and probably underestimates completed PCV courses. Although the 12-month cohort evaluated this quarter were all born before 1 January 2020, and therefore would have been scheduled for 2 doses by the CHIS/GP systems, children starting their PCV vaccine course late and received their first dose after 1 January 2020 aged at least 12 weeks, would not need a second dose
- from next quarter (January to March 2021), only PCV1 coverage estimates will be used for reporting 12-month PCV coverage estimates
- 24-month UK vaccine coverage estimates for all four vaccines offered on or after the first birthday decreased 0.1% to 0.4% when compared to the previous quarter
- at country level, Scotland was the only country to achieve 95% for all the vaccines offered from the first birthday; in Wales coverage exceeded 94% and in Northern Ireland it exceeded 92%

- in England, coverage for MMR1, PCV booster and Hib/MenC booster was 90.3%, between 0.3% and 0.5% lower when compared to the previous quarter. MenB booster decreased 0.2% to 89.3%
- data for the 24-month cohort presented in this report largely reflects vaccines administered prior to early 2020, before the COVID-19 pandemic started. However, children who missed some of their routine immunisations and otherwise may have caught up by the second birthday, may have been impacted by the lockdown and/or local restrictions from late March 2020 onwards. This could be a contributing factor to the observed decreases in coverage for some vaccines in some areas presented in this quarter
- at 5 years the 95% target was achieved for DTaP/IPV/Hib3 in all UK countries and for MMR1 and Hib/MenC booster in Scotland, Wales and Northern Ireland.
- in England, MMR1 and HibMenC booster coverage decreased by 0.1% to 94.3% and to 92.6% respectively
- coverage at 5 years for these vaccines primarily reflects vaccinations delivered 4 years ago
- UK coverage for MMR2 increased 0.1% to 87.5% and the pre-school booster (DTaP/IPV) decreased 0.1% to 86.5%. In England, coverage remained unchanged at 86.7% for MMR2 and 85.4% for the pre-school booster

1. Cohort definitions for October to December 2020

Children who reached their first birthday in the quarter (born October to December 2019) were scheduled to receive their third combined diphtheria, tetanus, acellular pertussis, polio, *Haemophilus influenzae* type b, hepatitis B vaccine (known as DTaP/IPV/Hib/HepB or hexavalent vaccine, second PCV, MenB and rotavirus vaccines between February and April 2020 [1]. With the exception of rotavirus vaccine which is only offered up to 6 months of age, all other vaccines would have been available to children in the current cohort up to the first birthday (October to December 2020).

This is the last quarterly cohort to be routinely offered 2 PCV doses in the first year of life, at 8 and 16 weeks, and future quarterly evaluations of PCV coverage at the first birthday will assess infants born on or after 1 January 2020 who will have be offered 1 PCV dose at 12 weeks only [2] (see Section 3.3).

Children born to hepatitis B surface antigen (HBsAg) positive mothers who reached their first birthday in this quarter should also have received monovalent hepatitis B vaccine at birth and 4 weeks of age.

Children who reached their second birthday in the quarter (born October to December 2018) were scheduled to receive their third DTaP/IPV/Hib/HepB, second PCV, MenB and rotavirus vaccinations between February and April 2019, and their first measles,

mumps, and rubella (MMR) vaccination, a booster dose of Hib and MenC (given as a combined Hib/MenC vaccine), MenB and PCV vaccines at the same visit from 12 months of age (from October to December 2019). With the exception of rotavirus vaccine which is only offered up to 6 months of age, all other vaccines would have been available to children in this cohort up to the second birthday (October to December 2020).

Children born to hepatitis B surface antigen (HBsAg) positive mothers, who reached their second birthday in this quarter (born October to December 2018), were scheduled to receive a third dose monovalent hepatitis B vaccine at 1 year of age, in addition to 3 doses of DTaP/IPV/Hib/HepB at 8, 12 and 16 weeks.

