

# Publication Report



## Teenage Booster Immunisation Statistics

Teenage Td/IPV booster immunisation uptake rates for school years  
2011/12 to 2012/13

Publication date – 25 March 2014

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## Introduction

Children in Scotland are protected through immunisation against many serious infectious diseases. Vaccination programmes aim both to protect the individual and to prevent the spread of these illnesses within the population. As a public health measure, immunisations have been hugely effective in reducing the burden of disease.

The [UK Childhood Immunisation Schedule](#) covers the recommended immunisations for children and young people aged 0 to 18 years. The schedule comprises the universal or routine immunisations which are offered to all children and young people at specified ages, as well as selective or non-routine immunisations which are targeted to children at higher risk from certain diseases.

The teenage Td/IPV booster immunisation boosts protection against three diseases: tetanus, diphtheria and polio. A total of five doses of tetanus, diphtheria and polio vaccine are recommended for long term immunity. These doses are offered according to the following schedule:

- The first three doses are offered to babies (at two, three and four months of age)
- The fourth dose at age 3 years 4 months
- The fifth dose (the Td/IPV booster vaccine) between 13 and 18 years of age

In Scotland the Td/IPV booster vaccine is routinely offered to teenagers in year three of secondary school (S3), predominantly through a school-based programme. Pupils in S3 are around 14 years of age. Pupils who miss the vaccination sessions in S3 are offered the vaccine in year four of secondary school (S4). Teenagers who are not fully immunised may also be given the vaccine in year five (S5) or six (S6) of secondary school or in general practice.

This publication provides information on uptake of the teenage Td/IPV booster vaccine for pupils in S3 and S4 by NHS board, for school years 2011/12 and 2012/13. This is the first publication on uptake of this vaccine and updates are planned annually. The statistics are published as 'experimental statistics' as they are new official statistics undergoing evaluation and there are data completeness and quality issues which are explained in subsequent sections. A key part of the 'experimental' label is user engagement in the evaluation of those statistics to help inform their development. Readers are invited to send comments on the publication to [NSS.isdchildhealth@nhs.net](mailto:NSS.isdchildhealth@nhs.net).

Uptake rates of routine immunisations for children up to 6 years and HPV immunisation among girls in S2 are both published separately in the [Child Health](#) topic area of the ISD website.

## Monitoring immunisation uptake rates

Immunisation uptake (sometimes referred to as coverage) refers to the proportion of the eligible population who have received the recommended doses of the relevant vaccines. Monitoring the proportion of the eligible population vaccinated is a key measure of the immunisation programme performance. It is of public health concern should immunisation rates decrease, as this makes the possibility of disease transmission more likely.

## Definitions

**Immunisation:** the process whereby a person is made immune or resistant to an infectious disease, typically by the administration of a vaccine. Vaccines stimulate the immune system to protect a person against subsequent infection or disease.

**Immunised:** To be fully immunised against a particular disease an individual must have received all required doses of the relevant vaccine. Detailed information about the current immunisation programmes in Scotland, the vaccines available, and the diseases they protect against, can be found via the [NHS Health Scotland Immunisation website](#).

**S3 cohort:** pupils in third year of secondary school (S3) i.e. aged around 14 years of age.

**S4 cohort:** pupils in fourth year of secondary school (S4) i.e. aged around 15 years of age.

**Uptake rates:** Uptake rates, sometimes referred to as coverage, relate to the number of persons immunised against a particular disease as a proportion of the population eligible to have received the vaccine.

Teenage Td/IPV booster uptake rates for each cohort are calculated as follows:

$$\frac{\text{Total number of eligible pupils immunised}}{\text{Total number of eligible pupils in the population (the cohort)}} \times 100$$

## Data sources

Data for this publication are derived from the Child Health Surveillance Programme School system (CHSP School) and Scottish Immunisation and Recall System (SIRS). These systems are used by all NHS Boards in Scotland and their primary purpose is to facilitate the invitation of children for specific child health programme contacts or immunisations as they reach the appropriate age. They also allow recording of information obtained and/or care given during the contacts, such as immunisations given.

