

# 9. Covid Vaccination update

25<sup>th</sup> January 2022, BNSSG Primary Care  
Commissioning Committee

# Overview

## 1. Covid Vaccination Programme

- Phase 3 booster programme
- Current cohorts
- Outreach update
- Communication plan

# Latest statistics for BNSSG

2,026,052  
Total vaccinations

763,042

First dose vaccinations

707,749

Second dose vaccinations

551,932

Booster or third primary vaccinations

30,598



People vaccinated as part of our outreach programme



84%

Of people in our area aged 16+ have received their first dose



82.4%

Of eligible people aged 12+ have received their first dose

Covid-19  
Vaccination  
Programme



For more  
information

Visit the BNSSG  
Healthier Together  
website

## Sites



1

Mass vaccination centre



53

GP led sites



13

Pharmacy teams

## social media



@HTBNSSG



@BNSSGCCG



@BNSSG\_CCG

	12-15	16-17	18-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80+
National	54.5%	72.0%	80.0%	81.0%	87.5%	89.3%	94.0%	90.7%	95.3%	97.8%	99.8%	97.1%	96.1%	100%*	93.4%
BNSSG	55.3%	77.8%	80.1%	79.9%	91.1%	97.2%	100%*	96.9%	98.7%	100%*	100%*	99.2%	98.0%	100%*	94.5%
BNSSG total	23,588	15,057	81,892	64,005	67,841	63,881	58,642	55,827	59,816	59,196	49,522	42,166	42,841	33,773	44,995

Shaping better health

# BNSSG Population Activity

1<sup>st</sup> to 16<sup>th</sup> January 2022



13<sup>th</sup> to 31<sup>st</sup> December 2021



# Programme Update Dashboard

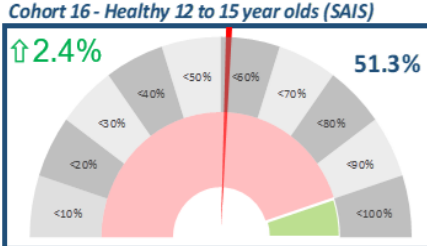
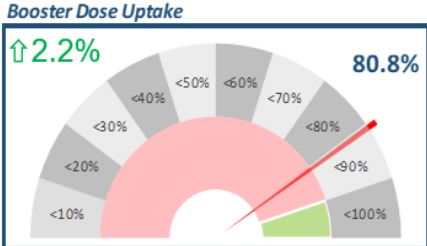
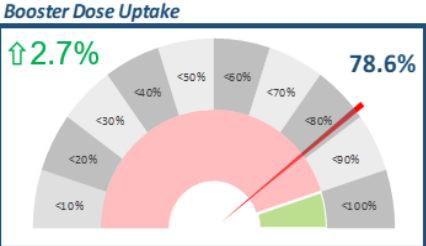
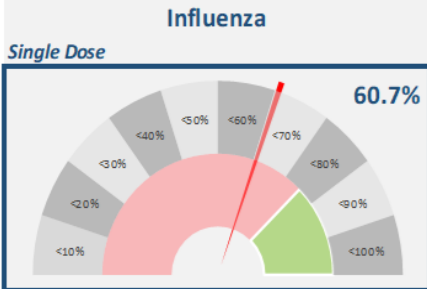
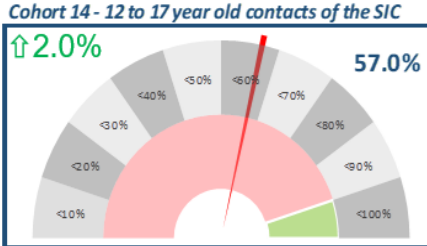
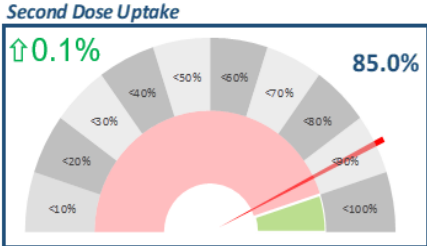
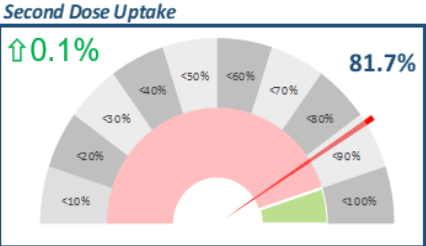
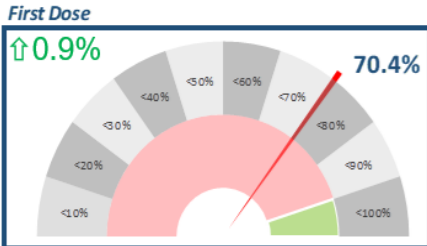
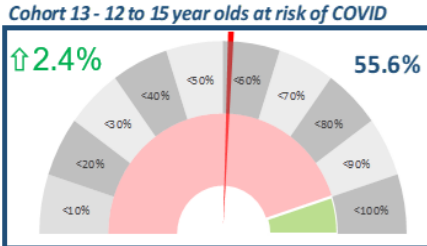
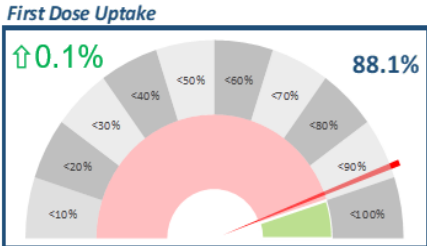
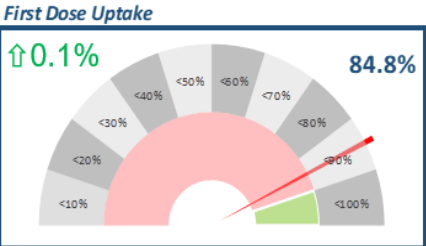
## Cohorts 1 to 12 (JCVI Cohorts & 18+)

## Cohort 6 - At Risk

## Cohorts 13 to 16 (12 to 17 Year Olds)\*

## Cohorts 15 (16-17 year olds)

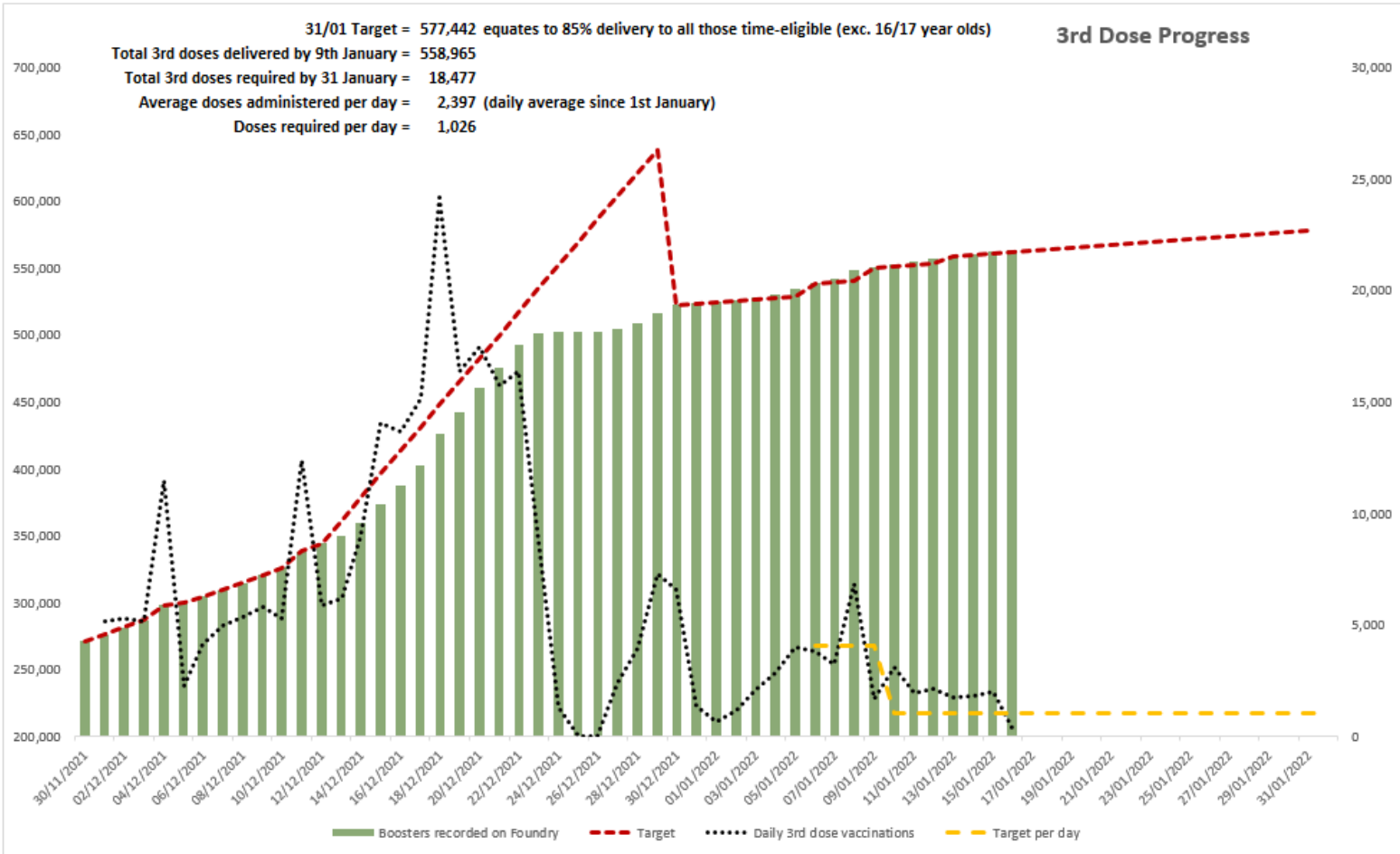
Each of the illustrations below show the percentage of all eligible persons in each column - PLEASE NOTE that some citizens will not yet be time-eligible for second/third/booster doses



