

NHS Greater Glasgow and Clyde	Paper No. 24/103
Meeting:	NHSGGC Board Meeting
Meeting Date:	27 August 2024
Title:	Autumn/Winter Vaccination 2024
Sponsoring Director:	Dr Emilia Crighton, Director of Public Health
Report Author:	Marion O'Neill, General Manager Bryan Forbes, Service Manager

1. Purpose

The purpose of the attached paper is to:

Provide an update on the delivery requirements set out by Scottish Government and Public Health Scotland for the Autumn/Winter Vaccination campaign and to share the NHSGGC delivery plan to improve uptake and achieve enhanced patient outcomes whilst increasing operational efficiencies.

2. Executive Summary

The paper can be summarised as follows:

- Summary and analysis of uptake levels of previous Covid-19 and/or Flu campaigns
- Confirmation of 24/25 delivery requirements
- Outline of delivery plan

3. Recommendations

The meeting is asked to consider the following recommendations:

- Note the enclosed delivery plan.
- Support awareness raising activities for the Autumn/Winter vaccine programme.

4. Response Required

This paper is presented for **awareness**.

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

• Better Health	<u>Positive</u> impact
• Better Care	<u>Positive</u> impact
• Better Value	<u>Positive</u> impact
• Better Workplace	<u>Positive</u> impact
• Equality & Diversity	<u>Positive</u> impact
• Environment	<u>Positive</u> impact

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity:

The governance arrangements (recently revised to provide clarity around escalation) has good representation ensuring that key stakeholders have been involved in the development of the delivery plan contained in this paper. This includes pharmacy, primary care, finance, estates, HR and nursing colleagues.

7. Governance Route

This paper has been previously considered by the following groups as part of its development:

Corporate Management Team
Public Health SMT
Strategic Immunisation Group
Adult Vaccination Group

8. Date Prepared & Issued

Prepared on 5 July 2024
Issued on 20 August 2024

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1. Introduction

NHSGGC's vaccination programme is the single largest NHS public health intervention in Scotland, administering over 750,000 vaccines every year. The programme is a key intervention to reduce the pressure on the health and social care system over winter. The Autumn/Winter 2024/25 vaccination programme requires Health Boards to deliver both Covid and Flu vaccinations. Planning is well underway within NHSGGC to deliver improvements in the vaccine programme to achieve enhanced patient outcomes, increased operational efficiency and overall excellence in service delivery.

2. Background

2.1 Eligible Groups

Guidance from Scottish Government and Public Health Scotland has confirmed the following eligible groups for the Autumn/Winter Flu Programme:

Flu Cohort	2023-24	2024-25
Children aged 6 months – 2 years in clinical risk group	√	√
All children aged 2-5 years not yet at school	√	√
All primary school children (primary one to primary seven)	√	√

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All secondary school pupils (years one to six)	√	√
Residents in care homes for older adults	√	√
All those aged 65 and over	√	√
Frontline health and social care workers	√	√
Non-frontline NHS staff	√	√
Household contacts of those with a weakened immune system	√	√
All those aged 18 to 64 years in a clinical at risk group. This includes: <ul style="list-style-type: none"> • Those experiencing homelessness • Those experiencing substance misuse • All prisoners within the Scottish prison estate 	√	√
Healthy 50-64 age group	√	X
Teachers	√	X
Prison staff	√	X

Table 1: Eligible Cohorts for Autumn/Winter Programme 2023-24 vs 2024-25

On Friday 2nd August, the Joint Committee on Vaccination and Immunisation (JCVI) announced the recommended eligible groups for Covid vaccination. Although Frontline Health and Social Care staff have not been named, reference is made to health authorities making decisions/using leeway to offer Covid-19 vaccination to Frontline HSCWs (including all staff in care homes for older adults) this winter.

Covid cohorts 2024-25:

- Residents in care homes for older adults
- All those aged 65 and over
- All those aged 6 months to 64 years in a clinical at risk group
- Frontline Health and Social Care Workers

2.2 Delivery Timeline

Commencement of the programme will be 23rd of September (Care homes, Housebound and Health care staff) with community clinics running from 1st of October. National aspirations are that 85% of all eligible patients have been offered an appointment by the 8th of December but that appointments will continue to be available until January 31st for Covid and March 31st for Flu.

2.3 Vaccine Type

Early indications given to Boards are that the Covid Vaccine to be given during the Winter Programme will be a new vaccine (still to be confirmed/go through the due regulatory processes).

3. Assessment

3.1 23/24 Autumn/Winter Uptake Rates

NHSGGC administered over 600,000 vaccinations as part of last year's Autumn/Winter programme (226,707 Covid and 287,582 for Flu vaccines for adults; 123,037 Flu vaccines for children). Uptake rates varied considerably across eligible groups, with poorer uptake generally associated with cohorts with lesser transparency around eligibility (e.g. those at risk and those with weakened immune systems). Frontline health care workers and all social care workers had low uptake. These patterns are reflected in national uptake rates, as can be seen in the table below.