Children who reached their fifth birthday in the quarter (born October to December 2015) were scheduled to receive their third dose DTaP/IPV/Hib and second PCV and 1 MenC vaccination between February and April 2016. They were also scheduled to receive their first MMR, Hib/MenC booster and PCV booster after their first birthday between October and December 2016, and their pre-school diphtheria, tetanus, acellular pertussis, inactivated polio booster (DTaP/IPV) and second dose MMR from January 2019. DTaP/IPV/Hib, first and second doses of MMR, and DTaP/IPV would have been available to this cohort up to the fifth birthday (October to December 2020).

Children born in areas where there is a universal neonatal BCG programme (that is, where TB incidence ≥40/100,000) who reach their first birthday in this quarter (born October to December 2019) were scheduled to receive BCG at birth.

Coverage evaluated at the first, second and fifth birthdays, by country and new NHS England local teams (configuration as at 1 April 2018) are described in the appendix.

2. Participation and data quality

Data was received from all Health Boards (HBs) in Scotland, Northern Ireland and Wales. In England, Local Teams (LTs) and Child Health Record Departments (CHRDs) provided data for all upper tier local authorities (LAs) and the associated General Practices (GP).

All English data were collected through NHS Digital's Strategic Data Collection Service (SDCS). Individual LA and GP data including numerators, denominators, coverage and relevant caveats where applicable are available at: https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2020-to-2021-quarterly-data. GP level data were censored when individual values were less than 5.

Eight London LAs were not able to provide PCV1, therefore a national figure has not been calculated, as this would not be representative. PCV1 coverage for the 143 LAs that did provide data is available here.

Detailed caveats regarding any data quality issues for individual English LA data are available at: https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2020-to-2021-quarterly-data.

3. Developments in immunisation data

3.1 NHS Digital Child Health Programme

The Digital Child Health (DCH) programme was created to support the vision in the 'NHS England Healthy Children: Transforming Child Health Information' strategy, which aims to transform child health information services by making these systems interoperable, reducing the administrative burden of information recording and sharing.

Part of this programme includes merging CHIS systems into local hubs that can provide COVER data for several LAs in one submission. Since April 2017 four CHIS Hubs are providing COVER data for all London boroughs. In England, the number of CHIS systems has decreased from over 100 in 2015 to around 60 by mid-2019. As different phases of the digital strategy are implemented across the country, it is anticipated that there may be further temporary, local, data quality issues associated with transition.

3.2 Changes to COVER programme scope and reporting methodology

The collection of COVER data has transferred from PHE to NHS Digital's Strategic Data Collection Service (SDCS) and merged with the current SDCS practice level vaccine coverage collection (formally collected via the Child Immunisation Unify2 data collection).

Data for England collected for this report was collected via SDCS and the analysis and reporting of the quarterly COVER report remains with PHE.

In England, the October to December 2020 quarter is the seventh COVER collection to include both LA and GP level coverage extracted from CHISs. Quarterly GP data for the current quarter are published alongside the routine LA tables on the PHE website. These are experimental data and as such should be viewed with caution. Appropriate caveats accompany these data tables.

3.3 Changes to infant PCV schedule for babies born on or after 1 January 2020

Following the decision in April 2019 to follow a 1+1 PCV schedule, based on the advice of the Joint Committee on Vaccination and Immunisation (JCVI), all infants born on or after 1 January 2020 are offered a single dose of PCV13 given alongside the routine DTaP/IPV/Hib/HepB and rotavirus immunisations at 12 weeks of age, followed by a PCV13 booster at 1 year old (on or after the first birthday). This changed schedule is referred to as a 1+1 PCV schedule and has replaced the previous schedule of 2+1 (at 8 and 16 weeks, and a booster dose given at 1 year old (on or after the first birthday)) [2].

