# MEASLES OUTBREAK UPDATE

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<th>Interim Director of Public Health</th>
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<td>To update the Board on the measles outbreak in Powys and actions taken to increase MMR vaccination rates and prevent the further spread of measles.</td>
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<td>Action/Decision required</td>
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<td>Link to ‘Doing Well, Doing Better: Standards for Health Services in Wales’:</td>
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| Acronyms and abbreviations | Powys teaching Health Board – Powys tHB  
World Health Organisation – WHO  
Welsh Government – WG  
Measles, Mumps, Rubella – MMR |
MEASLES OUTBREAK UPDATE

Purpose of paper

The purpose of this paper is to update the Board on the measles outbreak in Powys and actions that have been taken to increase MMR vaccination rates and prevent the further spread of measles.

Background

In May 2013, a paper was presented to Board about the measles outbreak in Powys. Briefly, this paper provided an overview of:

• The symptoms and complications of measles
• MMR vaccination uptake rates
• Epidemiology of measles
• Actions taken to reduce the further spread of measles

This paper provides an update of the epidemiology of measles and actions that have taken place.

Epidemiology of measles

A measles outbreak started in Swansea and Neath Port Talbot in November 2012, with a total of 928 cases notified since then (as of 4 June 2013). Since then, outbreaks have also been seen in Hywel Dda Health Board and Powys teaching Health Board. Over these three Health Board areas, a total of 1,171 measles cases have been notified since November 2013. Figure 1 below shows the notification rate for measles across Wales.

Figure 1: Measles notification across Wales

Regional notification data: ‘Measles, Wales'

Source: Public Health Wales.
In 2012, 4 measles notifications were received in total for Powys by the Health Protection Team, Public Health Wales. In January 2013, there was notification of 3 measles cases in Powys, although these were sporadic cases and not thought to constitute an outbreak. Since 11th March 2013, 94 measles cases have been notified, although many of these have yet to be confirmed through laboratory testing. Figure 2 below shows the rate of weekly measles notifications for Powys.

Figure 2: Measles notification across Powys

Source: Public Health Wales.

Of these cases, approximately two third of cases are in Montgomeryshire and over a quarter are in Brecknockshire, with only a small number of cases in Radnorshire. Approximately half of cases are in children aged ten to nineteen years and a significant number are aged four years and under.

Actions to Reduce the Spread of Measles

Prior to the measles outbreak, low MMR uptake had already been identified as an area of concern, particularly amongst teenagers. Actions were underway to increase MMR uptake, including a MMR catch up campaign for teenagers in Year 10.

A Powys Outbreak Control Team (OCT) was established at the start of the outbreak and has met on a regular basis, with the aim of providing a co-ordinated response to the reducing the spread of measles and increasing MMR uptake. This group has fed into a Senior Response Team, an All Wales meeting, led by Public Health Wales, with the remit of ensuring an adequate and co-ordinated response to the outbreak across Wales. To date, steps that have been taken are:

Responses to individual cases
Following the notification of a measles case to the Health Protection Team, Public Health Wales, the following actions have taken place:

- Cases are provided with advice on exclusion from schools / workplace settings
• Contacts of cases are identified and advised to obtain MMR immunisation through GP practices. Vulnerable contacts (babies, pregnant women, immunosuppressed individuals), are assessed and advised on the need for immunoglobulins

• Schools and pre-school settings have been made aware of the case and parents of children at the affected settings are advised to check their child’s immunisation status and have their child vaccinated.

Vaccinating susceptible children
Susceptible children i.e. those who have not had 2 MMR vaccines have been offered MMR vaccinations through a variety of routes

• Vaccinating through GP practices
A Locally Enhanced Service enabling GP Practices to give MMR to susceptible patients has been put in place. Practices in affected areas have been proactively offering MMR vaccination to patients e.g. writing to parents of unvaccinated children, holding MMR clinics. In unaffected areas, practices have been vaccinating children either through specific MMR clinics or through fitting in requests throughout surgery opening times. In total, GP Practices have vaccinated 2,129 people with MMR across Powys (as of 28 May 2013), in addition to giving scheduled vaccines to children.

• Vaccinating through schools
A school based vaccination campaign is known to be an effective mechanism for controlling measles outbreaks.

