



Public Health
England

Protecting and improving the nation's health

Quarterly vaccination coverage statistics for children aged up to five years in the UK (COVER programme): April to June 2019

Health Protection Report
Volume 13 Number 34
27 September 2019

Quarterly vaccination coverage statistics for children aged up to five years in the UK (COVER programme): April to June 2019

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.

Key points for the first quarterly report for 2019/20

- UK and England vaccine coverage increased slightly or remained the same compared to the last quarterly report for all vaccines evaluated at one, two and five years of age
- This report presents quarterly data tables at the General Practice (GP) level in England for the first time. These data are being published as experimental data and as such should be viewed with caution
- UK coverage for DTaP/IPV/Hib/HepB3, PCV2 and MenB evaluated at the first birthday all increased by 0.2%, to 92.5%, 93.1% and 92.7% respectively, compared to the previous quarter. Rotavirus remained unchanged at 90.5% for the third successive quarter.
- 24 month UK vaccine coverage estimates for all vaccines offered on or after the first birthday increased by 0.1 to 0.3% compared to the previous quarter (PCV booster and MMR 90.8%, Hib/MenC 91% and MenB booster 89.4%). DTaP/IPV/Hib3 remained the same (94.5%).
- UK coverage at 5 years remained very similar to the previous quarter with no change in three booster vaccines (MMR2 87.4%, DTaP/IPV 86.2%, Hib/MenC 93.1%). Primary DTaP/IPV/Hib3 and MMR1 increased by 0.1% to 95.7%
- Five year coverage for the three devolved administrations continued to exceed the 95% WHO target for MMR1 and was over 97% for DTaP/IPV/Hib3. In England ten of thirteen local teams exceed the 95% target for both vaccines. Coverage at five years for these vaccines primarily reflects children vaccinated four years ago
- Both MMR2 and pre-school booster (DTaP/IPV) coverage exceeded 90% in the devolved administrations, but only three English local teams reached this level for both vaccines
- The annual vaccine coverage report, [Childhood Vaccination Coverage Statistics – England 2018-19](#) was published on 26 September 2019 as a joint NHS Digital/PHE report.

1. Cohort definitions for April to June 2019

Children who reached their first birthday in the quarter (born April to June 2018) were all scheduled for three doses of combined diphtheria, tetanus, acellular pertussis, polio, *Haemophilus influenzae* type b, hepatitis B vaccine (known as DTaP/IPV/Hib/HepB or hexavalent vaccine) which replaced DTaP/IPV/Hib (pentavalent) vaccine from autumn 2017 [1]. The third dose of priming vaccine would have been scheduled between August and October 2018.

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 four weeks of age.

Children born April to June 2018 will also have been scheduled for two doses of pneumococcal conjugate vaccine (PCV), Meningococcal B vaccine (MenB), and rotavirus vaccine [2].

Children who reached their second birthday in the quarter (born April to June 2017) were scheduled to receive their third DTaP/IPV/Hib, second PCV, MenB and rotavirus vaccinations between August and October 2017, 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 at 12 months of age, between May and July 2018.

Children born to hepatitis B surface antigen (HBsAg) positive mothers, who reached their second birthday in this quarter (born April to June 2017), were scheduled to receive a second of monovalent hepatitis B vaccine at one year of age.

Children who reached their fifth birthday in the quarter (born April to June 2014) were scheduled to receive their third dose DTaP/IPV/Hib and second PCV and one MenC vaccination between August and October 2014. They were also scheduled to receive their first MMR, Hib/MenC booster and PCV booster after their first birthday (born April to June 2015) between May and July 2015, and their pre-school diphtheria, tetanus, acellular pertussis, inactivated polio booster (DTaP/IPV) and second dose MMR from July 2017.

Children born in areas where there is a universal neonatal BCG programme (i.e. TB incidence $\geq 40/100,000$) who reach their first birthday in this quarter (born April to June 2018) 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 were 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 General Practices (GP). All 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 [here](#). GP level data were censored when individual values were less than 5.