To continue accurately monitoring the coverage of PCV at 12 months of age the COVER programme has been modified to also collect coverage of the first dose of PCV (PCV1). From the first quarter of 2020 to 2021 CHISs should be able to report on PCV1 and PCV2 coverage at 12 months of age, and on PCV booster (dose given on or after the first birthday) at 24 months of age. COVER data for PCV2 will drop to zero as cohorts move to the 1+1 schedule (that is, births from 1 January 2020 onwards).

The revised information standard for the COVER programme was published on 6 February 2020. Organisations are expected to be compliant from 1 July 2020 to provide baseline PCV1 coverage, as well as PCV2 coverage. This is the third quarter where organisations in England were expected to provide PCV1 coverage and the last where PCV2 is presented as the measure of coverage.

From the next quarter (January to March 2021) only PCV1 coverage at 12 months will be published as all children evaluated will have been offered only 1 PCV dose in the first year of life.

4. Results

4.1 Coverage at 12 months

UK coverage for all antigens evaluated at the first birthday decreased when compared to the previous quarter (table 1)[3]. DTaP/IPV/Hib/HepB3 coverage decreased by 0.5% to 92.1%, PCV2 by 1.6% to 91.3%, MenB2 by 0.7% to 92.4% and Rotavirus by 0.6% to 90.3%. This cohort were born in October to December 2019 and were first offered their DTaP/IPV/Hib/HepB3, PCV2, MenB2 and Rota2 vaccines between February and April 2020; the first lockdown of the COVID-19 pandemic started in late March 2020 and it is possible that the introduction of physical distancing measures may have contributed to missed appointments.

Although the 12-month cohort evaluated this quarter were all born before 1 January 2020, and therefore would have been scheduled for 2 doses by the CHIS/GP systems, children starting their PCV vaccine course late and received their first dose after 1 January 2020 aged at least 12 weeks, would not need a second dose.

From next quarter only PCV1 coverage estimates will be used for reporting 12 month PCV coverage estimates (see section 3.3 above for details). In England, PCV1 coverage estimates have been requested since the July to September 2020 quarter and in the current quarter data were available for 143 of the 151 LAs (coverage ranged from 80.1% to 100%). This data is available at Local Authority level here.

In Scotland at least 96% coverage was achieved for all antigens at 12 months except rotavirus. In Wales coverage was at least 95% and in Northern Ireland coverage was at least 93% (table 1). In England, 12-month coverage DTaP/IPV/Hib/HepB3 decreased by 0.6% to 91.5%, PCV2 by 1.8% to 90.6%, Rotavirus by 0.5% to 89.9% and MenB by 0.6% to 91.9% when compared to the previous quarter. No English local teams achieved at least 95% coverage for DTaP/IPV/Hib/HepB3, PCV2 and MenB2.

4.2 Coverage at 24 months

Twenty-four month UK vaccine coverage estimates for all vaccines offered on or after the first birthday (MMR1, PCV, Hib/MenC and MenB boosters) decreased when compared to the previous quarter. MMR1 and PCV booster decreased 0.3% to 90.9%, Hib/MenC booster decreased 0.4% to 90.9% and MenB booster decreased 0.1% to 90.0%.

At the country level, Scotland was the only country to achieve 95% for all the vaccines offered from the first birthday; in Wales coverage exceeded 94% and in Northern Ireland it exceeded 92%. In England, coverage for MMR1, PCV, Hib/MenC boosters was 90.3% decreasing between 0.3% and 0.5% compared to the previous quarter. MenB booster decreased 0.2% to 89.3%. Ten of 13 local teams achieving at least 90% for all four vaccines.

UK DTaP/IPV/Hib/HepB3 evaluated at the second birthday increased 0.3% to 94.6% this quarter. In Scotland, Northern Ireland and Wales coverage was at least 96%; in England coverage increased 0.3% to 94.2% with 8 of 13 local teams achieving 95% (table 2)[3].

