

READING HEALTH AND WELLBEING BOARD

Date of Meeting	06 October 2023
Title	Seasonal Berkshire Influenza Campaign
Purpose of the report	To note the report for information
Report author	Martin White
Job title	Consultant in Public health
Organisation	Reading Borough Council
Recommendations	<ol style="list-style-type: none"> 1. It is proposed that the Health and Wellbeing Board notes that the seasonal flu and Accelerated Autumn Vaccination Programme has begun, is supported by a communications campaign and equality projects that aim to encourage uptake amongst eligible vulnerable groups. 2. That the board also notes that the programme is supported in Reading through targeted projects and a voucher reimbursement scheme available for Reading Borough Council frontline employees.

1. Executive Summary

- 1.1. This report provides a brief update on the 2023-24 seasonal flu campaign across Berkshire West and the arrangements for employees and frontline employees at Reading Borough Council.

2. Background and Context

- 2.1. The emergence of a new variant of COVID-19 classified as BA.2.86, was a sufficient concern to bring forward the flu and covid autumn winter vaccination programme. The UK Health Security Agency (UKHSA) published a briefing note on the 30th August 2023 to inform stakeholders of the acceleration of the 2023-24 autumn flu and COVID-19 vaccination campaign in England. The campaign start date was brought forward to the 11th September 2023 due to the emergence of a new variant of COVID-19 classified as BA.2.86. The conclusions on risk to the public posed by the virulence, pathogenicity and vaccine evasion of this variant are still developing as data is collected. Bringing the vaccination programme forward is a precautionary measure as there is potential for widespread illness over the winter months.
- 2.2. A UKSHA online seminar on 14th September provided an update on the current situation. It confirmed that small numbers of cases have been hospitalised; all have recovered and illness was not severe. Most of the cases identified had received the spring booster. BA.2.86 is not a variant of concern as the indicators do not suggest it meets the threshold.
- 2.3. In view of this there are currently no plans to update Infection Control and Prevention (IPC) guidance IPC guidance. There are no new recommendations to introduce the use of face masks in clinical or public settings at the moment but this may change as the evidence

evolves. There are no current plans to expand the eligibility criteria for the COVID-19 vaccine. Existing Joint Committee on Vaccination and Immunisation (JCVI) recommendations are being followed; however, this may change as what is known about BA.2.86 develops.

- 2.4. The regional strategy is to collaborate with system partners and stakeholders to improve vaccination uptake in all eligible cohorts. The campaign arrangements will administer both flu and COVID-19 vaccines together where operationally possible and to maximise the number of individuals vaccinated, prioritising those most at risk.
- 2.5. Data on reports of flu-like illnesses and vaccine uptake will commence following the start of the programme. System wide strategic and operational meetings have been stood up. Representatives from Reading Borough Council (RBC) will attend each meeting and continue to work closely with health protection system partners.

BOB ICB and the Accelerated Autumn Vaccination Programme

- 2.6. On Tuesday, 29th August, the ICB was made aware that NHSE would be asking systems to accelerate the delivery of the Autumn Covid and Flu vaccination programmes. The World Health Organisation (WHO) and United Kingdom Health Security Agency (UKSHA) are assessing the newly emerging variant BA 2.86. and the potential impact it may have on the NHS in winter 2023-24. NHS England has asked systems to start vaccination programmes a month early on the 11th September 2023, and to increase the pace of the delivery programme from 11-weeks to 7-weeks. Currently there are no changes to the eligible cohorts as defined by previous Joint Committee on Vaccination and Immunisation (JCVI) guidance.
- 2.7. The current position in the Buckingham, Oxfordshire and Berkshire West (BOB) system is that there is a predicted uptake of 427,000 which will require a weekly capacity of 76.8K vaccinations each week. The declared capacity from providers meets demand with minimal use of surge capacity, the minimum declared capacity is 62,278 and maximum surge capacity is 98,481.
- 2.8. The ICB will work with System Partners to ensure that the network capacity matches demand across the system. And will work to ensure that resources are used effectively to avoid excess capacity and to reduce the likelihood of bottlenecks. There are 41 sites in primary care network, 86 in pharmacies and 7 in hospital hubs. It is not expected that further sites will need be stood up. The maximum travel distance by car is planned to be within 20 minutes for all but two locations across BOB. The identified gaps are not in Reading but in Hungerford and Chipping Norton where outreach options are being discussed with providers to improve provision in these areas
- 2.9. The numbers of the priority groups are set out in Table 1 below:

Table 1 Numbers of Priority Groups eligible for the accelerated autumn vaccination programme

Priority Group		Population	Eligible
1	All adults 65 and over	339,803	323,678
2	6 months to 64 years in a clinical risk group	189,587	155,961
3	Residents in a care home for older adults	6,985	6,790
4	Frontline health and social care workers	44,595	41,372
5	Persons aged 12 to 64 years who are household contacts (as defined in the Green Book) of people with immunosuppression	85,535	53,922
6	Persons aged 16 to 64 years who are carers (as defined in the Green Book) and staff working in care homes for older adults (part included in 4)	16,255	16,175
Total		682,760	597,898
71% Uptake			424,508
Plus 10% for any data inaccuracies			657,687
71% Uptake			466,958
Regional Prediction 71 % Uptake			460,810
Autumn/Winter 23 Covid Planning			
Data source - Foundry 08 th September 2023			

Inequalities

- 2.10. The ICB has been allocated a ring-fenced allowance to support access and address inequality of access amongst the population. As the system is accelerating the programme it is vital that access to the programme is equitable and that variation in uptake is addressed as vaccination uptake rates increase.
- 2.11. All providers have been made aware of the criteria that the funding can be used for and the bidding process to access these funds. Three autumn review panels have been held which has resulted in 14 projects receiving approval across the system. Opportunities for inequality work can continue until 31 January 24.
- 2.12. Appendix 1 provides outline details of these.
- 2.13. The funding allocated to the ICB must also consider any large-scale surge response. Modelling and estimated costs have been developed with the BOB vaccine finance lead to ensure that capacity to respond to a wider surge remains within the system.

Risks

- 2.14. A number of ongoing risks have been assessed and mitigating control measures have been introduced. However, risks remain these are around vaccine supply; limited national communication associated with low public awareness; the impact on capacity in primary care to maintain core services; Impact of low uptake on winter plans and patient flow across the system; reputational risk to the NHS and loss of confidence in vaccination programs due to rapidly changing advice and the potential need to stand up non-NHS estates if a full surge response is required.

Local arrangements in Reading

- 2.15. The role of the local authority is to ensure provision of vaccine to frontline health and social care staff; to support communications and to focus on health inequalities by close collaboration with local communities, the voluntary community sector and faith groups. In collaboration with the Interim Public Health Principal at Reading Borough Council and with

other local authority colleagues, campaign promotional materials for system wide use with health inclusion groups have been developed to provide a local uplift to national resources.

- 2.16. In collaboration with system partners data and intelligence is being analysed to direct support effectively to neighbourhoods and communities within Reading who have historically had low uptake of the vaccination offer. The focus will be on avoiding intervention generated inequality that results from a low uptake amongst marginalised groups.
- 2.17. The aim is to identify and collaborate with communities and areas that do not have good engagement with healthcare and public services for the purpose of cascading important information about the campaign. Vaccination uptake will be monitored locally to enable early identification of areas with low uptake. The campaign will be supported by targeted pop-up events and linking in with current community outreach projects such as the Community Health Champions Programme
- 2.18. As in previous years a communication plan is under development with the council's communications team to promote prevention messages about good respiratory hygiene based on the Living with COVID guidance. This will be through a number of channels to reach frontline employees, voluntary community sector, children's centres and the Family Information System.
- 2.19. Healthcare staff will be provided with vouchers for flu vaccinations and plans are to repeat the same offer to RBC employees and frontline staff. A voucher reimbursement scheme has been running within RBC since 20/21 which has proven to be successful and will be available to adult and social care staff.
- 2.20. To support the scheme and offer the Making every Contact Count (MECC) approach will be used to help remind frontline staff, adult social care, children services that flu is everyone's business: to understand the importance of the flu programme for different groups and the impact that flu can have on them; know which cohorts should attend when i.e. over 65s, clinically vulnerable; to act as advocates for flu and know how they can contribute to increasing uptake; know where they can signpost patients for more information, especially non-clinical staff and know who to contact if they have further questions.

3. The Proposal

- 3.1. It is proposed that the Health and Wellbeing Board notes that the seasonal flu and Accelerated Autumn Vaccination Programme has begun, is supported by a communications campaign and equality projects that aim to encourage uptake amongst eligible vulnerable groups.
- 3.2. That the board also notes that the programme is supported in Reading through targeted projects and a voucher reimbursement scheme available for Reading Borough Council frontline employees.