**First to Second Dose Conversion 96.3%**

\*Cohorts 13 to 16 (12 to 17 Year Olds) - Illustrations show uptake to First Dose only

# Third dose trajectory



85% target above based on all the total of time-eligible citizens as at 16<sup>th</sup> January  
 At present the 16-17 year olds (become eligible from 17/01)

# Current focus of the vaccination programme

- Evergreen offer for all
- Accelerated booster programme progress
  - [C1468-jvci-advice-in-response-to-the-emergence-of-the-b.1.1.529-omicron-variant-next-steps-for-deployment.pdf](#) ([england.nhs.uk](#))
- Children's vaccination programme
  - 2<sup>nd</sup> doses for 12-15y olds in school and outside (opportunistic 1<sup>st</sup> doses)
  - Boosters for 16-17y olds; 12-15yr old at risk and household contacts of immunocompromised people
  - 3<sup>rd</sup> primary doses of CEV and subsequent boosters 12-15y
  - Clinically Extremely Vulnerable 5-11y olds

# Current focus of the vaccination programme

- Mandatory vaccination for healthcare staff by April 2022
  - LMC Support to practices
  - Programme wide support offer – language hub, vaccine coaches, videos, webinars
  - Allowances for recent covid infection and redeployment until eligible
- Future vaccination model
  - Evaluation of the programme
  - Substantive recruitment



# PCNs

- Letter to general practice 3/12/21
  - Freeing up capacity
  - Income support – QOF, IIF, item of service payment increased, supplement for housebound, care homes, immunocompromised
  - Supporting the workforce – military teams, increased recruitment of admin, clinical, and volunteer staff
- All PCNs continue to be engaged and delivering vaccinations
- Excellent coverage of care homes and housebound patients
- Walk in and booked appointments
- Opt out to deliver vaccinations to clinically extremely vulnerable 5-11 year olds
- Preparing for CEV 5-11s from next week
- Supporting Sirona in vaccinating 12-15s second doses
- Supporting outreach clinics/new approaches

# Current Cohorts:

Cohort	Vaccine	Booster / Primary	Doses	When	Place of Delivery
Anyone aged 18+ except those who are severely immunocompromised	MRNA OR AZ if age 40+	2 Primary Doses	<b>2 doses</b> 2 <sup>nd</sup> dose 8 weeks after 1 <sup>st</sup> dose Must be at least 4 weeks (28 days) after positive COVID test	Now	<ul style="list-style-type: none"> <li>- Walk-ins</li> <li>• Book on the Day</li> <li>• Vaccination Centre</li> <li>• PCN Clinics</li> <li>• Community Pharmacy</li> <li>• Outreach</li> <li>• Hospital clinics where appropriate</li> </ul>
	MRNA (unless PEG allergy then AZ)	1 Booster Dose	<b>1 dose</b> At least 3 months after final primary dose Must be at least 4 weeks (28 days) after positive COVID test	Now	
Anyone 18+ who is severely immunocompromised	MRNA	3 Primary Doses	<b>3 doses</b> 3 <sup>rd</sup> dose is 8 weeks after 2 <sup>nd</sup> dose Must be at least 4 weeks (28 days) after positive COVID test	Now	With evidence of eligibility: <ul style="list-style-type: none"> <li>• PCN clinics</li> <li>• Walk Ins</li> <li>• Book on the day</li> <li>• Community Pharmacy</li> <li>- Outreach</li> <li>- Vaccination Centre</li> <li>• Hospital clinics where appropriate</li> </ul>
	MRNA (unless PEG allergy then AZ)	Booster	1 Dose booster dose 3 month after 3 <sup>rd</sup> dose Must be at least 4 weeks (28 days) after positive COVID test	Now	

# Current Cohorts

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
<b>Healthy 12 -15 Year olds</b>	Pfizer	2 Primary Doses	<u>2 doses</u> Must be at least 12 weeks from Positive Covid Test Result 2 <sup>nd</sup> dose at least <b>12 weeks</b> after 1 <sup>st</sup> dose	Now	<ul style="list-style-type: none"> <li>School and Colleges by SAIS</li> <li>Community clinics for 2<sup>nd</sup> dose</li> <li>Vaccination Centre (NBS appointments)</li> <li>PCNs (where subcontracted and using NBS), walk in or local booking system</li> <li>Outreach clinics</li> </ul> <p>Staged consent not require if parent /legal guardian is present at point of vaccination</p>
<b>Children aged 12 - 15 severely immunocompromised</b>	Pfizer	3 Primary Doses	<u>3 doses</u> 3 <sup>rd</sup> dose 8 weeks after 2 <sup>nd</sup> dose (if possible delayed until 2 weeks post immunosuppression) Must be at least 4 weeks (28 days) after positive COVID test	Now	<ul style="list-style-type: none"> <li>PCN clinics via Digital Booking System</li> <li>Vaccination Centre with prior agreement</li> </ul> <p>Staged consent not require if parent /legal guardian is present at point of vaccination</p>
	Pfizer	Booster Dose	<u>1 Dose</u> 30 micrograms Pfizer-BioNTech COVID-19 vaccine (Comirnaty®) no sooner than 3 months after completion of their primary course:	Now	
<b>Clinically at risk 12-15 year olds or a household contact of someone with a weakened immune system</b>  <b>Clinically extremely vulnerable children with severe neuro-disabilities</b>	Pfizer	2 Primary Doses	<u>2 doses</u> Must be at least 4 weeks (28 days) after positive COVID test 2 <sup>nd</sup> dose <b>8 weeks</b> after 1 <sup>st</sup> dose.	Now	<ul style="list-style-type: none"> <li>PCN clinics via local Digital Booking System</li> <li>Also will be identified via school based immunisation team</li> <li>Vaccination Centre with prior agreement</li> </ul> <p>Staged consent not require if parent /legal guardian is present at point of vaccination</p>
	Pfizer	Booster Dose	<u>1 Dose</u> 30 micrograms Pfizer-BioNTech COVID-19 vaccine (Comirnaty®) no sooner than 3 months after completion of their primary course:	Now	

