

COVID-19 Vaccination Update

31st May 2022, BNSSG Primary Care Commissioning Committee

Created by BNSSG Covid Mass Vaccination Programme Team

Overview

- Update on BNSSG vaccination programme
- Current cohorts
- Outreach update
- Next Steps

Latest published statistics for BNSSG

2,125,724 **Total vaccinations**

784,397 First dose vaccinations

Second dose 739,133 vaccinations

Booster or third primary 602,192 vaccinations

36,393



People vaccinated as part of our outreach programme

84.6%

of people in our area aged 16+ have had their first dose

83.2%

of people aged 12+ have had their first dose

Bristol, North Somerset & South Gloucestershire

Covid-19 Vaccination **Programme**





For more information Visit the BNSSG **Healthier Together** website

Vaccination Sites

- **Large Vaccination Centre**
- 53 **GP Clinics**
- **Pharmacy Clinics**
- 3 **Hospital Clinics**

Social media





@BNSSG CCG

Latest published statistics for BNSSG

- Latest vaccination figures, (published 19 May 2022), show that across BNSSG we have now given 2,128,849 vaccinations in total. Of that total 785,412 are first dose vaccinations, 739,929 are second dose vaccinations and 603,508 are booster, 3rd Primary doses or spring booster doses.
- 84.6% of all eligible people aged over 16 and 83.2% of all eligible people 12+ have had their first dose vaccination
- We have given 36,651 vaccinations in our outreach clinics since March 2021.

First dose vaccination rates in our area and nationally:

	5-11	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												100%			100%	
	7.8%	59.0%	73.4%	81.6%	82.6%	89.1%	90.8%	96.2%	89.3%	95.0%	98.7%	*	98.9%	93.2%	*	98.2%
BNSSG								100%			100%	100%	100%		100%	
BN33G	10.2%	63.4%	78.6%	81.2%	81.3%	92.1%	99.3%	*	96.3%	97.9%	*	*	*	94.5%	*	98.9%
BNSSG total	8,2	27,0	15,2	82,9	65,0	68,5	65,2	60,0	55,5	59,3	59,8	50,8	42,6	41,2	36,3	47,0
BN33G total	50	54	08	87	50	67	65	80	03	34	75	88	41	93	36	81

Latest statistics for BNSSG

First Dose
Target
Uptake
95.0%
95.0%
95.0%
95.0%
95.0%
90.0%
90.0%
90.0%
90.0%
85.0%
85.0%
85.0%
75.0%
75.0%
75.0%
60.0%
60.0%
40.00/
40.0%
04.00/
81.9%

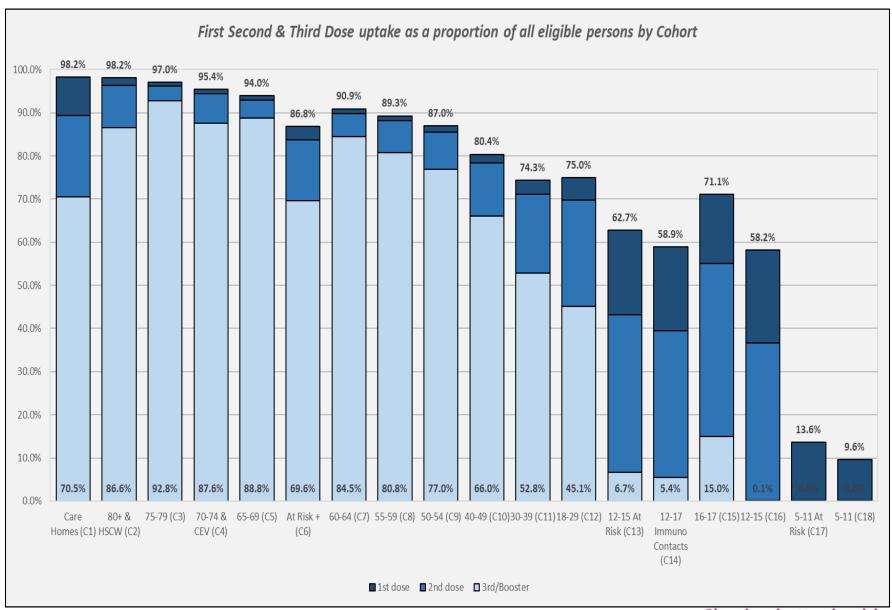
Cohort#	Cohort Name	# Eligible
1	Care Home Residents & Staff	5,516
2	80+ & frontline H&SCW	111,638
3	75-79	37,136
4	70-74 & CEV	60,360
5	65-69	40,059
6	At Risk (16-64)	135,512
7	60-64	28,020
8	55-59	36,894
9	50-54	41,170
10	40-49 (C10)	95,714
11	30-39 (C11)	129,255
12	18-29 (C12)	142,848
13	12-15 At Risk (C13)	2,851
14	12-17 Immuno Contacts (C14)	2,459
15	16-17 (C15)	18,132
16	12-15 (C16)	41,968
17	5-11 At Risk (C17)	6,355
18	5-11 (C18)	76,659
other	All Other (<5yrs)	43,579
	Total Population	1,056,125