CHSP School is used to facilitate the scheduling of immunisation sessions in school and the recording of immunisation data. After an immunisation contact has taken place the immunisation details are keyed into the system by administrative staff in NHS Boards. Immunisations recorded on the school system also update the child's immunisation record on SIRS.

ISD receive data extracts from SIRS and CHSP School for the purpose of producing and publishing immunisation uptake rates.

## Data quality and completeness

Uptake rates of the teenage Td/IPV booster vaccine are not available for the island boards (NHS Orkney, NHS Shetland and NHS Western Isles). In these boards the vaccine is routinely offered to teenagers through general practice rather than through a school-based programme. Td/IPV booster vaccines given in general practice are not routinely recorded on CHSP School or SIRS. As these boards have small population sizes, the absence of data for these areas has a negligible impact on the overall 'Scotland' uptake rate.

In mainland boards the teenage Td/IPV booster vaccine is offered through a school-based programme and data on vaccines given is recorded on CHSP School/SIRS. However there are some data completeness issues for these boards as follows:

- Although predominantly a school-based programme, a small number of vaccines may also be given in general practice, for example, when teenagers attending their GP practice are identified as not fully immunised. Td/IPV booster vaccines given in general practice are not routinely recorded on CHSP School or SIRS.
- In most boards there are some schools where the data on Td/IPV vaccinations given are not recorded, or only partially recorded, on CHSP School/SIRS. The number of schools, and the number and percentage of the S3 and S4 cohort affected, varies across boards. These are often, although not exclusively, private schools. For example, in some private schools it may be an independent contractor such as a local general practice which provides the vaccination service and in such instances data on vaccinations given are less likely to be captured on CHSP School/SIRS.

There may also be some inaccuracies in the cohort recorded on CHSP School. These are thought to be minor in general. Where CHSP School is not being used to schedule Td/IPV booster vaccinations sessions in schools and/or the data on Td/IPV vaccinations given are not recorded, or only partially recorded, on CHSP School, it is likely that the cohort recorded on CHSP School will be subject to more inaccuracies.

To improve the accuracy of the estimated uptake rates, data for some schools have been excluded for the calculations where data on vaccinations given are incomplete or not recorded on CHSP School/SIRS. There are also a small number of records on CHSP School where teenagers are allocated to 'default' school codes which indicate, for example, the school is unknown. These are likely to be data errors and therefore these data are also excluded from the calculations. The data excluded from the statistics were reviewed by the relevant NHS boards to ensure users with local knowledge of recording practices and data completeness provided verification that these were appropriate. Information on data completeness i.e. the number and percentage of the cohort excluded from estimated uptake rates is presented alongside the uptake rates in the Results and Commentary section as it is important that these are considered in conjunction.

There have been several changes to the UK childhood immunisation schedule recently, including amendments which mean teenagers are offered more immunisations. From school year 2013/14, teenagers in S3 in Scotland are also offered a booster dose of MenC vaccine, which protects against meningococcal group C bacteria infection. Uptake rates of the MenC booster vaccine will be included in future updates of this publication. In addition the flu immunisation programme is being expanded to offer flu vaccine annually to all children aged two to 17 years by around the end of 2015. Data initiatives are planned and underway to help facilitate the delivery of the expanded immunisation programme over the next few years. These include making changes to computer systems and reviewing data recording practices. These initiatives are also expected to improve the completeness of

recording of data Td/IPV booster vaccinations and therefore the accuracy of the reported uptake rates.

## Key points

- Uptake of the teenage Td/IPV booster vaccination among S3 pupils in Scotland (the class year in which the vaccine is routinely offered) was very similar in school years 2011/12 and 2012/13 at 83.7% and 83.4% respectively. Pupils not vaccinated in S3 are offered the vaccine in S4, so uptake rates increase over time. Uptake rates among S4 pupils increased slightly from 85.8% in 2011/12 to 86.9% in 2012/13.