Children who reached their second birthday in the quarter (born October to December 2018) were scheduled to receive MMR1,and Hib/MenC, MenB and PCV booster vaccines at the same visit from 12 months of age (from October to December 2019). Therefore data for the 24-month cohort presented in this report largely reflects vaccines administered prior to early 2020, before the COVID-19 pandemic started. However, children who missed some of their routine immunisations and otherwise may have caught up by the second birthday, may have been impacted by the lockdown and/or local restrictions from late March 2020 onwards. This could be a contributing factor to the observed decreases in coverage for some vaccines in some areas presented in this quarter.

4.3 Coverage at 5 years

All UK countries continue to exceed the 95% WHO target for DTaP/IPV/Hib3 at 5 years. (table 3) [3]. This target was also achieved for MMR1 and Hib/MenC booster in Scotland, Wales and Northern Ireland. In England, MMR1 decreased 0.1% to 94.3% when compared to the previous quarter and 10 local teams achieved the 95% target. HibMenC booster also decreased 0.1% to 92.6%. Coverage at 5 years for these vaccines primarily reflects vaccinations delivered four years ago.

UK coverage for MMR2 increased 0.1% to 87.5% and decreased by 0.1% for the pre-school booster (DTaP/IPV) to 86.4%. In England, coverage for MMR2 and the pre-school booster remained unchanged at 86.7% and 85.4% respectively. Pre-school booster and MMR2 coverage exceeded 90% in the devolved administrations but only four English local teams reached this level for both vaccines (table 3).

4.4 Neonatal hepatitis B vaccine coverage in England

This is the ninth quarter where neonatal HepB vaccine coverage data in England evaluates 5 doses of hepatitis B vaccine (2 monovalent and 3 hexavalent doses) in infants born to hepatitis B surface antigen (HBsAg) positive mothers, who reached the age of 1 year in this quarter (that is, those born between October and December 2019). It is the fifth quarter when all 24-month-olds will have been offered 3 monovalent vaccines (at birth, 4 weeks and 12 months of age), and 3 doses of hexavalent vaccine (at 2, 3 and 4 months).

National coverage at 12 months for 5 doses of a HepB-containing increased by 3% to 88% compared to the previous quarter [3]. Coverage of 6 doses of a HepB-containing vaccine reported for children who reached 2 years of age in the quarter (those born between October and December 2018) increased 2% to 79% compared to the last quarter (table 4).

The quality of neonatal HepB vaccine data is variable and coverage by former local teams can be based on small numbers. As such, data should be interpreted with caution. Where an area reported no vaccinated children, a check was made to ensure that this was zero reporting rather than absence of available data.

5. Links for country-specific data

Quarterly England data: https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2020-to-2021-quarterly-data

Annual England data: https://digital.nhs.uk/data-and-information/publications/statistical/nhs-immunisation-statistics

Quarterly Northern Ireland: http://www.publichealthagency.org/directorate-public-health/health-protection/vaccination-coverage

Scotland: http://www.isdscotland.org/Health-Topics/Child-Health/Immunisation/

Wales: http://www.wales.nhs.uk/sites3/page.cfm?orgid=457&pid=54144/

COVER submission and publication dates:
https://www.gov.uk/government/publications/vaccine-coverage-statistics-publication-dates

Information for immunisation practitioners and other health professionals:
https://www.gov.uk/government/collections/immunisation

6. References

1. Public Health England. The complete routine immunisation schedule: https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule
2. Public Health England. Pneumococcal vaccination: infant schedule changes from January 2020 letter: https://www.gov.uk/government/publications/pneumococcal-vaccination-infant-schedule-changes-from-january-2020-letter
3. Public Health England (2020). Quarterly vaccination coverage statistics for children aged up to 5 years in the UK (COVER programme): July to September 2020. *HPR* **14**(24) Available at: https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2020-to-2021-quarterly-data

7. Appendix: Tables

Table 1. Completed UK primary immunisations at 12 months by country and England local team: October to December 2020 (*July to September 2020*)