Foundry Reported Vaccinations									
First Dose	Second Dose	Third Dose & Boosters	Second Booster Doses						
5,417	4,931	3,887	2,451						
109,580	107,503	96,686	34,119						
36,036	35,720	34,468	24,837						
57,592	56,945	52,866	5,563						
37,647	37,242	35,587	719						
117,599	113,488	94,371	2,726						
25,473	25,178	23,682	106						
32,933	32,503	29,808	100						
35,800	35,202	31,681	88						
76,909	74,944	63,155	142						
96,049	91,850	68,280	116						
107,082	99,645	64,408	49						
1,789	1,233	190	1						
1,448	972	133	0						
12,889	9,997	2,726	2						
24,418	15,407	56	2						
866	1	0	0						
7,383	17	0	0						
4	0	0	0						
786,914	742,778	601,984	71,021						
	2,202	2,697							

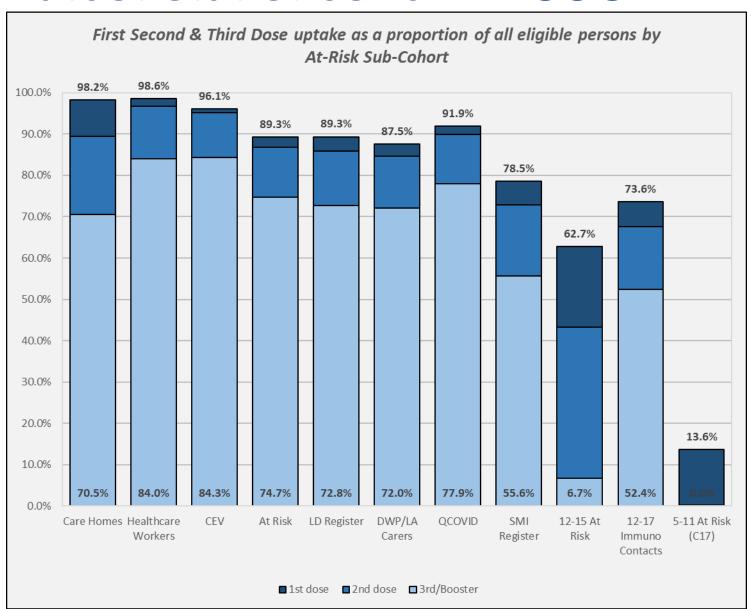
Upta			
First Dose as a % of # Eligible	Second Dose as a % of 1st Doses	Third Dose & Boosters as a % of 2nd Doses	Second Booster Doses as a % of 3rd doses
98%	91%	79%	63%
98%	98%	90%	74%
97%	99%	96%	72%
95%	99%	93%	11%
94%	99%	96%	2%
87%	97%	83%	3%
91%	99%	94%	0%
89%	99%	92%	0%
87%	98%	90%	0%
80%	97%	84%	0%
74%	96%	74%	0%
75%	93%	65%	0%
63%	69%	15%	1%
59%	67%	14%	0%
71%	78%	27%	0%
58%	63%	0%	4%
14%	0%	000000000000000000000000000000000000000	000000000000000000000000000000000000000
10%	0%		
0%	0%		
78%	94%	81%	12%

note:'All other' not included in Totals

Latest statistics for BNSSG



Latest statistics for BNSSG



Current focus of the vaccination programme

- Spring Booster programme
- Evergreen offer
- Summer delivery model
- Autumn booster programme
- Programme evaluation
- Insights work
 - Behavioural change