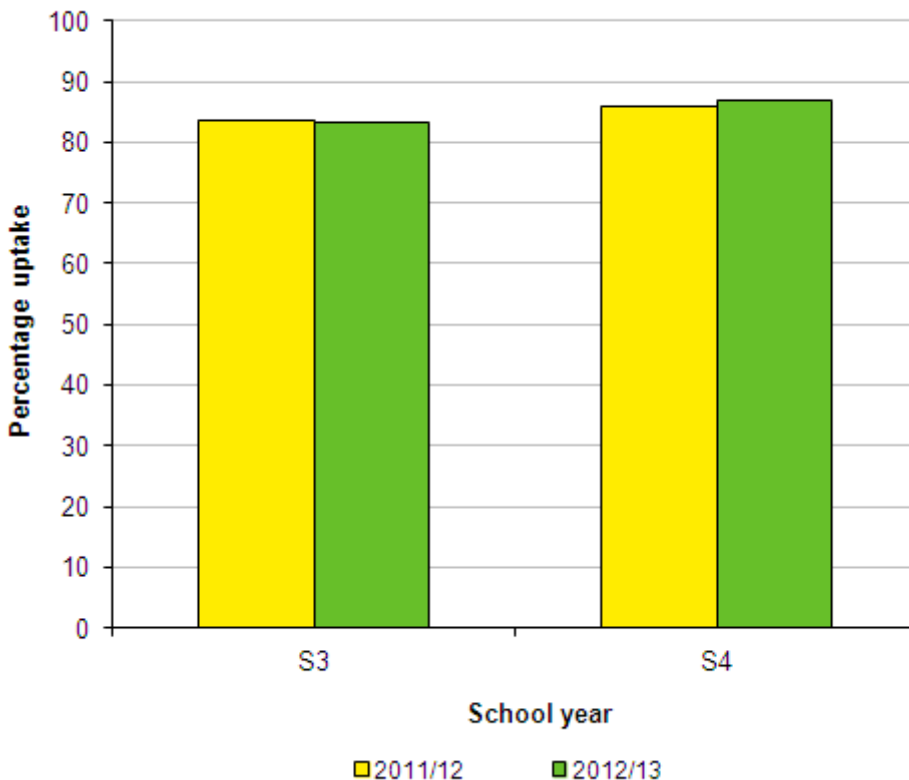
## Results and Commentary

### Estimated uptake rates

Uptake of the teenage Td/IPV booster vaccination among S3 pupils in Scotland (the class year in which the vaccine is routinely offered) was very similar in school years 2011/12 and 2012/13 at 83.7% and 83.4% respectively (Figure 1). Pupils not vaccinated in S3 are offered the vaccine in S4, so uptake rates increase over time. Uptake rates among S4 pupils increased slightly from 85.8% in 2011/12 to 86.9% in 2012/13. Some NHS boards may offer the vaccine to young people who are not fully immunised in S5 and S6. Uptake rates for class years S5 and S6 are not available. Teenagers who are not fully immunised may also be given the vaccine in general practice however these data are not routinely recorded on CHSP School/SIRS.

Estimated uptake of the teenage Td/IPV booster vaccine varies between boards, however as data completeness of the recording of vaccinations given in school on CHSP School varies across boards it would therefore be inadvisable to draw conclusions from these data.

**Figure 1: Teenage Td/IPV booster immunisation uptake rates for class years S3 and S4 in Scotland; school years 2011/12 and 2012/13**



Source: ISD Scotland; CHSP School as at 14 May 2012 and 13 May 2013/SIRS as at 11 November 2013



**Table 1: Teenage Td/IPV booster immunisation uptake rates by NHS board of school; pupils in S3 in school year 2011/12<sup>1</sup>**