# Current Cohorts

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
<b>16 &amp; 17 Year Olds (unless severely immunocompromised -see below)</b>	Pfizer	2 Primary Doses	<b>2 doses</b> Must be 12 weeks after positive COVID test result 2 <sup>nd</sup> dose at least <b>12 weeks</b> after 1 <sup>st</sup> dose	Now	Where staff signed off: <ul style="list-style-type: none"> <li>• Schools/ Colleges</li> <li>• Community Pharmacies</li> <li>• Outreach</li> <li>• Walk Ins</li> <li>• PCN</li> <li>• Vaccination Centre</li> </ul>
	Pfizer	Booster Dose	<b>1 Dose</b> 30 micrograms Pfizer-BioNTech COVID-19 vaccine (Comirnaty®) no sooner than 3 (91 days) months after completion of their primary course:	Now NBS open for Booster doses from 17/1/22	
<b>Household contact of people with weakened immune system aged 16-17</b>	Pfizer	2 Primary Doses	<b>2 doses</b> Must be at least 4 weeks (28 days) after positive COVID test 2 <sup>nd</sup> dose <b>8 weeks</b> after 1 <sup>st</sup> dose.	Now	<ul style="list-style-type: none"> <li>• Schools/ Colleges</li> <li>• Community Pharmacies</li> <li>• Outreach</li> <li>• Walk Ins</li> <li>• PCN</li> <li>• Vaccination Centre</li> </ul>
	Pfizer	Booster Dose	<b>1 Dose</b> Must be at least 4 weeks (28 days) after positive COVID test . No sooner than 3 (91 days) months after completion of their primary course:	Now	<ul style="list-style-type: none"> <li>• Schools/ Colleges</li> <li>• Community Pharmacies</li> <li>• Outreach</li> <li>• Walk Ins</li> <li>• PCN</li> <li>• Vaccination Centre</li> </ul>
<b>16 &amp; 17 Year Olds - Severely immunocompromised</b>	Pfizer	3 Primary Doses	<b>3 doses</b> Must be at least 4 weeks (28 days) after positive COVID test 3 <sup>rd</sup> dose 8 weeks after 2 <sup>nd</sup> dose (if possible delayed until 2 weeks post immunosuppression )	now	<ul style="list-style-type: none"> <li>• PCN clinics via Digital Booking System</li> <li>• Vaccination Centre with prior agreement</li> <li>• Hospital</li> </ul>
	Pfizer	1 Booster Dose	<b>1 dose</b> Must be at least 3 months(91 days) after primary in line with the clinical advice	Now	<ul style="list-style-type: none"> <li>• PCN clinics via Digital Booking System (Riviam)</li> <li>• Vaccination Centre with prior agreement</li> <li>• Hospital</li> </ul>

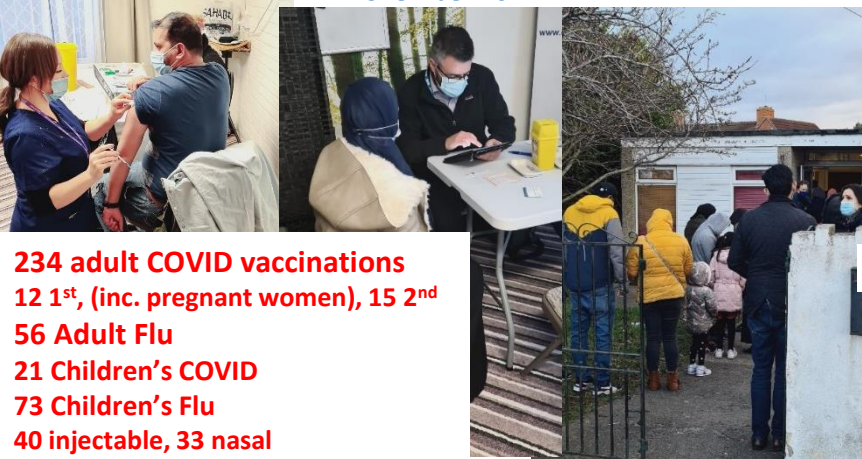
# Current Cohorts

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
<b>5-11 Year Olds- At Risk including household contacts people with weakened immune system</b>	Pfizer	Primary	Pfizer BioNTech COVID-19 2 x vaccine 10µg. 8 week interval between 1 <sup>st</sup> and 2 <sup>nd</sup> dose The minimum interval between any vaccine dose and recent COVID-19 infection should be 4 weeks.	No earlier than 26 <sup>th</sup> January 2022	PCN based clinic – opt out arrangement
<b>5-11 Year Olds- no underlying conditions</b>	Pfizer	Primary	Awaiting JCVI Decision	Awaiting JCVI Decision	Community clinics supporting group of local schools Parental supervision Will require support to release students to attend clinic with parents Outreach – Family Clinics PCN delivery (where opt in) Vaccination Centre

# Maximising Uptake – Reducing Inequalities

Over the last 6 weeks the outreach team, aligned with the overall programme, has stepped up vaccinations with clinics returning to previous under served venues and the addition of new clinics. Clinic venues included mosques, churches, businesses, antenatal clinics, homeless shelters, asylum seeker hotels, secure units, drug & alcohol centres, community and learning centres. Some examples below....

Shahporan Islamic Centre walk-in family vaccination clinic 27th November 2021



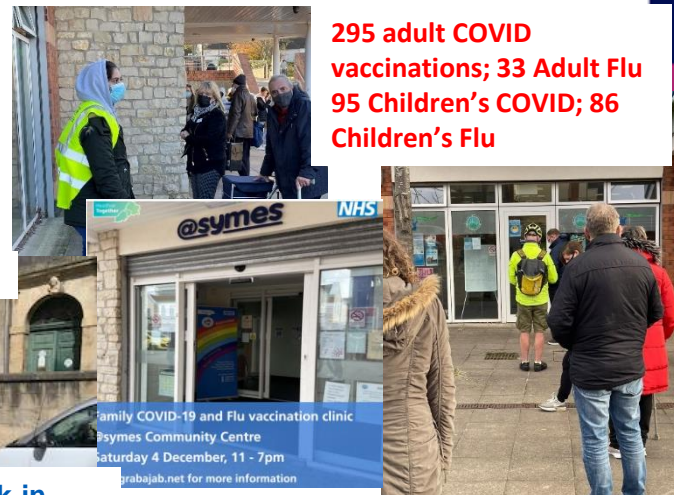
**234 adult COVID vaccinations**  
**12 1<sup>st</sup>, (inc. pregnant women), 15 2<sup>nd</sup>**  
**56 Adult Flu**  
**21 Children's COVID**  
**73 Children's Flu**  
**40 injectable, 33 nasal**

**30,500+**  
**Vaccinations in**  
**outreach**  
**Since March 2021**  
**+>11,000 in the last**  
**6 weeks**

Romanian Church – 12<sup>th</sup> Dec



@ Symes Community Building family walk-in vaccination clinic 4<sup>th</sup> December 2021



**295 adult COVID vaccinations; 33 Adult Flu**  
**95 Children's COVID; 86 Children's Flu**

Family COVID-19 and Flu vaccination clinic @ Symes Community Centre Saturday 4 December, 11 - 7pm [grabajab.net](http://grabajab.net) for more information

For All Healthy Living Centre walk-in family clinics



**30<sup>th</sup> Nov, 7<sup>th</sup> Dec, 14<sup>th</sup> Dec,**  
**21<sup>st</sup> Dec, 4<sup>th</sup> Jan, 11<sup>th</sup> Jan**  
**1000+ covid vaccinations**  
**including 250+ children's**



The Rock Community Centre walk-in vaccination clinic 18<sup>th</sup> December 2021



**192 COVID vaccinations, 15 Adult Flu**  
**24 1<sup>st</sup> (including 2 children); 33 2<sup>nd</sup>; 135 Boosters**

Barton Hill walk-in vaccination clinic 8<sup>th</sup> January 2022



**Haddii aanad qaadani talaalkii Koofid-19 kaalay rugta talalka ee lugu qabanayo Barton Hill**  
**Sabti 8 bisha Koobaad 2022**  
**Sabti 22 bisha Koobaad 2022**  
**10 subaxnimo iiaa 4 galnimo**  
**Caruurta ka weyn 12 jir waxay heli karaan talalka Koofid-19**  
**Ciwaan: Wellspring Healthy Living Centre, Beam Street, BS5 9QY**

**215 COVID vaccinations**  
**60 1<sup>st</sup>, 52 2<sup>nd</sup>, 88 Booster,**  
**15 4<sup>th</sup>**



# Communications Update

## Operational Communications:

- Support for rapid scaling up of vaccination capacity to meet Prime Minister's target of offering everyone eligible a booster by the end of December.
  - Working with Healthier Together comms leads to ensure consistent messaging.
  - Media relations focused on encouraging booked appointments rather than attending walk-ins.
  - Emphasis that majority of vaccinations given in GP-clinics in BNSSG
- Programme messaging: Providing clarity around eligibility for boosters, third doses for immunosuppressed and 12 to 15 year olds programme.
- Media themes: Boosters, Vaccinations for 12 to 15 year olds, walk-in clinics.
- School-based Immunisation Programme (in partnership with Sirona): Ongoing comms with schools and local authorities, impact of 12 week gap after positive COVID test.