Autumn booster programme

- The JCVI have issued interim advice about booster doses in the autumn:
- residents in a care home for older adults and staff
- frontline health and social care workers
- all those 65 years of age and over
- adults aged 16 to 64 years who are in a clinical risk group
- Plans to co-administer with flu dependent upon vaccine supply

PCNs

- PCNs have access to programme workforce to support delivery to housebound patients or care homes to be able to maintain a focus on core business
- Plans for balancing Spring Booster offer against the need for Autumn booster
- No sites have officially paused, although some will reduce the offer according to population demand

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	2 doses 2nd dose 8 weeks after 1st dose Must be at least 4 weeks (28 days) after positive COVID test	Now	Walk-insBook on the DayVaccination Centre
	MRNA (unless PEG allergy then AZ)	Booster 1	Dose 1 At least 3 months after final primary dose Must be at least 4 weeks (28 days) after positive COVID test	Now	 PCN Clinics Community Pharmacy Outreach Hospital clinics where appropriate
In addition – for adults aged 75 years and over and residents in a care home for older adults	MRNA (unless PEG allergy then AZ)	Booster 2	Dose 2 6 months after previous dose and operational flexibility whereby individuals in care homes or housebound patients may be offered the booster alongside other residents providing there is at least three months from the previous dose	21 March 2022	 Walk-ins Book on the Day Vaccination Centre PCN Clinics Community Pharmacy Outreach Hospital clinics where appropriate

Current Adult Cohorts

Cohort	Vaccine	Booster/ Primary	Doses	When	Place of Delivery
Anyone 18+ who is severely immunocompromised	MRNA	3 Primary Doses	3 doses 3rd dose is 8 weeks after 2nd dose Must be at least 4 weeks (28 days) after positive COVID test	Now	 With evidence of eligibility: PCN clinics Walk Ins Book on the day Community Pharmacy Outreach Vaccination Centre Hospital clinics where
	MRNA (unless PEG allergy then AZ)	Booster Dose1	1 booster dose 3 month after 3 rd dose Must be at least 4 weeks (28 days) after positive COVID test	Now	appropriate
	MRNA (unless PEG allergy then AZ	Booster Dose	months after 1st individuals who have received the 1st booster (fourth) dose more recently should also be offered the booster during the spring 2022 campaign providing there is at least three months from the previous dose. This will ensure they have additional protection against a potential summer wave and will align with their peers to facilitate an autumn programme	21 March 2022	

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
16 & 17 Year Olds (unless severely immunocompromi sed -see below)	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before		2 doses Must be 12 weeks after positive COVID test result 2nd dose at least 12 weeks after 1nd dose	Now	 Where staff signed off: Schools/ Colleges Community Pharmacies Outreach Walk Ins PCN Vaccination Centre
	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before		1 Dose 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	
Household contact of people with weakened immune system aged 16-17	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before		2 doses Must be at least 4 weeks (28 days) after positive COVID test 2nd dose 8 weeks after 1st dose.	Now	 Schools/ Colleges Community Pharmacies Outreach Walk Ins PCN Vaccination Centre
	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before		1 Dose 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	 Schools/ Colleges Community Pharmacies Outreach Walk Ins PCN Vaccination Centre

		D = = = + = = /	Takal		
Cohort	Vaccine	Booster/	Total	When	Place of Delivery
	30.000	Primary	Doses		,,
16 & 17 Year Olds - Severely immunocompromised	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before	3 Primary Doses	3 doses Must be at least 4 weeks (28 days) after positive COVID test 3rd dose 8 weeks after 2nd dose (if possible delayed until 2 weeks post immunosuppression)	now	With evidence PCN clinics Vaccination Centre Hospital Walk In
	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before		Dose 1 Must be at least 3 months(91 days) after primary in line with the clinical advice	1 st Booster Now	With evidence PCN clinics Vaccination Centre Hospital Walk In
	Pfizer 16yr olds and above can have AZ if there is a clinical reason not to have an MRNA and they have had it before		Dose 2 2nd Booster dose 3 months after 1st Individuals who have received the 1st booster (fourth) dose more recently should also be offered the booster during the spring 2022 campaign providing there is at least three months from the previous dose. This will ensure they have additional protection against a potential summer wave and will align with their peers to facilitate an autumn programme	21 March 2022 ^t	With evidence PCN clinics Vaccination Centre Hospital Walk In