Cohort		NHSGGC	Scotland
Overall	Covid	49.5%	56.6%
	Flu (adults)	46.8%	53.7%
	Flu (children)	62.6%	59.3%
Weakened Immune System	Covid	54.6%	59.4%
	Flu	59.9%	64.1%
Health Care Staff	Covid (front line workers only)	32.6%	35.1%
	Flu	39.6%	42.2%

3.2 Increasing staff uptake

Given the low uptake amongst staff, a survey was undertaken nationally by Public Health Scotland to understand the reasons for low uptake and to support future programme improvements. Key headlines from the survey (which had over 5,000 respondents; 20% of which who had not received a vaccine they were eligible for) showed:

- HSCW with additional risk factors (e.g. health condition/carer/lives with someone with WIS) were most likely to be vaccinated (except pregnancy)
- Practical issues (e.g. unable to get away from work, unsure if eligible, difficulty with online booking) prevented uptake
- Vaccine confidence is lower for Covid and is more notable in those with lower household incomes (with concerns about side effects and effectiveness)
- Most respondents who did not receive Flu were positive or neutral on its safety and effectiveness

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- Feeling fit and healthy was a major reason for not being vaccinated against Flu

Proposed actions within the report to improve uptake were already implemented within NHSGGC's 23/24 planning:

- Vaccinators attending workplace was most popular with Frontline Health Care Staff (66%)
- Delivery of vaccines during working hours (60%)
- No appointment needed (50%)

3.3 Increasing uptake amongst people with weakened immune systems (WIS)

There is significant variation in uptake across the eligible cohorts, with particularly poor uptake amongst people with weakened immune systems. Feedback from stakeholders (including primary care colleagues via Area Medical Committee) is this is linked to lack of clarity and understanding over eligibility. Given these patients are likely to be accessing support/attending appointments with secondary care clinicians, there are opportunities to embed tailored vaccine uptake discussions as part of ongoing care. Similarly, working with charities on public awareness messages for people with specific conditions could address lack of awareness around eligibility and awareness (as NHS England did in 2022 alongside Mencap, Blood Cancer UK, MS Society and Diabetes UK in a national press release).

3.4 Proposed 24/25 Delivery Plan

There are four different delivery elements in place to deliver the Autumn/Winter campaign.

1. Care homes and housebound patients:

Offered vaccination via HSCP vaccination teams.

2. Families of preschool children:

Receive letters with a booked appointment at a local Flu clinic (with option to re-arrange).

3. Families of primary and secondary school children:

Receive consent packs distributed via schools with vaccinations delivered in schools. In addition secondary school children who are judged to be able to consent can self-consent on the day of the clinic.

4. Community Clinics

The largest volume of vaccinations delivered via community clinics. Building on revisions made to the delivery model during 23/24 to improve uptake, this year's programme planning is focused on improving a) awareness of eligibility and the benefits of vaccination; b) suitability of venues and c) availability of appointments.

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Community Clinic Delivery Plan

Workstream	Issues	Interventions
Awareness of eligibility and the benefits of vaccination	Limited understanding of benefits of vaccines within certain populations	Expansion of peer worker model across populations with low uptake
	Limited national communications	NHSGGC communications campaign
	Low uptake amongst staff	On site clinics and re-establishment of peer vaccinator model
	Low uptake amongst people with weakened immune systems	Engagement with secondary care clinics and third sector partners who have high volume of patients e.g. cancer services
Venues and accessibility	Suitability of current venues	1,277 community clinics across 30 venues including: Glasgow City: Stobhill Hospital, QEUH, New Victoria, Priesthill community centre, Braes Shopping Unit Castlemilk, St Marks Hall Drumchapel, Whiteinch Centre, Easterhouse Supporting Hands East Ren: Eastwood Health Centre (HC), Barrhead HC West Dun: Clydebank HC, Alexandria Town Hall, Concorde Centre Inverclyde: Port Glasgow Health Centre, Broomhill Gardens Renfrewshire: Piazza shopping unit (tbc), Renfrew Parish, Johnstone Town Hall East Dun: Kirkintilloch Town Hall, Milngavie Town Hall
		Continued used of mobile bus (mainly Glasgow City)
Staffing model and availability of appointments	High volume of DNAs	31,000 earlier appointments to those who previously engaged in addition to drop-ins
		Targeted engagement for those who did not attend previously

4. Recommendations

Board is asked to consider the following recommendations:

- Note the enclosed delivery plan, noting the targeted engagement activities aimed at reducing the variability across different cohort groups.
- Support awareness raising activities for the Autumn/Winter vaccine programme.

5. Implementation

The Public Health Directorate, Acute, HCSP and corporate teams are working to deliver the programme. This is managed through the Strategic Immunisations Group (which has this year updated its terms of reference and membership).

6. Evaluation

A fortnightly report on the number of vaccinations given will be produced and shared at the Strategic Executive Group. A monthly performance report is also shared at CMT.

Levels of uptake will be kept under review and additional efforts made to address any areas where uptake is less than expected.