## Maximising Uptake:

- Leaflet normalising Covid-19 vaccine during pregnancy printed and distributed. Translated into 7 languages including Romanian, Somali and Arabic. Well-received and shared with SW Regional comms leads for use in other systems.
- Comms support (posters, media, social media, influencers) for outreach clinics in under-served communities including Barton Hill, Weston, Lawrence Hill
- Supporting awardees of Reducing Inequality Grants.

## Regular Programme Outputs:

- Promoting walk-in clinics on [www.grabajab.net](http://www.grabajab.net)
- Social media calendar – increased spend
- Infographic with uptake figures
- MP briefings and responses to queries from constituents
- Supporting customer services
- Updated and distributed Anti-Vax Guidance



**Governance:** The BNSSG Flu Group will report to BNSSG Mass Vaccination Programme Partnership Board and BNSSG CCG PCCC.

**Report for:** Relevant internal/external committees.

**Written by:** Debbie Campbell, Lisa Rees, Jacci Yuill, Fiona Budd

## Background

The timing and magnitude of potential influenza and COVID-19 infection waves for winter 2021 to 2022 are currently unknown, but there is concern regarding the rate of influenza that may be seen this year, with mathematical modelling indicating the 2021 to 2022 influenza season in the UK could be up to 50% larger than typically seen and it is also possible that the 2021 to 2022 influenza season will begin earlier than usual. Influenza vaccination is therefore an important priority this coming autumn to reduce morbidity and mortality associated with influenza.

## Key Highlights since the last report

- Flu levels remain low in the South West region and similar to the previous week.
- Flu communications are ongoing and include highlighting that flu vaccination remains a national priority and that where appropriate co-administration of both flu and covid vaccines should be considered. Communications are currently linked with the Covid booster campaign, along with an ongoing ask to continue to vaccinate, with a particular focus on the clinical at risk groups. Bristol Local Authority have issued communications to childminders and nurseries in relation to the 2/3 year old vaccination.
- A recent survey to GP practices, undertaken by the Screening and Immunisation team has highlighted that most practices in BNSSG had booked clinics planned throughout December with others having an opportunistic offer in place with clear advice on their website for patients. One practice was not sighted on their seasonal flu uptake rates and so information on the One Care dashboards has been shared. The Screening and Immunisation team have also issued reminders to practices about the national ambitions for the different eligible flu cohorts.
- The schools immunisation team continue to vaccinate children in primary and secondary schools throughout January. Work is planned to understand the variation in uptake in schools across BNSSG.
- Data overall continues to show a positive uptake rate for the over 65years cohort and we have now achieved the national ambition overall with a BNSSG current uptake of 85%. The 'at risk' cohort however remains close but below trajectory with uptake of 53%, this is an increase from 52% last week (national ambition 75%). Variation in uptake continues to show between the different at risk cohorts, although some improvements have been seen. Due to a failed data extraction from EMIS, we are awaiting up to date uptake figures up to 14/01/21.
- Ongoing positive results seen by the outreach work, with 570 Flu vaccinations being delivered as per 06/01/22, including both adult and child vaccinations.
- Opportunistic Flu vaccines are now also being offered as a pilot at the Mass Vaccination Centre to those people presenting for their Covid booster vaccination. However, to date numbers have been low due to the focus on covid boosters but communications to make every contact count are being revisited to try to encourage participation.

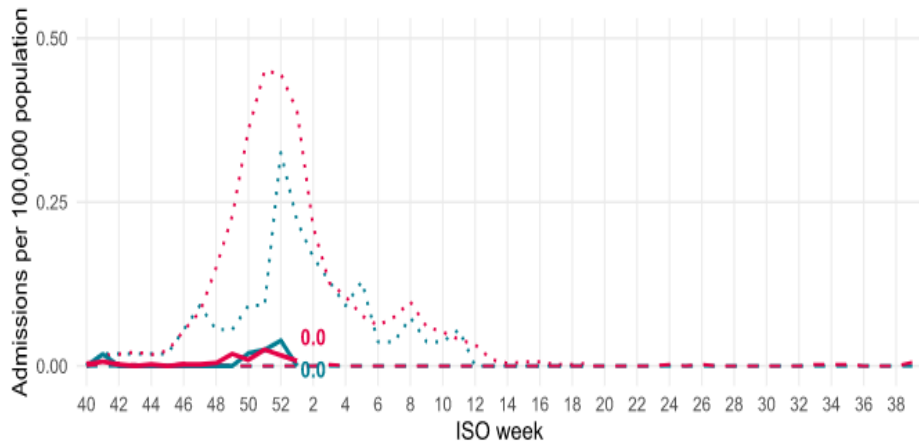


## Influenza and ILI - South West Summary – Week 1 2022 (03/01/2022 to 09/01/2022)

- The ICU/HDU admission and hospital admission rates with confirmed influenza remain low in the South West and England (Figures 2 and 3).
- The percentage positivity of respiratory samples tested for influenza A and reported to DataMart remain low (0.8% and 0.5% respectively in the South West and in England). Positivity for influenza B has also remained low (0.0% in both the South West and in England)
- The number of cases of adenovirus and parainfluenza in the South West reported to SGSS in week 1 increased compared to week 52. The number of cases of hMPV, influenza B\*, RSV and rhinovirus reported to SGSS in week 1 decreased compared to week 52. The number of cases of influenza A remained similar to those reported in the previous week
- *Please note these figures should be interpreted with caution. False-positive influenza A and B cases (including reported co-infection) following vaccination with live attenuated influenza vaccine may have been reported to SGSS.*

### Hospital admissions –ICU/HDU with confirmed Flu

**Figure 2.** ICU/HDU admissions with confirmed influenza – SARI Watch (Mandatory Surveillance)



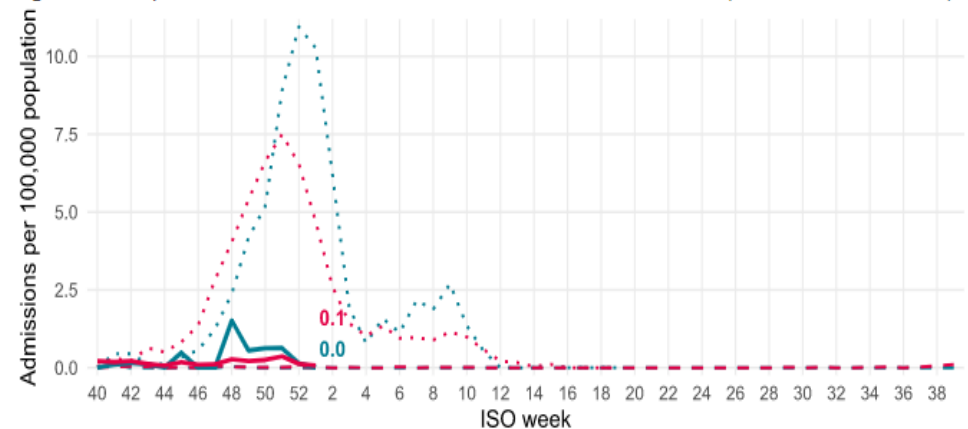
..... South West 2019-2020\*    - - - - South West 2020-2021    ———— South West 2021-2022  
..... England 2019-2020\*    - - - - England 2020-2021    ———— England 2021-2022