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
Healthy 12 -15 Year olds	Pfizer	2 Primary Doses	2 doses 2nd dose at least 12 weeks after 1nd dose At least 12 weeks from positive Covid Infection* New JCVI Advice that children who are aged 12 years old in school year 7 should preferably receive the Comirnaty® 10 micrograms/dose. This is applicable for any 12 year-old born after 31 August 2009. This will require further changes to PGDs and national protocols.	Now	 School and Colleges by SAIS Community clinics Vaccination Centre (NBS appointments) PCNs (where subcontracted and using NBS), walk in or local booking system Outreach clinics Staged consent not require if parent /legal guardian is present a point of vaccination

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
Children aged 12 - 15 severely immunocomp romised	Pfizer	3 Primary Doses	3 doses 3rd dose 8 weeks after 2nd dose (if possible delayed until 2 weeks post immunosuppression) Must be at least 4 weeks (28 days) after positive COVID test* New JCVI Advice that children who are aged 12 years old in school year 7 should preferably receive the Comirnaty® 10 micrograms/dose. This is applicable for any 12 year-old born after 31 August 2009. This will require further changes to PGDs and national protocols.	Now	 PCN clinics via Digital Booking System Vaccination Centre with prior agreement Staged consent not require if parent /legal guardian is present at point of vaccination Assurance process required for sites delivering 10ug doses
	Pfizer	Booster 1	Dose 1 1st Dose 30 micrograms Pfizer-BioNTech COVID-19 vaccine (Comirnaty®) no sooner than 3 months after completion of their primary course:	1 st Dose Now	New JCVI Advice that children who are aged 12 years old in school year 7 should preferably receive the Comirnaty® 10 micrograms/dose. This is applicable for any 12 year-old born after 31 August 2009. This
	Pfizer	Booster 2	2nd Dose - 6 months after last vaccine (Individuals who have received the 1st booster (fourth) dose more recently should also be offered the booster during the spring 2022 campaign providing there is at least three months from the previous dose. This will ensure they have additional protection against a potential summer wave and will align with their peers to facilitate an autumn programme	21 March 2022	born after 31 August 2009. This

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
Clinically at risk 12-15 year olds or a household contact of someone with a weakened immune system Clinically extremely vulnerable children with severe neuro- disabilities	Pfizer	2 Primary Doses Booster Dose	2 doses Must be at least 4 weeks (28 days) after positive COVID test* 2nd dose 8 weeks after 1st dose. New JCVI Advice that children who are aged 12 years old in school year 7 should preferably receive the Comirnaty® 10 micrograms/dose. This is applicable for any 12 year-old born after 31 August 2009. This will require further changes to PGDs and national protocols. 1 Dose 30 micrograms Pfizer-BioNTech COVID-19 vaccine (Comirnaty®) no sooner than 3 months after completion of their primary course:	Now	 PCN clinics via local Digital Booking System Also will be identified via school based immunisation team Vaccination Centre with prior agreement Staged consent not require if parent /legal guardian is present at point of vaccination Children who turn 12 between 1st and 2nd doses should receive the same 2nd dose as 1st ie 10µg Assurance process required for sites delivering 10ug doses

			•		
Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
5-11 Year Olds- At Risk including household contacts people with weakened immune system	Pfizer	Primary	2 doses Pfizer BioNTech COVID-19 2 x vaccine10μg. 8 week interval between 1st and 2nd dose The minimum interval between any vaccine dose and recent COVID-19 infection should be 4 weeks*	Now	PCN based clinic – opt out arrangement Community clinics Vaccination Centre 'mop up' clinics Children who turn 12 between 1st and 2nd doses should receive the same 2nd dose as 1st ie 10µg Assurance process required for sites delivering 10mg doses
5-11 Year olds who are Severely Immunocompromised in proximity to their first or second COVID-19 doses including those who are temporarily severely immunocompromised Most individuals whose immunosuppression commenced at least two weeks after the second dose of vaccination do not require an additional primary vaccination at this stage, although specialist advice may need to be sought. Children who had received brief immunosuppression (≤2mg/kg prednisolone per day) for an acute episode of asthma and children on replacement corticosteroids for adrenal insufficiency are not considered severely immunosuppressed sufficient to have prevented response to the	Pfizer	Primary	3 doses Pfizer BioNTech COVID-19 3 x vaccine10μg. 8 week interval between 1st and 2nd dose 8 week interval from 2nd dose - the third dose should be delayed until two weeks after the period of immunosuppression, The minimum interval between any vaccine dose and recent COVID-19 infection should be 4 weeks*	Doses 1 and 2 Now Third Dose Awaiting JCVI Guidance however can be given using the Protocol if recommende d by child's clinician (GP, Consultant, Nurse Specialist)	PCN based clinic – opt out arrangement Community clinics Vaccination Centre 'mop up' clinics Children who turn 12 between 1st and 2nd doses should receive the same 2nd dose as 1st ie 10µg Assurance process required for sites delivering 10mg doses
primary vaccination					Shaping better health