Table 2. Completed UK primary immunisations at 24 months by country and NHS England local team: October to December 2020 (*July to September 2020*)

Table 3. Completed UK primary immunisations and boosters at 5 years by country and NHS England local team: October to December 2020 (*July to September 2020*)

Table 4. Neonatal hepatitis B coverage at 12 and 24 months in England by NHS England Area Team: October to December 2020 (*July to September 2020*)

Table 5. BCG vaccine coverage at 12 months in English local authorities with TB incidence ≥40 per 100,000 and offering a universal programme: October to December 2020 (*July to September 2020*)

Table 1. Completed UK primary immunisations at 12 months by country and English Local Teams: October to December 2020 *(July to September 2020)*

Country	No. of LAs/HBs†	DTaP/IPV/Hib/Hep B3%	PCV2%	Rota2%	MenB2%
United Kingdom	**176**	**92.1 *(92.6)***	**91.3 *(92.9)***	**90.3 *(90.9)***	**92.4 *(93.1)***
Wales	**7**	**95.2 *(95.8)***	**95.2 *(96.1)***	**93.4 *(94.0)***	**95.2 *(95.9)***
Northern Ireland	**4**	**93.7 *(94.5)***	**93.5 *(94.9)***	**91.7 *(92.5)***	**94.0 *(94.6)***
Scotland	**14**	**96.4 *(96.8)***	**96.1 *(97.1)***	**93.9 *(94.2)***	**96.3 *(96.9)***
England	**153**	**91.5 *(92.1)***	**90.6 *(92.4)***	**89.9 *(90.4)***	**91.9 *(92.5)***
NHS England Local Teams					
London	33	85.8 (*87.7*)	83.0 (*87.4*)	85.2 (*86.7*)	85.9 (*87.8*)
North (Yorkshire & Humber)	15	93.0 (*93.4*)	92.6 (*93.9*)	91.1 (*91.4*)	93.2 (*93.8*)
North (Lancashire & Grt. Manchester)[1]	13	90.3 (*92.0*)	90.4 (*93.1*)	88.4 (*89.6*)	91.7 (*93.4*)
North (Cumbria & North East)[1]	13	95.2 (*96.2*)	94.8 (*96.3*)	93.7 (*94.6*)	95.5 (*96.3*)
North (Cheshire & Merseyside)	9	91.2 (*90.9*)	91.5 (*92.2*)	89.4 (89.9)	92.2 (*92.6*)
Midlands & East (North Midlands)	8	94.1 (*95.1*)	92.9 (*95.3*)	92.7 (*93.5*)	94.4 (*95.3*)
Midlands & East (West Midlands)	10	90.2 (*87.9*)	89.6 (*88.7*)	87.5 (*85.7*)	90.8 (*89.3*)
Midlands & East (Central Midlands)	10	92.9 (*93.0*)	93.1 (*93.8*)	91.8 (*91.7*)	93.5 (*93.7*)
Midlands & East (East)	7	93.9 (*94.2*)	93.5 (*94.6*)	91.4 (*92.5*)	93.8 (*94.3*)
South West (South West South)	8	93.9 (*94.5*)	93.1 (*94.6*)	91.4 (*91.9*)	94.3 (*94.9*)
South West (South West North)	7	94.4 (*94.8*)	93.8 (*95.1*)	92.8 (*93.4*)	94.5 (*94.9*)

South East (Hampshire, Isle of Wight and Thames Valley)	12	94.5 (*94.9*)	93.8 (*94.1*)	92.5 (*93.0)*	94.4 (*95.0*)
South East (Kent, Surrey and Sussex)	6	92.5 (*92.5*)	91.9 (*92.9)*	90.8 (*90.9*)	92.8 (*92.8)*

† Local Authorities / Health Boards.
1. Currently we are not able to report the 2018 local teams in these areas as Cumbria LA does not map to the new configuration