\*Data from 2019-20 USISS Mandatory Surveillance

Labels shown for most recent week's rate

### Hospital admissions with confirmed Flu

**Figure 3.** Hospital admissions with confirmed influenza – SARI Watch (Sentinel Surveillance)



..... South West 2019-2020\*    - - - - South West 2020-2021    ———— South West 2021-2022  
..... England 2019-2020\*    - - - - England 2020-2021    ———— England 2021-2022

\*Data from 2019-20 USISS Sentinel Surveillance

Labels shown for most recent week's rate

### Flu vaccine Stock and Availability

- Earlier in the season, there were national delivery delays to flu vaccines supplied by Seqiris which affected practices and pharmacies across BNSSG. All practices and pharmacies have now received most pre-ordered vaccine stock and the situation continues to be monitored. LAIV and other manufacturers' flu vaccine stock were currently not affected. NBT, UHBW, Sirona have also all now received flu vaccine deliveries.
- Information from DHSC regarding the national centrally supplied [Flu vaccines was issued on 11<sup>th</sup> October](#). These vaccines are available for NHS providers, general practices and community pharmacies, to top up local supplies once they run low and will be deployed to areas where it is most needed to maximise uptake. General practices can now place orders for this stock through the NHS England and NHS Improvement (NHSEI) Regional Public Health Commissioning Team. Community pharmacies can purchase additional stock directly through wholesalers, and so should continue to order stock via wholesalers throughout the season as they typically do. Information on the regional ordering process has been published and shared with all relevant providers.
- There have been recent reports that some pharmacies are having issues ordering their vaccine stock from the wholesaler( in particular the vaccines for the under 65 year cohort) and this is being monitored and feedback to the regional team. Some chains of community pharmacy are reporting that they don't wish to purchase anymore stock from the Central Supply due to a risk they may not be used. There are also some reports of GP practices with excess stock and this is being reviewed.

### Provider Plans – Current position

- All GP practices have invited patients in for vaccination and have vaccination clinics taking place. A flexible approach is happening in relation to the co-delivery of vaccines due to variations in vaccine delivery schedules. There is a mix with some practices using off site premise for vaccination vs. onsite clinics. The Avon LMC have supported practice staff with immunisation training. Survey results from a survey from the Screening and Immunisation team suggest most practices still have booked clinics and those that don't are offering opportunistic vaccinations with clear advice on their practice website for patients.
- Community pharmacies also have clinics ongoing. They have noticed good interest in vaccination from the 50-64year cohort. The Avon LPC are supporting their training needs.
- NBT and UHBW are continuing to deliver their staff vaccinations as well as vaccinating pregnant women via midwives as well as some clinically 'at risk' in-patients. AWP's flu vaccine programme is ongoing and includes some inpatients.
- Sirona's Flu vaccination programme is ongoing. This includes vaccination of their staff, vaccination of housebound patients on their case load and the delivery of school immunisations. School vaccinations programme delivered by Sirona; Special Educational Needs schools have been prioritised and there has been a focus on secondary schools, doing co-administration with covid vaccine where possible. Delivery of flu vaccinations to primary school children has also now commenced and continuing in January.
- The three Local Authorities have plans in place to support the vaccination of their staff. A communication has been issued and reiterated to registered social care providers to highlight the importance of the Flu vaccination and how to book. This was further highlighted by a winter resilience event also took place on 30<sup>th</sup> September. Currently low uptake from social care staff due to misconceptions around vaccination as well as some difficulties accessing the vaccine. Communications and work with the Avon LPC aim to support these vaccinations is ongoing.

### Frontline Health Care Worker (FHCW) vaccine uptake – Current position

- UHBW are offering both a roving vaccination and a drop in clinic model and are tailoring their approach in response to what the data is showing e.g. satellite clinics in the divisions where uptake is lowest. BAME staff groups are showing a low uptake to date and so are liaising with religious teams to support. UHBW are also considering the diversity of their vaccination workforce to try to improve uptake. Educational sessions across the trust have also been held. A change in definition for FHCW in line with national guidance, is potentially linked to uptake data showing lower uptake this year compared to last year although uptake is ahead of 19/20. A UHBW Fights Flu week with extra clinics and roaming vaccinators took place prior to the Christmas period.
- NBT are offering a drop in Flu clinic twice a week and have held a Saturday clinic to vaccinate staff against both Flu and Covid. It has been noted that due to the work pressures, it can be difficult for staff to leave clinical areas to get vaccinated. Staff also have the offer of a vaccine via the UWE site. A roving model has also been considered. The profile of the vaccine campaign has been raised and they are working with communications to further promote including a promotional video from the Executive team. NBT also have the mandate to increase regular clinics to 4 or 5 days a week if needed. A late pilot clinic is also being planned to capture late and night staff.
- Both UHBW and NBT report many staff have been vaccinated elsewhere, however, the data is currently hard to quantify. Staff have been asked to report their vaccination status to trusts if they have been vaccinated elsewhere. It is hoped further data via the staff COVID-19 vaccination status records(which also includes flu vaccination status) will help when this information become available later this week.
- AWP are utilising the Vaccination Track system to vaccinate staff via booked clinics as well as via peer vaccinators. AWP continue to offer vaccinations and are finding a number of staff in the over 50 years cohort have had their vaccine from their GP practice. AWP are also looking into the reasons for staff declines to help inform their work as well as to ensure all staff vaccinations are captured in the data.
- Sirona's staff campaign is supported by the Vaccination Track system with staff being able to access the flu vaccine at UWE whilst receiving their Covid vaccination booster or via their community base clinics. Clinics allow drop in options to support uptake. Data breakdown is being reviewed regularly and targeted communications issued to staff.
- Health and Social Care staff employed by a registered residential care or nursing home or registered domiciliary care provider, employed by Direct Payments or by a voluntary managed hospice who are directly involved in the care of vulnerable patients or clients who are at increased risk from exposure to influenza are able to access Flu vaccinations via their GP or community pharmacies. Some feedback suggests that staff are finding it difficult to access the vaccine and so the Avon LPC and Local Authorities are working together to address.

Provider	Uptake (17/01/22 unless otherwise stated)
UHBW	63% (FHCW)
NBT	52%(Approx Fig.) (13/12/21)
AWP	55% (FHCW)
Sirona	63% (FHCW)

### Communication plans

- A local BNSSG winter communications group has been set up to ensure consistent messaging across the ICS. A small budget has been allocated to support Flu communications to a variety of audiences. This will have a focus on the BAME population as well as hard to reach groups. A sports campaign will also be included following the success from last year's campaign. A new health literacy booklet is being developed to support people keeping well over the winter months and this will include vaccination information.
- National communications have been produced for the staff vaccine programme and patient facing communications/ tools are also available. The wider national winter vaccination communications include an integrated campaign signalling the importance of both the flu and covid vaccines building on learnings from previous flu and COVID-19 vaccine marketing activity to bust myths, overcome barriers and here the benefits of vaccines to drive uptake effectively. A 'boost your immunity' national headline campaign has also been launched and materials shared in a PHE [campaign resource centre](#).
- [Public communications](#) have also been published which explains to patients how they can help protect themselves and their children against flu this winter. It includes information for children, eligible adults and pregnant women, and details why it's very important that people at increased risk from flu, or who care for someone vulnerable, to have their free vaccination every year. A local 'grabajab' webpage is being used to promote the Flu vaccination campaign alongside the Covid booster vaccinations. Local communications have also started including items on BBC Points West and BBC Radio Bristol supported by local GPs and Community Pharmacists. A Radio Ujima session will have a recording this week to highlight the importance of vaccination.
- A local maternity focused social media video and a 2/3 year old focused social media video has been filmed to help encourage uptake in these specific cohorts. Bristol Local Authority have issued communications regarding the 2/3 year old vaccines to childminders and nurseries to support uptake.
- To prevent the Flu messaging becoming lost in ongoing Covid campaigns, BBC Points West and ITV West Country have had specific features on Flu vaccinations, with the filming taking place in a local GP vaccination clinic.
- NHS England/ PHE have also issued a communication to GP reception staff to ensure they are aware of the eligible cohorts for the Flu vaccine this year.
- Regular communications relating to Flu are issued to practices in the General Practice Bulletin and a Flu resource webpage available on the One Care Teamnet website. Recent reminders have included supporting patients with learning disabilities with their flu vaccinations and reminders about vaccinating clinically 'at risk' children.
- A press release was issued last week to highlight that there is 'still time to arrange a Flu vaccine'.