Cohort	Vaccine	Booster/ Primary	Total Doses	When	Place of Delivery
5-11 Year Olds- Healthy	Pfizer	Primary	A non-urgent offer of two 10 mcg doses of the Pfizer-BioNTech COVID-19 vaccine (Comirnaty®) to children aged 5 to 11 years of age who are not in a clinical risk group. The two doses should be offered with an interval of at least 12 weeks between doses Should be at least 12 weeks from positive Covid Infection*		PCNs Community Pharmacy UWE Outreach/ Community Clinics Parental supervision Assurance process required for sites delivering 10mg doses

Maximising Uptake – Reducing Inequalities

Over the last month the team have added new venues as well as returning to regular sites to provide outreach in homeless shelters, asylum seeker hotels, refugee centres, secure units, drug & alcohol centres, job centres, housebound, job centres, fire stations, supermarkets and community centres as well as holding broader health

events with vaccinations alongside. Some examples below....

36,660+

Vaccinations in outreach Since March 2021





Health professionals will be available to talk to about getting

vaccinated against COVID-19.

Families and children are webcome and entertainment and food will be



Asylum Seeker Event 11th May in partnership with South Glos Public Health, BNSSG Mass Vaccs Prog, NBT, BNSSG CCG, Sirona Care & Health, Caafi Health, The Haven Health service and Hand on Heart charity: Engagement, education, vaccinations, haircuts. clothing, toiletries, food and sign posting to other support services



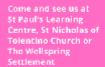
Regular clinics in Easton, Barton Hill, Wellington Hartcliffe, Lawrence Weston and Bournville, W-S-M











@aafiHealth



Let's Fall about

 Block Provides Box in CD2Chakes Bug port or a Referral





For ages of 12 and over 12歲以上 Pfizer vaccine only 只提供輝瑞疫苗 any dose 1st, 2nd and boosters available 任何疫苗,第一針,第二針疫苗和加强劑 If you have received previous vaccinations outside

UK please bring proof of vaccination documents 如果你曾在英國境外接種疫苗、請攜帶疫苗接種證明文件



















Communications Update

Operational Communications:

- Spring booster: ongoing promotion
- 5-11 year olds: Reminder sent to schools for inclusion in newsletters
- At risk 5-11s: Info sent to parent carer organisations and parents of SEND children via LAs
- Behavioural campaign: Research concluded and developing campaign with LAs
- Initial winter flu/Covid-19 meeting: likely focus on minority ethnic uptake of both vaccines (inc staff campaign over late summer)
- Screen adverts for PCNs, A&E departments and employers to promote availability of vaccination
- Programme evaluation

Maximising Uptake:

- Pregnancy: Updated vaccine to have during pregnancy leaflet in all languages which has been adopted by the SW region and pull-up banners with C19 vax info for maternity services
- Network 4 roving clinic case study for Healthier Together news story
- Working with NHSE on Bristol Community FM radio campaign targeting black African and black Caribbean communities
- Barton Hill/Lawrence Hill Building Trust Pilot: led by community and Bristol Inner City PCN to agree the focus of inequalities funding – cultural awareness training and health literacy

Regular Programme Outputs:

- Healthier Together website information updates
- Walk-in clinic promotion (<u>www.grabajab.net</u>)
- Social media calendar



Next steps

- Test and learn from the summer offer.
- Continue to establish longer term sites and offer for the BNSSG population from the Autumn
- Build on relationships with communities and link with locality partnerships
- Reviewing how the maximising uptake approach in partnership with Local Authority and communities can be used to deliver other health services to underserved communities
- Session planned in July to gain insights from and evaluation of reducing health inequalities grants awarded to communities
- Further update to primary care commissioning committee in the Autumn