Since April 2017, four CHIS Hubs provide COVER data for the whole of London and the data submitted from these newly established Hubs reflects a system in transition (see 3.1). Issues relating to complexities in data flows between providers and child health information systems (CHISs), and inconsistencies in data coding resulted in decreases in London-level coverage estimates early in 2018-19 for the 12 and 24 month and 5 year evaluations being reported. Due to the impact London data has on national figures, no national or UK level data were published in the April to June 2018 quarter. To assess trends in coverage accounting for the data quality issues, England (all) and UK level data were published alongside England (excluding London) figures. However, London data quality improved from the July to September 2018 quarter [3,4], and the presentation of England data excluding London ceased last quarter [5].

Detailed caveats regarding any data quality issues for individual English LA data, including changes in denominators due to the NHS England CHIS data validation exercise conducted from the third quarter of 2018-19, are available [here](#).

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 [6]. 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

As first reported in the October to December 2018 COVER report [4] it is anticipated that, contingent on a successful pilot, the collection of COVER data will be transferred during 2019/20 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 as part of the pilot. The analysis and reporting of the quarterly COVER report remains with PHE. The annual vaccine coverage report, [Childhood Vaccination Coverage Statistics – England 2018-19](#) is published this week as a joint NHS Digital/PHE report.

In England, the April to June 2019 quarter is the first COVER collection to include both LA and GP level coverage extracted from CHISs. The April to June 2019 quarterly GP data are being 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 the Local Authority configuration in Dorset

Prior to April 2019, Dorset comprised three local authorities:

- Bournemouth
- Dorset
- Poole

Since April 2019, Dorset now comprises two local authorities:

- Bournemouth, Christchurch and Poole
- Dorset

4. Results

4.1 Coverage at 12 months

UK coverage for DTaP/IPV/Hib/HepB3, PCV2 and MenB evaluated at the first birthday all increased by 0.2%, to 92.5%, 93.1% and 92.7% respectively, compared to the previous quarter [5]. Rotavirus vaccine coverage remained unchanged at 90.5% for the third successive quarter. England vaccine coverage also increased by 0.1- 0.2% for these vaccines compared with the previous quarter and rotavirus vaccine decreased by 0.1% (table 1).

Scotland and Wales reported increases for all antigens this quarter and continue to achieve above 95% coverage for DTaP/IPV/Hib/HepB3, PCV2 and MenB2 at 12 months. In Northern Ireland 12 month coverage decreased by 0.2 – 0.4% with DTaP/IPV/Hib(HepB)3, PCV2 and MenB2 achieving at least 93%. In England, only one local team achieved 95% coverage for these three vaccines (table 1).

4.2 Coverage at 24 months

24 month UK vaccine coverage estimates for all vaccines offered on or after the first birthday increased by 0.1 to 0.3% compared to the previous quarter (PCV booster and MMR 90.8%, Hib/MenC 91% and MenB booster 89.4%). DTaP/IPV/Hib3 remained the same (94.5%) (table 2)[5]. In England vaccine coverage for all these vaccines increased by 0.2 – 0.4%. (table 2)[5].

Quarterly coverage for DTaP/IPV/Hib3 in Scotland, Northern Ireland and Wales was at least 95%; in England overall coverage was 94.2% and seven of 13 local teams achieved 95%.

PCV, Hib/MenC and MenB boosters, and MMR1 all exceeded 93% in Scotland and Wales, and exceeded 91% in Northern Ireland (table 2). In England, two local teams achieved 93% coverage for PCV and Hib/MenC boosters and for MMR1. MenB booster coverage increased 0.4% to 88.8% in England with ten of 13 local teams achieving at least 90%.

4.3 Coverage at five years

UK and England coverage at 5 years remained very similar to the previous quarter with no change in three booster vaccines (MMR2 87.4%, DTaP/IPV 86.2%, Hib/MenC 93.1%). Primary DTaP/IPV/Hib3 and MMR1 increased by 0.1% to 95.7% and 95.1% respectively (table 3) [5].