NHS Board of school	Data completeness			Estimated uptake rates		
	Number in S3 cohort on CHSP School	Number in S3 cohort excluded from uptake statistics due to incomplete data entry for school	% of cohort excluded from estimated uptake rates	Number in S3 cohort included in the calculation of uptake rates	Number vaccinated by end of school year 2011/12 <sup>2</sup>	Estimated teenage Td/IPV booster uptake rate by end of school year 2011/12 (%)
Ayrshire & Arran	4,183	70	1.7	4,113	3,594	87.4
Borders	1,324	35	2.6	1,289	1,111	86.2
Dumfries & Galloway	1,621	4	0.2	1,617	1,366	84.5
Fife	3,904	728	18.6	3,176	2,535	79.8
Forth Valley	3,408	101	3.0	3,307	2,892	87.5
Grampian	6,081	336	5.5	5,745	4,974	86.6
Greater Glasgow & Clyde	13,588	301	2.2	13,287	11,647	87.7
Highland	3,651	685	18.8	2,966	2,355	79.4
Lanarkshire	6,943	65	0.9	6,878	5,720	83.2
Lothian	8,301	673	8.1	7,628	5,667	74.3
Orkney <sup>3</sup>	237	237	100.0	..	..	..
Shetland <sup>3</sup>	298	298	100.0	..	..	..
Tayside	4,569	146	3.2	4,423	3,669	83.0
Western Isles <sup>3</sup>	258	258	100.0	..	..	..
<b>Scotland</b>	<b>58,366</b>	<b>3,937</b>	<b>6.7</b>	<b>54,429</b>	<b>45,530</b>	<b>83.7</b>

Source: ISD Scotland; CHSP School as at 14 May 2012/SIRS as at 11 November 2013

1. The cohort is based on pupils recorded on CHSP School in class year S3 as at 14 May 2012.

2. The number vaccinated by the end of school year 2011/12 is defined as vaccinations given by 31 July 2012 and is based on the data recorded on SIRS as at 11 November 2013.

3. In NHS Orkney, NHS Shetland and NHS Western Isles teenage Td/IPV booster vaccinations are given in general practice and therefore data on vaccines given are not routinely recorded on CHSP School/SIRS.

.. Not available.

**Table 2: Teenage Td/IPV booster immunisation uptake rates by NHS board of school; pupils in S4 in school year 2011/12<sup>1</sup>**

NHS Board of school	Data completeness			Estimated uptake rates		
	Number in S4 cohort on CHSP School	Number in S4 cohort excluded from uptake statistics due to incomplete data entry for school	% of cohort excluded from estimated uptake rates	Number in S4 cohort included in the calculation of uptake rates	Number vaccinated by end of school year 2011/12 <sup>2</sup>	Estimated teenage Td/IPV booster uptake rate by end of school year 2011/12 (%)
Ayrshire & Arran	4,262	53	1.2	4,209	3,606	85.7
Borders	1,251	11	0.9	1,240	1,145	92.3
Dumfries & Galloway	1,654	1	0.1	1,653	1,476	89.3
Fife	4,037	452	11.2	3,585	2,706	75.5
Forth Valley	3,374	101	3.0	3,273	2,996	91.5
Grampian	5,940	126	2.1	5,814	5,062	87.1
Greater Glasgow & Clyde	13,541	237	1.8	13,304	12,185	91.6
Highland	3,568	335	9.4	3,233	2,660	82.3
Lanarkshire	6,964	32	0.5	6,932	5,729	82.6
Lothian	8,501	734	8.6	7,767	6,070	78.2
Orkney <sup>3</sup>	250	250	100.0	..	..	..
Shetland <sup>3</sup>	273	273	100.0	..	..	..
Tayside	4,464	107	2.4	4,357	3,850	88.4
Western Isles <sup>3</sup>	310	310	100.0	..	..	..
<b>Scotland</b>	<b>58,389</b>	<b>3,022</b>	<b>5.2</b>	<b>55,367</b>	<b>47,485</b>	<b>85.8</b>

Source: ISD Scotland; CHSP School as at 14 May 2012/SIRS as at 11 November 2013

1. The cohort is based on pupils recorded on CHSP School in class year S4 as at 14 May 2012.

2. The number vaccinated by the end of school year 2011/12 is defined as vaccinations given by 31 July 2012 and is based on the data recorded on SIRS as at 11 November 2013.

3. In NHS Orkney, NHS Shetland and NHS Western Isles teenage Td/IPV booster vaccinations are given in general practice and therefore data on vaccines given are not routinely recorded on CHSP School/SIRS.

.. Not available.