### Maximising uptake

Representatives from the BNSSG System Flu group are also part of the Mass Vaccination Maximising Uptake group to ensure both vaccination programmes are aligned and that lessons learnt are taken forward. A Flu outreach task and finish group has been set up and it is overseeing the offer of flu vaccine in outreach clinics.

Initial successes have been seen at the St Paul's Learning Centre vaccination clinics in October with 44 flu vaccines being given in total along side the offer of a covid vaccination where appropriate. These clinics were supported by community pharmacies. It is positive to note that some of the people presenting at the clinic were vulnerable and agreed to be vaccinated.

A clinic at a homeless hostel has also taken place with encouraging results with 31 people vaccinated.

Family clinics have also shown to be a success, the initial clinic resulted in 44 adult patients accepting a flu vaccine, many of whom had not previously received the vaccine and 35 children (19 received the injection option due to the intranasal vaccine containing porcine gelatine) in the first clinic. Another successful family clinic was held on 27/11/21 at the Southmead Mosque, with 56 adult flu vaccines and 73 children's flu vaccines (of which 40 were IM vaccinations) were delivered.

A clinic at the Rock community Centre on 20/11/21 vaccinated an additional 58 adults.

A further family clinic was held on 4/12/21 in Hartcliffe with 33 adults and 86 children being vaccinated and on the 30/11/21 a clinic in the Bournville area of Weston took place vaccinating 24 adults.

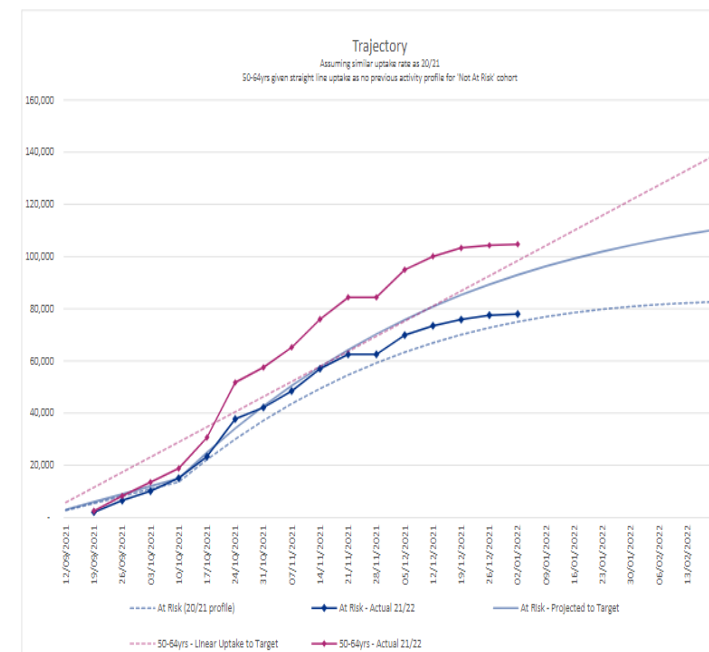
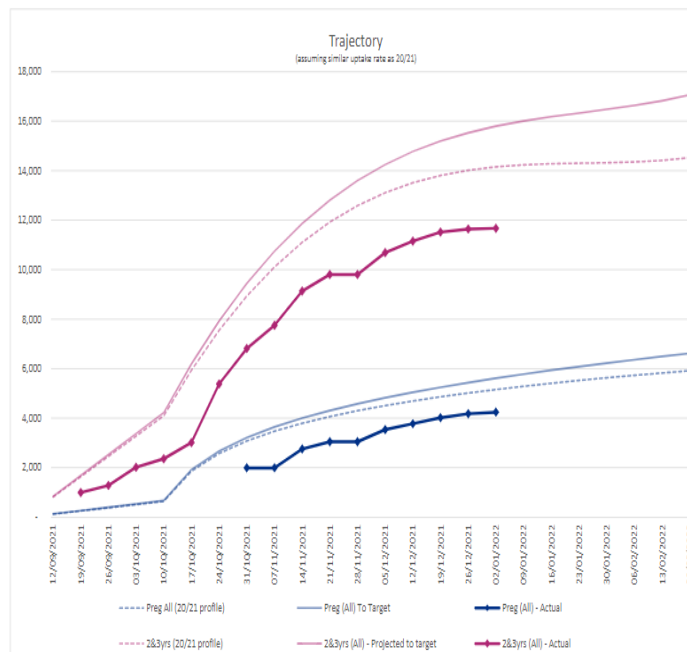
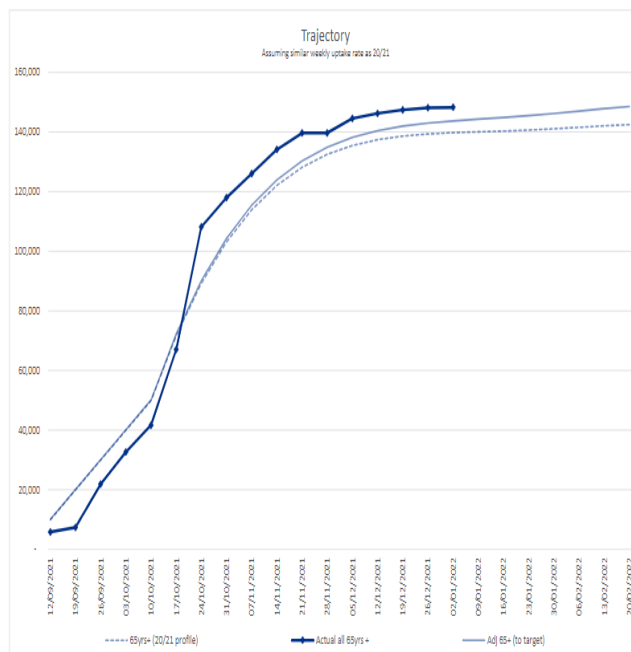
Flu vaccinations were also offered when an outreach clinic was held at the Amazon warehouse on 7/12/21.

Additional clinics have been held over the festive period and overall, 570 flu vaccines have now been given via outreach up to 6<sup>th</sup> January 2022.

Bristol Inner City PCN plan to issue reminder text messages to patients about vaccination to help support their local uptake.

Opportunistic Flu vaccines are now also being offered as a pilot at the Mass Vaccination Centre to those eligible people presenting for their Covid booster vaccination. However, to date numbers have been low due to the focus on covid boosters but communications to make every contact count are being revisited to try to encourage participation.

## Vaccination data and updates –Week 52



- Uptake data monitoring is supported by matrix working between system analysts from the CCG BI team, OneCare and the PHE Screening and Immunisation team. Trajectory data is now from Immform following this data becoming available. The trajectory has been developed which shows the uptake pattern derived from the 20/21 uptake rate using data from the Immform database. It has been adjusted to reach the 21/22 target.
- There has been an increase in vaccinations over the last week. Current uptake remains above trajectory for the over 65 years cohort and overall we have now met the national ambition of 85%. The 'at risk' cohort however is slowing and remains under trajectory, current uptake is 53% which is a slight increase from 52% the previous week. The slowing may have been impacted by the Christmas period. There also continues to be variation in the different at risk cohorts with the liver and neurology cohorts showing the lowest uptakes (see: blue line - graph 3 and slide 10). As the primary school vaccination programme continues, it is hoped the at risk group uptake will increase further. The 50-64yr old cohort continue to show above trajectory and are coming forward for vaccination well.
- Nationally there have been concerns in relation to the slow uptake of the vaccine in 2 and 3 year olds due to children being carriers of the virus and so important they are vaccinated prior to flu circulation, uptake is showing below trajectory although has been increasing, current uptake is 48% (see pink line - middle graph). Ongoing local communications to patients have been issued to support the uptake in this group and the clinical risk groups.