Coverage for the three devolved administrations continued to exceed the 95% WHO target for MMR1 and was over 97% for DTaP/IPV/Hib3. In England ten of thirteen local teams exceed the 95% target for both vaccines. Coverage at five years for these vaccines primarily reflects children vaccinated four years ago.

Both MMR2 and pre-school booster (DTaP/IPV) coverage exceeded 90% in the devolved administrations, but only three English local teams reached this level for both vaccines (table 3).

4.4 Neonatal hepatitis B vaccine coverage in England

This is the third quarter where neonatal HepB vaccine coverage data in England evaluates five doses of hepatitis B vaccine (two monovalent and three hexavalent doses) in infants born to hepatitis B surface antigen (HBsAg) positive mothers, who reached the age of one year in this quarter (i.e. those born between April and June 2018). National coverage was 82% compared to 78% in the previous quarter [5].

Coverage of four doses of monovalent vaccine in infants continues to be reported for children who reached two years of age in the quarter (i.e. those born between April and June 2017) and was 72% compared to 79% last quarter.

These data are presented by local team in table 4. The quality of these data is variable and coverage by former local team 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. Relevant links for country-specific coverage data

Quarterly England data: <https://www.gov.uk/government/collections/vaccine-uptake#cover-of-vaccination-evaluated-rapidly-programme>

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>

Other relevant links

<https://www.gov.uk/government/collections/immunisation>

6. References

1. Public Health England. Hexavalent combination vaccine: routine programme guidance. <https://www.gov.uk/government/publications/hexavalent-combination-vaccine-programme-guidance>
2. Public Health England. The complete routine immunisation schedule. <https://www.gov.uk/government/publications/the-complete-routine-immunisation-schedule>
3. Public Health England (2018). Vaccination coverage statistics for children up to the age of five years in the United Kingdom, July to September 2018. 2018 HPR 12 (45). Available at <https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2018-to-2019-quarterly-data>
4. Public Health England (2018). Quarterly vaccination coverage statistics for children aged up to five years in the UK (COVER programme) : October to December 2018 HPR 13 (11). Available at <https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2018-to-2019-quarterly-data>
5. Public Health England (2019). Quarterly vaccination coverage statistics for children aged up to five years in the UK (COVER programme) : January to March 2019 HPR 13 (22). Available at <https://www.gov.uk/government/statistics/cover-of-vaccination-evaluated-rapidly-cover-programme-2018-to-2019-quarterly-data>
6. NHS England. Digital Child Health Transformation Programme. <https://www.england.nhs.uk/digital-technology/child-health/>

Appendix: Tables

Table 1. Completed UK primary immunisations at 12 months by country and England local team : April to June 2019 (*January to March 2019*)

Table 2. Completed UK primary immunisations at 24 months by country and NHS England local team April to June 2019 (*January to March 2019*)

Table 3. Completed UK primary immunisations and boosters at five years by country and NHS England local team: April to June 2019 (*January to March 2019*)

Table 4. Neonatal hepatitis B coverage at 12 and 24 months in England by NHS England Area Team : April to June 2019 (*January to March 2019*)

Table 5. BCG vaccine coverage at 12 months in English local authorities with TB incidence ≥ 40 per 100,000 and offering a universal programme: April to June (*January to March 2019*)

Table 1. Completed UK primary immunisations at 12 months by country and English Local Teams¹: April to June 2019 (January to March 2019)