**Table 3: Teenage Td/IPV booster immunisation uptake rates by NHS board of school; pupils in S3 in school year 2012/13<sup>1</sup>**

NHS Board of school	Data completeness			Estimated uptake rates		
	Number in S3 cohort on CHSP School	Number in S3 cohort excluded from uptake statistics due to incomplete data entry for school	% of cohort excluded from estimated uptake rates	Number in S3 cohort included in the calculation of uptake rates	Number vaccinated by end of school year 2012/13 <sup>2</sup>	Estimated teenage Td/IPV booster uptake rate by end of school year 2012/13 (%)
Ayrshire & Arran	4,143	49	1.2	4,094	3,551	86.7
Borders	1,191	29	2.4	1,162	988	85.0
Dumfries & Galloway	1,592	107	6.7	1,485	1,254	84.4
Fife	3,689	363	9.8	3,326	2,552	76.7
Forth Valley	3,417	113	3.3	3,304	2,874	87.0
Grampian	6,043	162	2.7	5,881	5,271	89.6
Greater Glasgow & Clyde	13,091	206	1.6	12,885	11,275	87.5
Highland	3,674	441	12.0	3,233	2,536	78.4
Lanarkshire	6,798	168	2.5	6,630	5,528	83.4
Lothian	8,362	687	8.2	7,675	5,692	74.2
Orkney <sup>3</sup>	191	191	100.0	..	..	..
Shetland <sup>3</sup>	262	262	100.0	..	..	..
Tayside	4,434	142	3.2	4,292	3,467	80.8
Western Isles <sup>3</sup>	291	291	100.0	..	..	..
<b>Scotland</b>	<b>57,178</b>	<b>3,211</b>	<b>5.6</b>	<b>53,967</b>	<b>44,988</b>	<b>83.4</b>

Source: ISD Scotland; CHSP School as at 13 May 2013/SIRS as at 11 November 2013

1. The cohort is based on pupils recorded on CHSP School in class year S3 as at 13 May 2013.

2. The number vaccinated by the end of school year 2012/13 is defined as vaccinations given by 31 July 2013 and is based on the data recorded on SIRS as at 11 November 2013.

3. In NHS Orkney, NHS Shetland and NHS Western Isles teenage Td/IPV booster vaccinations are given in general practice and therefore data on vaccines given are not routinely recorded on CHSP School/SIRS.

.. Not available.

**Table 4: Teenage Td/IPV booster immunisation uptake rates by NHS board of school; pupils in S4 in school year 2012/13<sup>1</sup>**

NHS Board of school	Data completeness			Estimated uptake rates		
	Number in S4 cohort on CHSP School	Number in S4 cohort excluded from uptake statistics due to incomplete data entry for school	% of cohort excluded from estimated uptake rates	Number in S4 cohort included in the calculation of uptake rates	Number vaccinated by end of school year 2012/13 <sup>2</sup>	Estimated teenage Td/IPV booster uptake rate by end of school year 2012/13 (%)
Ayrshire & Arran	4,114	6	0.1	4,108	3,642	88.7
Borders	1,296	34	2.6	1,262	1,146	90.8
Dumfries & Galloway	1,601	1	0.1	1,600	1,469	91.8
Fife	3,895	738	18.9	3,157	2,634	83.4
Forth Valley	3,370	102	3.0	3,268	3,004	91.9
Grampian	6,067	300	4.9	5,767	4,986	86.5
Greater Glasgow & Clyde	13,565	202	1.5	13,363	12,183	91.2
Highland	3,626	426	11.7	3,200	2,645	82.7
Lanarkshire	6,857	62	0.9	6,795	5,873	86.4
Lothian	8,262	687	8.3	7,575	6,125	80.9
Orkney <sup>3</sup>	241	241	100.0	..	..	..
Shetland <sup>3</sup>	293	293	100.0	..	..	..
Tayside	4,534	153	3.4	4,381	3,647	83.2
Western Isles <sup>3</sup>	262	262	100.0	..	..	..
<b>Scotland</b>	<b>57,983</b>	<b>3,507</b>	<b>6.0</b>	<b>54,476</b>	<b>47,354</b>	<b>86.9</b>

Source: ISD Scotland; CHSP School as at 13 May 2013/SIRS as at 11 November 2013

1. The cohort is based on pupils recorded on CHSP School in class year S4 as at 13 May 2013.

2. The number vaccinated by the end of school year 2012/13 is defined as vaccinations given by 31 July 2013 and is based on the data recorded on SIRS as at 11 November 2013.