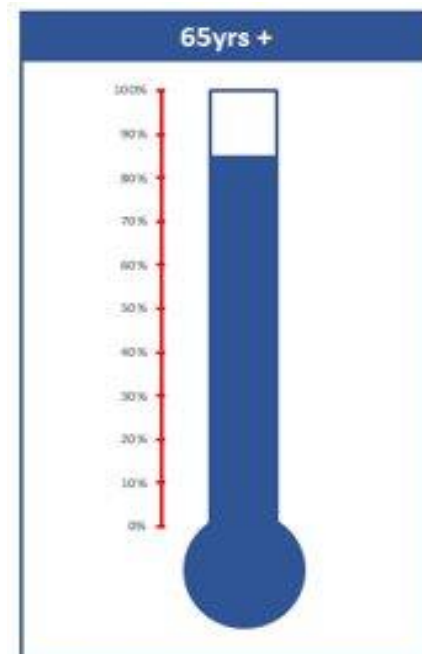
\*Under 65yrs data includes Pregnant, At Risk and 2&3yr olds (50-64yrs old, not within an additional 'at risk' group, have been excluded pending further development of the trajectory). Data for 50-64yrs includes all patients.

### Mitigation plans

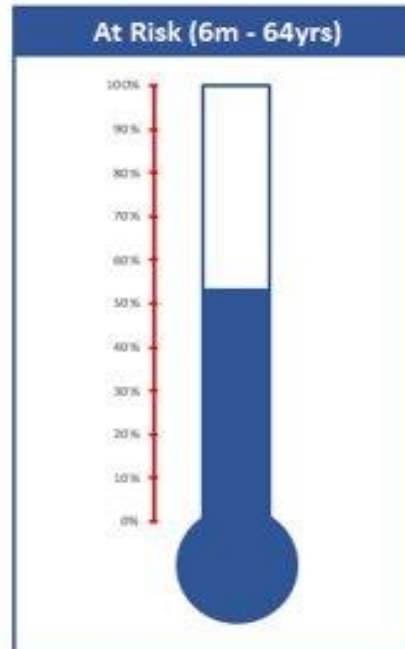
- Data is helping to inform our work in reviewing uptake in 'at risk' groups and areas of lower uptake, so that proactive action can be taken.
- There is a staff sharing agreement with PCNs in place in BNSSG for the Covid vaccination programme so that additional staff can be accessed if required to support vaccine delivery and a similar agreement for the Flu programme is in development.

# Overall Uptake by Cohort (week 52)

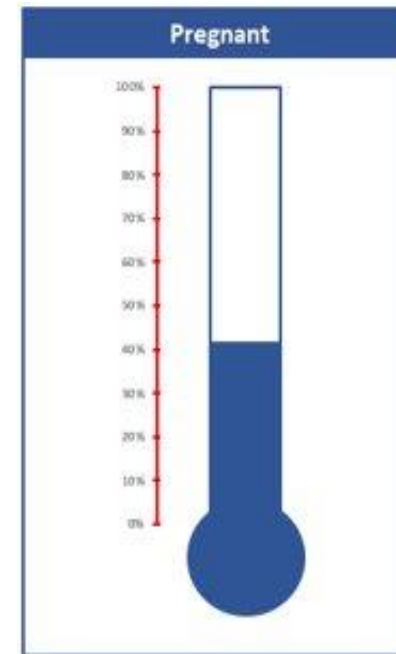
Data source: Immform



Population	174,808
Vaccinations to date	148,304
Current Uptake	65%
Target	65%
Extra to reach Target	283
Not Vaccinated	26,504



Population	147,118
Vaccinations to date	77,989
Current Uptake	53%
Target	75%
Extra to reach Target	32,350
Not Vaccinated	69,129

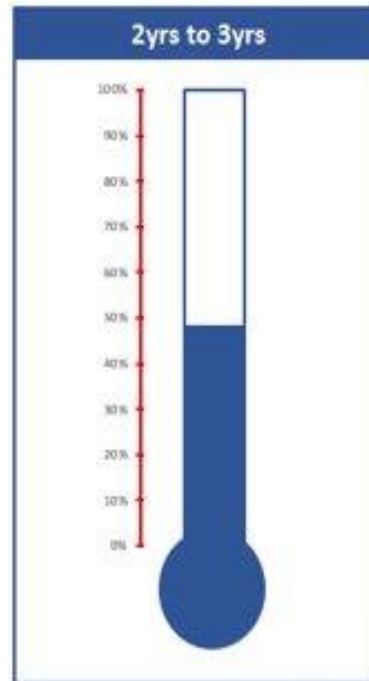


Population	10,269
Vaccinations to date	4,243
Current Uptake	41%
Target	75%
Extra to reach Target	3,459
Not Vaccinated	6,026

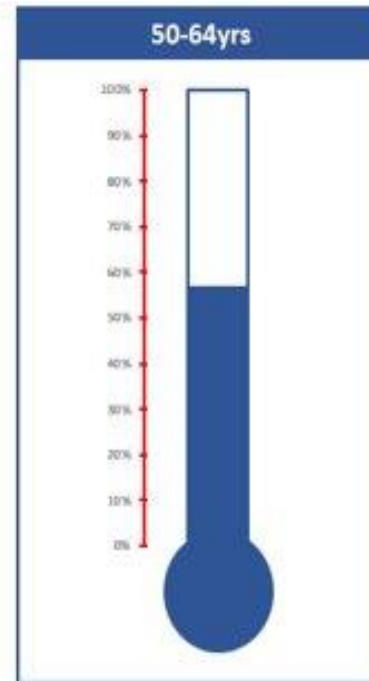
- This report has been created using 2 disparate sources, a local flow of data from EMIS via onecare and national data provided through the immForm portal. It is acknowledged that due to a variety of reasons data will be different between these sources.
- Each slide contains information on the bottom right hand corner to explain the data source for that slide.
- The cohort defined as being 'pregnant women' is all females who are recorded as pregnant on 01/09/21.
- IMD deciles are defined by residential address.
- Data will be subjected to small number suppression.

Data source - immForm Latest vaccine data: 02/01/2022  
 Data source - EMIS via OneCare. Latest vaccine data: 29/12/2021

# Overall Uptake by Cohort (cont.)



Population	43,407
Vaccinations to date	20,760
Current Uptake	48%
Target	75%
Extra to reach Target	11,775
Not Vaccinated	22,627