	Country	No. of LAs/HBs [†]	DTaP/IPV/Hib(HepB)3%	PCV2%	Rota2%	MenB2%
	United Kingdom	176	92.5 (92.3)	93.1 (92.9)	90.5 (90.5)	92.7 (92.5)
	Wales	7	95.8 (95.3)	96.0 (95.4)	94.0 (93.6)	95.6 (95.2)
	Northern Ireland	4	93.8 (94.2)	94.1 (94.5)	91.6 (91.9)	93.9 (94.1)
	Scotland	14	96.3 (95.7)	96.8 (96.1)	93.5 (93.1)	96.2 (95.7)
	England	151	92.0 (91.9)	92.6 (92.5)	90.0 (90.1)	92.2 (92.0)
LT code	NHS England Local Teams¹					
Q71	London	33	87.4 (87.7)	87.9 (88.2)	85.5 (86.3)	87.1 (87.3)
Q72	North (Yorkshire & Humber)	15	93.7 (94.0)	94.0 (94.2)	91.8 (92.2)	94.0 (93.9)
Q73	North (Lancashire & Grt. Manchester) ²	13	91.9 (92.0)	93.2 (93.2)	89.2 (89.2)	93.0 (92.7)
Q74	North (Cumbria & North East) ²	13	96.0 (94.7)	96.2 (95.1)	94.4 (93.5)	96.0 (94.9)
Q75	North (Cheshire & Merseyside)	9	92.4 (92.0)	92.5 (92.3)	89.7 (89.6)	92.6 (92.5)
Q76	Midlands & East (North Midlands)	8	94.2 (93.6)	94.8 (94.2)	92.6 (92.1)	94.5 (93.9)
Q77	Midlands & East (West Midlands)	10	91.8 (90.7)	92.4 (91.4)	88.9 (88.6)	92.0 (90.9)
Q78	Midlands & East (Central Midlands)	10	91.7 (92.4)	92.9 (93.6)	90.7 (90.8)	92.5 (93.0)
Q79	Midlands & East (East)	7	94.4 (93.7)	94.9 (94.3)	92.4 (91.9)	94.4 (93.9)
Q85	South West (South West South)	8	94.6 (94.4)	94.9 (94.8)	92.5 (92.2)	94.8 (94.4)
Q86	South West (South West North)	7	92.5 (93.6)	93.1 (94.0)	89.9 (91.1)	92.8 (93.6)
Q87	South East (Hampshire, Isle of Wight and Thames Valley)	12	94.9 (94.1)	95.2 (94.7)	92.8 (91.9)	94.5 (94.0)
Q88	South East (Kent, Surrey and Sussex)	6	90.9 (90.2)	91.9 (91.3)	89.0 (89.5)	91.5 (90.8)

[†] Local Authorities /Health Boards.

¹ April 2018 configuration of NHS England Local Teams

² Currently we are not able to report the new 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 team¹: April to June 2019 (January to March 2019)

Country	No. of LAs/ HBs [†]	DTaP/IPV/Hib3%	PCV booster%	Hib/MenC booster%	MMR1%	MenB booster%
United Kingdom	176	94.5 (94.5)	90.8 (90.7)	91.0 (90.8)	90.8 (90.5)	89.4 (89.1)
Wales	7	96.6 (97.1)	95.0 (94.9)	94.4 (94.5)	94.7 (94.6)	94.1 (94.2)
Northern Ireland	4	95.8 (96.5)	91.8 (92.5)	91.6 (91.7)	91.4 (92.1)	91.6 (91.4)
Scotland	14	97.0 (97.0)	94.4 (94.2)	94.5 (94.2)	93.9 (93.6)	93.7 (93.5)
England	151	94.2 (94.0)	90.3 (90.1)	90.5 (90.3)	90.3 (90.0)	88.8 (88.4)
NHS England local teams*						
Q71	33	90.7 (90.8)	82.5 (82.3)	82.9 (82.7)	82.7 (82.3)	80.3 (80.2)
Q72	15	95.8 (95.2)	92.9 (92.6)	92.9 (92.5)	92.6 (92.4)	91.6 (91.1)
Q73 ²	13	93.8 (94.0)	91.0 (91.2)	91.7 (91.7)	91.5 (91.6)	90.0 (87.4)
Q74 ²	13	96.1 (95.8)	95.4 (93.5)	95.4 (93.8)	95.2 (93.6)	94.1 (92.4)
Q75	9	94.3 (95.0)	91.2 (91.5)	91.6 (91.8)	91.2 (91.0)	90.3 (92.8)
Q76	8	96.1 (95.4)	93.0 (91.8)	93.0 (91.8)	92.8 (91.5)	91.1 (90.2)
Q77	10	93.9 (94.0)	89.5 (89.9)	89.5 (90.1)	89.4 (89.9)	87.7 (88.3)
Q78	10	94.1 (94.4)	91.3 (90.9)	91.7 (91.4)	91.5 (90.9)	89.1 (89.1)
Q79	7	95.4 (95.5)	92.6 (92.5)	92.4 (92.6)	92.1 (92.4)	90.9 (91.3)
Q85	8	95.7 (95.5)	93.5 (93.3)	93.4 (93.3)	93.4 (93.1)	92.5 (92.5)
Q86	7	95.4 (95.8)	92.0 (93.0)	92.2 (93.1)	92.2 (93.1)	90.9 (91.9)
Q87	12	95.5 (95.7)	92.9 (92.7)	93.1 (93.0)	93.1 (92.7)	92.1 (91.6)
Q88	6	94.7 (92.8)	91.8 (91.5)	91.8 (91.0)	91.7 (91.2)	90.9 (89.3)