3. In NHS Orkney, NHS Shetland and NHS Western Isles teenage Td/IPV booster vaccinations are given in general practice and therefore data on vaccines given are not routinely recorded on CHSP School/SIRS.

.. Not available.

## **Uptake rates in the UK**

### **England**

In England coverage of the teenage Td/IPV booster immunisation is not routinely measured. The Health Protection Agency (HPA) estimates that coverage is around 70%. ([Public Health Functions to be exercised by NHS England, Service Specification No.12, Td/IPV \(teenage booster\) immunisation programme](#), published April 2013, Department of Health). Public Health England has proposed coverage of the teenage Td/IPV booster immunisation in England is evaluated through a new adolescent immunisation collection. The Health and Social Care Information Centre in England will be undertaking a consultation with users regarding this.

### **Wales**

In Wales, uptake of the Td/IPV teenage booster immunisation in young people reaching 16 years of age was 77.6% in the year ending 31<sup>st</sup> March 2013 ([Vaccine Uptake in Children in Wales, COVER Annual report 2013](#), published June 2013, Public Health Wales). The Td/IPV booster is given at 13 to 15 years of age (the age when the vaccine is given varies in different areas of Wales) and uptake of the completed booster dose is reported for young people reaching 15 and 16 years of age.

### **Northern Ireland**

Data on uptake of the teenage Td/IPV booster immunisation is not collected in Northern Ireland.

## Glossary

Td/IPV booster vaccine	3-in-1 vaccine to protect against tetanus, diphtheria and polio (IPV stands for inactivated polio vaccine)
Diphtheria	<p>Diphtheria is an acute infectious disease caused by the bacterium <i>Corynebacterium diphtheriae</i> affecting the upper respiratory tract and occasionally the skin. Spread is by droplet infections and through contact with articles soiled by infected persons.</p> <p>An effective vaccine against the disease was introduced in 1940. A combined Diphtheria, Tetanus and Pertussis vaccine has been in use in the UK since the 1950s. Since October 2005, Diphtheria is now part of the combined 'five-in-one' vaccine, consisting of Diphtheria, Tetanus, Pertussis, Polio and Hib. A booster dose is also given to children at around three years four months of age. Teenage Td/IPV booster vaccine, the reinforcing doses of Diphtheria, Tetanus and Polio, is given to 13 to 18 year olds.</p>
Polio	<p>Polio, or poliomyelitis, is an acute illness brought on when one of three types of polio virus invades the gastro-intestinal tract. The virus has an affinity for nervous tissue, and can cause paralysis if it reaches the central nervous system.</p> <p>Routine immunisation was introduced in 1956. Since October 2005, Polio is now part of the combined 'five-in-one' vaccine, consisting of Diphtheria, Tetanus, Pertussis, Polio and Hib. A booster dose is also given to children at around three years four months of age. Teenage Td/IPV booster vaccine, the reinforcing doses of Diphtheria, Tetanus and Polio, is given to 13 to 18 year olds.</p>
Tetanus	<p>A toxin released from a bacterium called <i>Clostridium tetani</i> causes tetanus. Spores from these bacteria are present in soil and manure. The spores can be picked up quite easily through minor scratches, puncture wounds, burns or more serious injury.</p> <p>An effective vaccine against the disease was introduced, nationally in 1961 and a fall in the incidence of tetanus followed. Since October 2005, Tetanus is now part of the combined 'five-in-one' vaccine, consisting of Diphtheria, Tetanus, Pertussis, Polio and Hib. A booster dose is also given to children at around three years four months of age. Teenage Td/IPV booster vaccine, the reinforcing doses of Diphtheria, Tetanus and Polio, is given to 13 to 18 year olds.</p>
SIRS	Scottish Immunisation and Recall System
CHSP School	Child Health Surveillance Programme School

## List of Tables

Table No.	Name	Time period	File & size
1 to 4	<a href="#">Teenage Td/IPV booster immunisation uptake rates by NHS board of school; pupils in S3 and S4</a>	School years 2011/12 to 2012/13	Excel [74kb]

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## Further Information

Further information can be found on the [ISD website](#)

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## Appendix

### A1 – Background Information

#### Timeliness

Teenage Td/IPV booster uptake rates are collated by school year, which in Scotland ends in late June. Future updates of this publication are planned annually in October to include figures for the previous school year. The next publication will include figures for school year 2013/14 and is planned for release in October 2014.