Vaccination sessions have been held in all High Schools across Powys, as well as in the three Special Schools. Children who have not had two MMR vaccines have been identified and offered MMR vaccines. This has resulted in 330 children aged 10-18 years receiving MMR, as of 28 May 2013. A significant number of children who were identified as not having had MMR by the Child Health System have been found to have been vaccinated, following verification of records held by GP practices. This discrepancy in data between Child Health and GP records has been identified as a risk to having a true understanding of the number of children that have been vaccinated as part of the childhood vaccination programme. This will impact on Powys tHB’s vaccination uptake reports (COVER) that are used to monitor vaccination rates in children. This has also been highlighted as an issue across Wales, with follow up work in schools in Swansea and Monmouthshire showing that around 40-80% of those not recorded on the Child Health System as having received MMR have in fact received it in primary care. Work is underway to undertake a data reconciliation exercise between GP Practices and the Child Health Office so that records are up to date. This will have considerable resource impact on the Child Health Service.

There has been communication with both private Secondary Schools in Powys, requesting that schools ensure that pupils are vaccinated with MMR.

• Protecting vulnerable children
Letters have been sent to the parents of home educated children, asking them to check their child’s vaccination status and promoting MMR vaccination through GP practices. Specialist Nurses for Looked After Children have also reviewed the MMR status of children to ensure that they are adequately vaccinated. A Health Visitor has been in contact with families in travelling communities to raise awareness of the outbreak and promote MMR vaccination. There is close working underway to work with Powys County Council to ensure that information is provided to parents of children at Pupil Referral Units. Vaccinations are also being offered at these Units, where possible.

- Community drop in clinics
Powys has a large number of small Primary Schools that are geographically dispersed, each with a small number of children that need MMR vaccination. Two community drop-in clinics were held in Brecon War Memorial Hospital and Montgomery County Infirmary, Newtown on Saturday 25 May 2013, with the aim of offering all children, and Primary school children in particular, the opportunity of accessing the MMR vaccine if they had been unable to do so through their GP Practice or through High School vaccination sessions. Examination of Child Health System data had indicated that there were a significant number of children in the Newtown and Brecon areas who were not fully vaccinated with MMR. In order to promote attendance, there were press releases locally and nationally, advertisements in local newspapers, social media stories (the Facebook story had over 2,500 viewings) and all parents of pupils at nearby schools received a letter informing them of the drop in sessions. In addition, letters were sent to pupils attending nearby Coleg Powys sites. Across the two sites, a total of 29 people were vaccinated.

Communications
Whilst Public Health Wales is co-ordinating and leading a national communications campaign, local activity has also taken place to ensure that there is raised awareness in Powys. This has included numerous press releases, a local radio interview, social media activity, including on Twitter and Facebook. Information has been disseminated through partners e.g. Powys County Council Education Services, Leisure Services, Children and Young People’s partnerships, PAVO. There has also been communications with community leaders e.g. councillors, AMs, PMs to enable consistent widespread messaging to promote MMR vaccination uptake. Schools are being provided with information through School Nurses as well as through Education Services.

Vaccinating Powys teaching Health Board staff
Occupational Health have identified all staff who have direct patient contact and who have not had two MMR vaccinations. Other staff, born after 1970, who have not had 2 MMR vaccinations have also been identified. These staff have been contacted and have been asked to attend for vaccination at drop-in clinics that are being held at the different hospital sites across Powys.
Next Steps

Key next steps include:

- There is a need to maintain the momentum achieved in increasing the number of children being vaccinated with MMR, even once the number of measles cases has reduced.
- Child Health and GP Data reconciliation is a priority to better understand the number of children that are still vulnerable and require vaccination. This information will also help better target actions to increase MMR vaccination uptake.
- Reflection and learning from the measles outbreak will need to be incorporated into the Powys Immunisation Planning Group Action Plan, in order to strengthen the plan and ensure continued increase in vaccination uptake.

Conclusion

A measles outbreak in Powys has affected 94 children since 11th March 2013. Numerous actions have been taken to prevent the further spread of measles across Powys and further increase MMR vaccination uptake amongst children and Powys tHB staff.

Recommendation

The Board is asked to note actions taken to date for information.

Report prepared by: Presented By:
Dr Sumina Azam Dr Sumina Azam
Interim Director of Public Health Interim Director of Public Health

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