[†] Local Authorities/Health Boards

* See table 1 for key to local team organisational code

¹ April 2018 configuration

² Currently we are not able to report the new local teams in these areas as Cumbria LA does not map to the new configuration.

Table 3. Completed UK primary immunisations and boosters at five years by country and NHS England local team¹: April to June 2019 (January to March 2019)

Country	Number of LAs/HBs [†]	Primary		Booster		
		DTaP/IPV/Hib3%	MMR1%	MMR2%	DTaP/IPV%	Hib/MenC%
United Kingdom	176	95.7 (95.6)	95.1 (95.0)	87.4 (87.4)	86.2 (86.2)	93.1 (93.1)
Wales	7	97.5 (97.5)	97.1 (97.2)	92.4 (92.4)	92.7 (92.9)	95.2 (95.6)
N. Ireland	4	97.1 (97.1)	96.5 (96.6)	90.9 (91.6)	91.2 (92.9)	95.9 (95.9)
Scotland	14	98.2 (97.9)	97.0 (96.6)	91.3 (91.1)	91.9 (91.5)	96.5 (95.9)
England	151	95.4 (95.3)	94.7 (94.7)	86.7 (86.7)	85.3 (85.1)	92.6 (92.7)
<i>English Local Teams</i>						
Q71	33	92.3 (92.8)	90.2 (90.7)	76.1 (76.7)	73.3 (74.0)	88.2 (88.6)
Q72	15	96.5 (96.2)	96.1 (95.8)	89.7 (89.9)	88.7 (89.2)	93.8 (93.7)
Q73 ³	13	94.4 (94.5)	95.1 (95.1)	88.3 (88.4)	86.6 (87.3)	93.7 (93.4)
Q74 ³	13	97.2 (97.3)	96.9 (97.2)	91.9 (92.1)	90.7 (91.1)	95.3 (95.3)
Q75	8	96.6 (96.7)	95.9 (95.8)	88.2 (89.1)	88.2 (88.7)	92.9 (93.9)
Q76	8	97.2 (97.3)	96.6 (96.7)	88.9 (89.2)	88.0 (88.2)	94.7 (95.0)
Q77	10	95.9 (95.9)	95.3 (95.4)	85.4 (86.3)	84.1 (84.9)	93.2 (94.1)
Q78	10	96.3 (96.1)	96.1 (95.7)	89.2 (88.6)	87.9 (87.0)	93.7 (93.3)
Q79	7	96.6 (96.6)	95.8 (95.8)	89.6 (89.6)	88.7 (88.9)	93.6 (93.9)
Q85	8	97.0 (96.7)	96.3 (96.1)	92.2 (91.8)	90.7 (90.4)	95.3 (95.1)
Q86	7	96.7 (96.6)	96.2 (96.0)	91.0 (90.4)	90.0 (89.7)	95.5 (95.5)
Q87	12	96.3 (96.2)	95.4 (95.2)	90.2 (89.1)	88.7 (86.9)	93.7 (93.6)
Q88	6	93.6 (92.1)	93.8 (92.9)	85.6 (84.8)	84.8 (82.6)	89.8 (89.0)

* See table 1 for key to NHS England local team organisational code.