#### Methods

The S3 and S4 cohorts (the denominators) are identified as pupils recorded in these class years on CHSP School as at May of the relevant school year (i.e. near the end of the school year).

The data recorded on SIRS (as at November 2013) on teenage Td/IPV booster immunisations given are then mapped to these cohort of pupils to derive the number of these pupils immunised by the end of the school year (the numerators). For statistical purposes the end of school year has been defined as 31 July.

Pupils not vaccinated in S3 are offered the vaccine S4, so uptake rates increase over time.

## A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	Teenage Booster Immunisation Statistics
Description	Teenage Td/IPV booster immunisation uptake rates for school years 2011/12 and 2012/13
Theme	Health and Social Care
Topic	Child Health
Format	Excel workbooks, PDF
Data source(s)	Child Health Surveillance Programme School (CHSP School), Scottish Immunisation and Recall System (SIRS)
Date that data are acquired	11 November 2013
Release date	25 March 2014
Frequency	Annual (the timing of the publication is planned to change to October)
Timeframe of data and timeliness	Data for school years 2011/12 and 2012/13.
Continuity of data	This is the first publication on this topic. Data continuous for years presented.
Revisions statement	These data are not subject to planned revisions. Each release reports on uptake rates for specific cohorts by the end of the relevant school year.
Revisions relevant to this publication	None
Concepts and definitions	Further information about the current immunisation programmes in Scotland, the vaccines available, and the diseases they protect against, can be found via the NHS Health Scotland Immunisation website <a href="http://www.immunisationscotland.org.uk">www.immunisationscotland.org.uk</a>
Relevance and key uses of the statistics	The statistics are designed for monitoring and evaluating the effectiveness of the national immunisation programme. The statistics are used for a variety of purposes, including: <ul style="list-style-type: none"> <li>• Health Protection Scotland use the statistics to inform decision making and planning in the co-ordination and strengthening of health protection in Scotland.</li> <li>• The Scottish Government uses the statistics to monitor the performance of the national immunisation programme; inform policy decision making on the programme.</li> <li>• NHS Boards use the statistics to monitor the local performance of their immunisation programmes and</li> </ul>

	plan improvements to services e.g. identify actions required.
Accuracy	See section on <a href="#">Data quality and completeness</a> in the report.
Completeness	See section on <a href="#">Data quality and completeness</a> in the report.
Comparability	See <a href="#">Uptake rates in the UK</a>
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to <a href="#">published guidelines</a> .
Coherence and clarity	Data are available as a PDF and tables on the <a href="#">Childhood Immunisation</a> area of the ISD website.
Value type and unit of measurement	Numbers and percentages
Disclosure	The <a href="#">ISD protocol on Statistical Disclosure Protocol</a> is followed.
Official Statistics designation	Official Statistics
UK Statistics Authority Assessment	These are new experimental statistics which have not been submitted for assessment by the UK Statistics Authority
Last published	This is the first publication
Next published	October 2014
Date of first publication	25 March 2014
Help email	<a href="mailto:NSS.isdchildhealth@nhs.net">NSS.isdchildhealth@nhs.net</a>
Date form completed	26 February 2014

## **A3 – Early Access details (including Pre-Release Access)**

### **Pre-Release Access**

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

#### **Standard Pre-Release Access:**

- Scottish Government Health Department
- NHS Board Chief Executives
- NHS Board Communication leads

#### **Extended Pre-Release Access**

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

- Scottish Government Health Department (Analytical Services Division)

#### **Early Access for Quality Assurance**

These statistics will also have been made available to those who needed access to help quality assure the publication:

- NHS Board immunisation co-ordinators
- NHS Board child health/screening department administrators
- Health Protection Scotland

## A4 – ISD and Official Statistics

### About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

**Purpose:** To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

**Mission:** Better Information, Better Decisions, Better Health

**Vision:** To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

### Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).