Table 2. Completed UK primary immunisations at 24 months by country and NHS England local team: October to December 2020 *(July to September 2020)*

Country	No. of LAs/ HBs†	DTaP/IPV/Hib3/HepB %	PCV booster%	Hib/MenC booster%	MMR1%	MenB booster%
United Kingdom	**176**	**94.6 *(94.3)***	**90.9 *(91.2)***	**90.9 *(91.3)***	**90.9 *(91.2)***	**90.0 *(90.1)***
Wales	**7**	**97.2 *(96.7)***	**94.9 *(94.9)***	**94.6 *(94.6)***	**94.9 *(95.0)***	**94.5 *(94.7)***
Northern Ireland	**5**	**96.0 *(95.8)***	**92.7 *(92.3)***	**92.5 *(92.1)***	**92.3 *(91.9)***	**92.2 *(91.8)***
Scotland	**14**	**97.4 *(96.8)***	**95.5 *(95.0)***	**95.4 *(95.0)***	**95.1 *(94.7)***	**95.0 *(94.3)***
England	**151**	**94.2 *(93.9)***	**90.3 *(90.6)***	**90.3 *(90.8)***	**90.3 *(90.7)***	**89.3 *(89.5)***
NHS England local teams*						
London	33	89.9 (*90.0*)	81.8 (*82.7*)	82.5 (*83.2*)	82.3 (*83.1*)	80.9 (*81.4*)
North (Yorkshire & Humber)	15	95.3 (*95.3*)	92.3 (*93.1*)	92.3 (*93.1*)	92.1 (*93.0*)	91.3 (*92.2*)
North (Lancashire & Grt. Manchester)[1]	13	94.3 (*93.8*)	90.8 (*91.0*)	91.0 (*91.6*)	91.0 (*91.7*)	90.0 (*90.4*)
North (Cumbria & North East)[1]	13	96.9 (*97.0*)	95.8 (*95.9*)	95.9 (*96.0*)	95.8 (*95.8*)	95.3 (*95.1*)
North (Cheshire & Merseyside)	9	93.9 (*92.7*)	90.3 (*90.7*)	90.2 (*90.7*)	90.1 (*90.5*)	89.3 (*89.2*)
Midlands & East (North Midlands)	8	95.7 (*95.4*)	92.0 (*92.8*)	92.0 (*92.9*)	92.1 (*92.8*)	91.2 (*91.6*)
Midlands & East (West Midlands)	10	93.6 (*93.5*)	89.0 (*88.8*)	89.2 (*88.6*)	89.2 (*88.7*)	87.6 (*87.2*)
Midlands & East (Central Midlands)	10	93.8 (*93.2*)	92.0 (*91.7*)	92.2 (*92.1*)	92.1 (*91.7*)	90.4 (*89.9*)
Midlands & East (East)	7	95.7 (*95.9*)	93.2 (*94.0*)	93.3 (*94.1*)	93.1 (*93.8*)	92.8 (*93.3*)
South West (South West South)	8	96.2 (*95.9*)	93.6 (*93.4*)	93.7 (*93.4*)	93.6 (*93.4*)	93.4 (*92.8*)
South West (South West North)	7	96.2 (*95.8*)	93.4 (*93.3*)	93.4 (*93.4*)	93.4 (*93.2*)	92.8 (*92.6*)

South East (Hampshire, Isle of Wight and Thames Valley)	12	95.8 (*95.9*)	94.4 (*94.9*)	93.2 (*94.0*)	93.3 *(94.0*)	93.2 (*93.3*)
South East (Kent, Surrey and Sussex)	6	95.4 (*94.3*)	91.4 (*91.8*)	91.1 (*91.7*)	91.1 (*91.6*)	90.5 (*90.7*)

† Local Authorities / Health Boards.
1. Currently we are not able to report the April 2018 local teams in these areas as Cumbria LA does not map to that configuration.