¹ April 2018 configuration

² Currently we are not able to report the new local teams in these areas as Cumbria LA does not map to the new configuration.

Table 4. Neonatal hepatitis B coverage at 12 and 24 months in England by NHS England Local Team: April to June 2019 (January to March 2019)

NHS England Local Team Code*	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 (4 doses) ²
Q71	33 of 33	201	88 (78)	33 of 33	236	89 (88)
Q72	15 of 15	37	92 (89)	15 of 15	42	88 (87)
Q73 ³	10 of 13	53	26 (33)	10 of 13	158	11 (28)
Q74 ³	12 of 13	10	70 (89)	12 of 13	9	100 (73)
Q75	6 of 9	13	85 (71)	6 of 9	5	0 (33)
Q76	8 of 8	27	93 (94)	8 of 8	29	90 (95)
Q77	10 of 10	48	92 (86)	10 of 10	62	100 (100)
Q78	10 of 10	51	98 (90)	10 of 10	61	84 (86)
Q79	7 of 7	29	66 (70)	7 of 7	31	87 (67)
Q85	8 of 8	10	70 (100)	8 of 8	4	100 (67)
Q86	7 of 7	13	77 (84)	7 of 7	15	87 (92)
Q87	12 of 12	43	95 (87)	12 of 12	26	92 (97)
Q88	6 of 6	29	86 (91)	6 of 6	29	93 (96)
England¹	144 of 151	564	82 (78)	144 of 151	707	72 (79)

* See table 1 for key to NHS England Local Team organisational code

¹babies offered two monovalent HepB vaccines (at birth and one month) and three hexavalent vaccines (at two, three and four months)

²babies offered four doses of monovalent HepB vaccine (at birth, one, two and 12 months)

³ Currently we are not able to report the new local teams in these areas as Cumbria LA does not map to the new 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

April to June 2019 (January to March 2019)

Upper tier Local Authority	Three-year average (2014-16) annual TB rate per 100,000	Number of eligible children (1st birthday in Jan to March 2019)	Universal BCG coverage% (previous quarterly estimate)
Newham	69.0	1414	62.4 (70.2)
Brent	57.8	1098	35.4 (34.9)
Hounslow	47.5	996	19.3 (16.6)
Ealing	47.3	1150	36.0 (37.0)
Slough	41.8		No universal programme
Redbridge	41.5	1145	80.0 (74.1)

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-class science, 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 are a distinct delivery organisation with operational autonomy to advise and support government, local authorities and the NHS in a professionally independent manner.

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/communicable diseases of public health significance and of reports on outbreaks, incidents and ongoing investigations.

Public Health England, Wellington House, 133-155 Waterloo Road, London SE1 8UG

Tel: 020 7654 8000 www.gov.uk/phe

Twitter: [@PHE_uk](https://twitter.com/PHE_uk) Facebook: www.facebook.com/PublicHealthEngland

Queries relating to this document should be directed to:

Immunisation and Countermeasures,

National Infection Service, PHE Colindale,

61 Colindale Avenue, London NW9 5EQ.

COVER@phe.gov.uk



© Crown copyright 2019

You may re-use this information (excluding logos) free of charge in any format or medium, under the terms of the Open Government Licence v3.0. To view this licence, visit [OGL](https://www.ogilive.gov.uk). Where we have identified any third party copyright information you will need to obtain permission from the copyright holders concerned.

Published: **September 2019**

PHE publications

gateway number: **2019122**

PHE supports the UN

Sustainable Development Goals