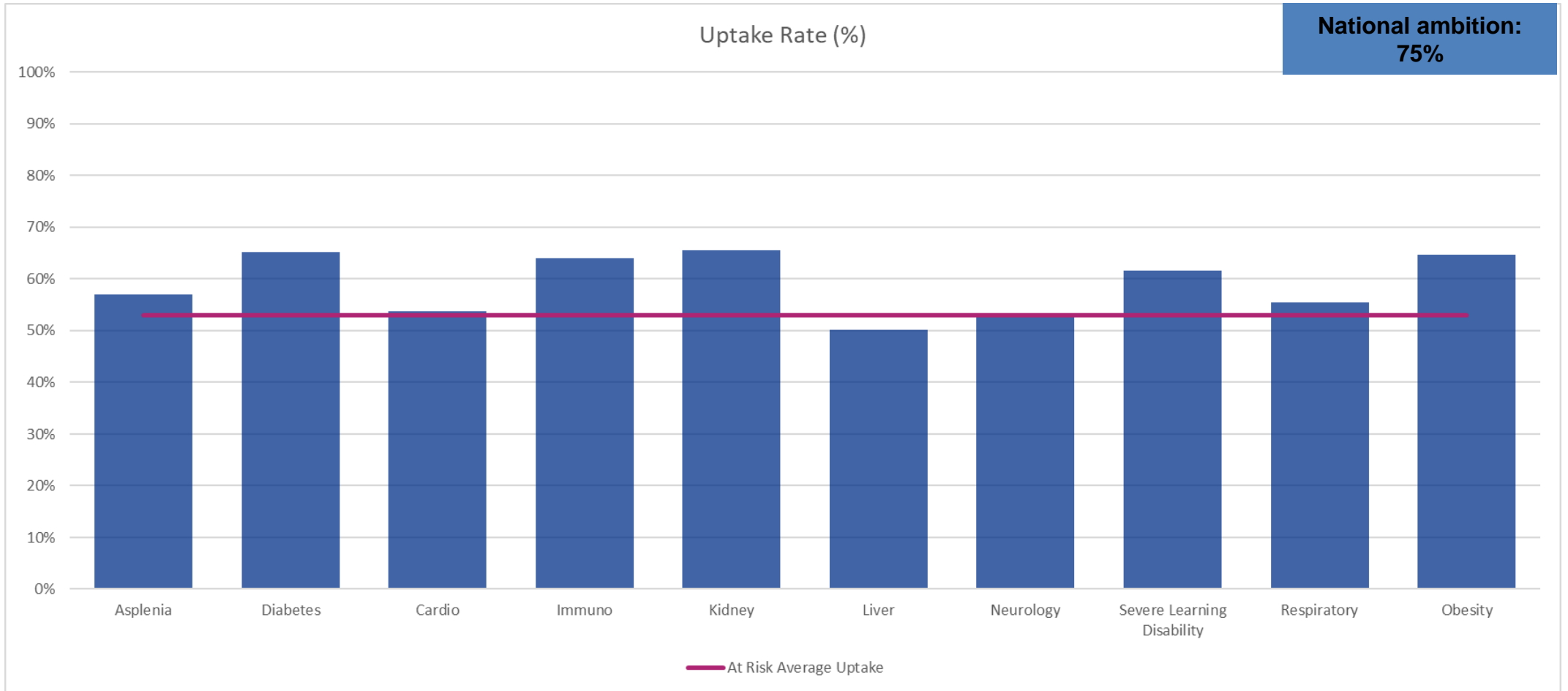


Population	185,323
Vaccinations to date	104,731
Current Uptake	57%
Target	75%
Extra to reach Target	34,261
Not Vaccinated	80,592

Data source: Immform



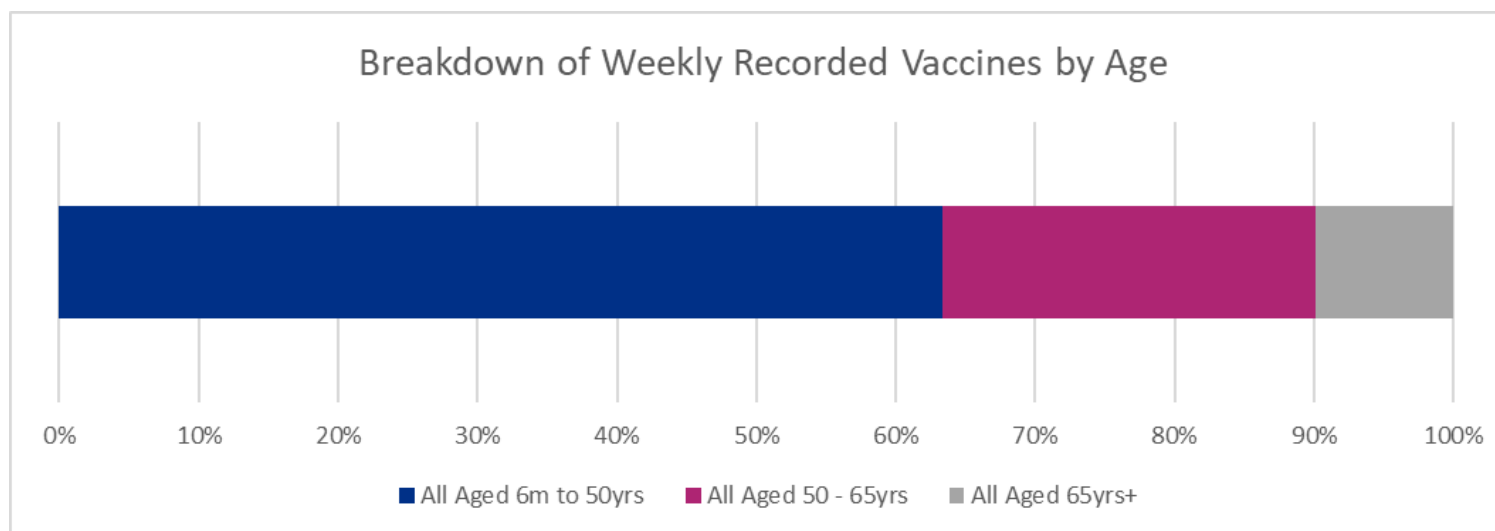
# At Risk by Clinical Group



	Asplenia	Diabetes	Cardio	Immuno	Kidney	Liver	Neurology	Severe Learning Disability	Respiratory	Obesity	All
<b>Total Cohort Size</b>	4,467	25,451	32,349	12,154	6,536	11,717	16,680	574	48,705	8,457	147,118
<b>Uptake</b>	57%	65%	54%	64%	66%	50%	53%	62%	55%	65%	53%

# Total vaccines recorded in the week to 02/01/2022: 1,526

Week 52	Vaccines (last week only)	Total Vaccines To Date	Uptake To Date
At Risk (6m to 65yrs)	423	77,989	53%
All Aged 2&3yrs	27	11,671	48%
All Pregnant Women	61	4,243	41%
All Aged 6m to 65yrs	1,375	204,752	
All Aged 6m to 50yrs	967	100,021	
All Aged 50 - 65yrs	408	104,731	57%
All Aged 65yrs+	151	148,304	85%



### Actions following review of data

- We are working with One Care and PCNs to understand why there is a wide variation in vaccine uptake across PCNs for all cohorts and the best ways to support practices.
- We are also continuing to work with local secondary care trusts and Local Authorities to highlight the clinical risk groups with low uptake to understand the reasons for this so that appropriate supportive actions can be put in place. This includes the 2 and 3 year old group as well as the liver and respiratory cohorts.
- Practices have been encouraged to review their individual practice uptake data via their 'How am I driving?' dashboards and community pharmacies encouraged to work together with their local PCN to optimise the vaccine uptake. Supportive tips to increase uptake have also been issued.
- A deep dive into the liver and respiratory groups, suggested the younger age groups were not coming forward for vaccination and so these groups have been highlighted to clinicians to encourage vaccination and a press release on long term health conditions is planned.
- Area uptake data is being reviewed to ensure outreach clinics are in appropriate locations to support uptake.

### Outbreak management

Every year, the local antiviral pathway for flu outbreaks is reviewed to ensure it is robust and current for the forthcoming flu season. Discussions have taken place with local GP practices, PCNs, Sirona and Severnside to ensure there is service in place this season to provide antivirals in a timely way in event of a flu outbreak in a care home setting. A single PCN provider has now been agreed to provide this service across BNSSG. The Flu outbreak antiviral pathway has now been updated and has been shared to relevant parties.

### Risks/ Issues (scoring 12 and above)

1. There are concerns raised regarding Primary care staff capacity , volume of work and 'burn out' during this period, especially nurses and practice managers who are under a lot of pressure and are key in the Flu vaccination programme. Also risk if high staff absence due to Covid/Flu.
2. Due to the expansion of the children's vaccination programme there is a risk in relation to staff capacity. Also if high levels of Flu/covid children may be off school making vaccination difficult to complete

### Assurances

1. Good relationships with practices and support offered where appropriate. Ongoing sit reps being undertaken to ascertain current status. Workforce is being looked at in wider Covid vaccination programme to potentially support both programmes
2. Sirona are currently reviewing their internal plans and if any wider system asks. Bank staff to be used where needed and currently staff levels are sufficient.

Issues and risk log contains the full details of all the risks/issues currently identified for the flu vaccination programme.