Table 3. Completed UK primary immunisations and boosters at 5 years by country and NHS England local team: October to December 2020 *(July to September 2020)*

Country	Number of LAs/HBs†	Primary		Booster		
		DTaP/IPV/ Hib3%	MMR1%	MMR2%	DTaP/IPV%	Hib/MenC%
United Kingdom	**176**	**95.6 *(95.9)***	**94.6 *(94.8)***	**87.5 *(87.4)***	**86.4 *(86.5)***	**93.0 *(93.2)***
Wales	**7**	**96.7 *(96.9)***	**96.4 *(96.6)***	**92.1 *(92.0)***	**92.7 *(93.0)***	**95.1 *(95.2)***
N. Ireland	**5**	**96.8 *(97.5)***	**95.5 *(96.6)***	**90.3 *(90.3)***	**91.0 *(90.9)***	**95.0 *(95.9)***
Scotland	**14**	**97.8 *(98.0)***	**96.7 *(97.0)***	**92.8 *(92.6)***	**93.3 *(93.2)***	**96.1 *(96.4)***
England	**151**	**95.3 *(95.6)***	**94.3 *(94.4)***	**86.7 (*86.7)***	**85.4 *(85.4)***	**92.6 *(92.7)***
English Local Teams						
London	33	91.4 *(92.0)*	88.8 *(89.4)*	74.1 *(75.1)*	71.3 *(72.5)*	86.5 *(87.5)*
North (Yorkshire & Humber)	15	96.5 (*96.4*)	95.8 (*95.6*)	90.5 (*90.0*)	89.6 (*89.1*)	93.9 (*93.3*)
North (Lancashire & Grt. Manchester)[1]	13	94.4 (*95.5*)	94.6 (*94.5*)	87.7 (*87.5*)	86.1 (*86.8*)	94.0 (*93.7*)
North (Cumbria & North East)[1]	13	96.9 *(97.5)*	97.2 *(97.5)*	92.6 *(93.4)*	92.5 *(92.7)*	95.5 *(95.4)*
North (Cheshire & Merseyside)	9	96.3 (*96.3*)	95.1 (*95.2*)	86.8 (*86.7*)	85.4 (*85.2*)	94.5 (*94.4*)
Midlands & East (North Midlands)	8	97.3 (*97.1*)	96.2 (*96.1*)	89.6 (*89.2*)	88.7 (*88.4*)	94.5 (*94.3*)
Midlands & East (West Midlands)	10	95.3 (*95.3*)	94.2 (*94.3*)	85.4 (*83.3*)	84.7 (*82.5*)	92.9 *(92.8)*
Midlands & East (Central Midlands)	10	96.4 *(96.3)*	95.5 *(95.7)*	89.8 *(89.6)*	88.4 *(88.1)*	93.2 *(93.0)*
Midlands & East (East)	7	96.8 *(96.7)*	95.8 *(95.9)*	91.1 *(90.9)*	90.8 *(90.3)*	92.8 *(93.0)*
South West (South West South)	10	97.1 *(97.0)*	96.4 *(96.4)*	92.0 *(92.4)*	90.3 *(90.6)*	95.3 *(95.3)*
South West (South West North)	7	96.7 (*96.5*)	96.1 (*96.1*)	90.9 (*90.4*)	89.7 (*89.4*)	95.6 (*95.4*)

South East (Hampshire, Isle of Wight and Thames Valley)	12	96.4 (*96.7*)	95.4 (*95.7*)	91.0 (*90.9*)	90.3 (*90.3*)	94.9 (*94.8*)
South East (Kent, Surrey and Sussex)	6	94.9 (*95.6*)	95.0 (*95.1*)	88.3 (*88.4*)	86.9 (*87.6*)	92.6 (*93.5*)

† Local Authorities / Health Boards.
1. Currently we are not able to report the April 2018 local teams in these areas as Cumbria LA does not map to that configuration.

Table 4. Neonatal hepatitis B coverage at 12 and 24 months in England by NHS England Local Team: October to December 2020 *(July to September 2020)*

NHS England Local Team[3]	LA returns with 12 month data	12 month denominator	% Coverage at 12 months (5 doses)[1]	LA returns with 24 month data	24 month denominator	% Coverage at 24 months[2]
London	33 of 33	184	89 (*88*)	33 of 33	192	76 *(76)*
North (Yorkshire & Humber)	15 of 15	46	87 *(91)*	15 of 15	36	83 *(76)*
North (Lancashire & Grt. Manchester)[3]	13 of 13	27	56 *(41)*	13 of 13	26	50 *(16)*
North (Cumbria & North East)[3]	12 of 13	8	75 *(80)*	12 of 13	8	75 *(73)*
North (Cheshire & Merseyside)	9 of 9	10	70 (70)	9 of 9	11	36 (50)
Midlands & East (North Midlands)	8 of 8	18	89 *(100)*	8 of 8	16	88 *(100)*
Midlands & East (West Midlands)	10 of 10	46	96 *(89)*	10 of 10	59	93 *(95)*
Midlands & East (Central Midlands)	10 of 10	49	98 (97)	10 of 10	54	85 (86)
Midlands & East (East)	7 of 7	27	89 (84)	7 of 7	23	74 (82)
South West (South West South)	8 of 8	9	89 *(86)*	8 of 8	15	100 *(100)*
South West (South West North)	7 of 7	11	82 *(94)*	7 of 7	8	100 *(100)*
South East (Hampshire, Isle of Wight and Thames Valley)	12 of 12	30	90 *(95)*	12 of 12	32	88 *(95)*
South East (Kent, Surrey and Sussex)	6 of 6	14	100 *(64)*	6 of 6	25	64 *(96)*
England[1]	**150 of 151**	**479**	**88 *(85)***	**150 of 151**	**505**	**79 *(77)***

1. Babies offered 2 monovalent HepB vaccines (at birth and one month) and 3 hexavalent vaccines (at 8, 12 and 16 weeks).
2. Babies offered 3 monovalent vaccines at birth, 4 weeks and 12 months, and 3 doses of hexavalent vaccine (at 8, 12 and 16 weeks).
3. Currently we are not able to report the April 2018 local teams in these areas as Cumbria LA does not map to that configuration.

Table 5. **BCG vaccine coverage at 12 months in English local authorities with TB incidence ≥40 per 100,000 and offering a universal programme: October to December 2020** ***(July to September 2020)***

Upper tier Local Authority	Three-year average (2014 to 2016) annual TB rate per 100,000	Number of eligible children (1st birthday in October to December 2020)	Universal BCG coverage% (previous quarterly estimate)
Newham	69.0	1390	74.3 (*84.8*)
Brent	57.8	1168	27.1 (*31.3*)
Hounslow	47.5	940	20.1 *(20.3)*
Ealing	47.3	1174	41.7 *(39.7)*
Redbridge	41.5	1116	72.8 *(78.5)*

Note: Slough has a TB incidence of 41.8 per 100,000 but does not have a universal programme.

About Public Health England

Public Health England exists to protect and improve the nation's health and wellbeing and reduce health inequalities. We do this through world-leading science, research, knowledge and intelligence, advocacy, partnerships and the delivery of specialist public health services. We are an executive agency of the Department of Health and Social Care, and a distinct delivery organisation with operational autonomy. We provide government, local government, the NHS, Parliament, industry and the public with evidence-based professional, scientific and delivery expertise and support.

About Health Protection Report

Health Protection Report is a national public health bulletin for England and Wales, published by Public Health England. It is PHE's principal channel for the dissemination of laboratory data relating to pathogens and infections or communicable diseases of public health significance and of reports on outbreaks, incidents and ongoing investigations.

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