4. Contribution to Reading's Health and Wellbeing Strategic Aims

- 4.1. The proposal provides an update about the seasonal vaccination campaign and the support for RBC frontline staff. The campaign includes measures to support the uptake of vaccines amongst disadvantaged and vulnerable eligible groups and as such contributes towards achieving the goals of the Health and Wellbeing Strategy Priority 1: Reduce the differences in health between different groups of people. The campaign aims to reduce the effects of health inequality amongst communities and population groups that are excluded or have low confidence in vaccination programmes or experience of poor access.

5. Environmental and Climate Implications

5.1. This proposal in itself does not have an environmental or climate implication

6. Community Engagement

6.1. Community engagement is an important component of the seasonal vaccination programme and locally it builds on the methods that built the Community Vaccine Champions network during the early stages of the COVID 19 pandemic. Its work is founded upon the views of local stakeholder communities and no further consultation has been conducted

7. Equality Implications

7.1. Not applicable. EIA is not relevant to the proposal.

8. Other Relevant Considerations

8.1. Not applicable.

9. Legal Implications

9.1. Not applicable.

10. Financial Implications

10.1. Not applicable.

11. Timetable for Implementation

11.1. Not applicable.

12. Background Papers

12.1. There are none.

Appendix 1

PROJECT (for medium term delivery up to end 31 March 24)	Provider	Objectives (high level)
Buckinghamshire Community Engagement Coordinators (Buckinghamshire)	BHT	To fund BHT to host a community engagement an vaccine delivery team for a period of 12 months that would be managed at place (Buckinghamshire). The team would link into social prescribers and care co-ordinators – 12 month programme
Community Champions Programme (Oxfordshire)	Oxford City Council	Continue existing LA programme: 1. Engagement with VE priority groups/communities though the Oxford focused Community Champions programme 2. Support/strengthen the Community Health Development Officer (CHDO) network in other IMD 1&2 areas in Oxfordshire 'at Place' to enable CHDO's to identify/connect with VE priorities groups/communities as part of their role 3.To build trust and collaboration with system partners and engage with influential community leaders – 12 month programme
Community Champions - Engagement Support Workers (Reading)	Reading Borough Council (Public Health Team)	Extend the existing Public Health contract with ACRE (12 months) to oversee the management, recruitment and training of health champions in the Reading area. The funding will also support communications - development of health champions branding, recruitment video for health champions, coproduction of health messaging/comms with champions (between ACRE and PH comms) – 12 month programme
New Reading PCN BAME project	New Reading PCN	The funding will be used to directly target 2,500 PCN patients and will involve: at least 6 PCN clinics run in community settings (e.g. mosques, temples, community centres etc.) / engagement & co-op community volunteers and leaders to overcome cultural and language barriers/ use Accrurx for batch messaging of patients / writing & calling all patients (using appropriate 1st language) / provision of MECC offer to all patients engaged by the project – 6 month project
MECC training of Clinical Nurse Specialists	ICB Personalised Personal Care Training Team	Project to deliver training and educate to improve confidence in health professionals in clinical settings particularly with at-risk cohorts to initiate vaccine conversations and address vaccine hesitancy– 12 month programme
Dashwood PCN	Dashwood PCN	This would trial a different way of reaching into the communities through the GP model which is seemingly more trusted and would reach to about 1.5k of the population targeted appropriately based on clinical searches, in appropriate languages comms, through engagement events and allowing vaccine hesitancy insight findings report & associated feedback to ICB (based on ethnically focused survey's/semi structured patient interviews) - 12 month programme

PROJECT (for medium term delivery up to end Jan 24)	Provider	Objectives (high level)
Maternity Champions	BOB LMNS	<p>Maintain existing maternity champions at RBH, BHT and OH for a further 3 months as well as continuing the provision of community outreach (piloted in Q4).</p> <p>All pregnant women to be offered a vaccine conversation at either community or antenatal visits. Short term impact - increase in vaccination uptake Flu + Covid compared to previous year.</p> <p>Medium term impact - continued improved uptake and improvement in childhood vaccination rate.</p>
At Risk Groups	BHT	<p>To support specific at risk groups that come into contact with secondary care, i.e. hepatology, renal, oncology, etc. Improve health and wellbeing of these patients.</p>
Learning Disabilities & SEN Schools	BHT	<p>Increasing uptake for those with a learning disability neurodiversity and / or additional needs. Increasing access to promote health and wellbeing to this Core20Plus5 cohort. Offer to all SEN schools.</p>
Community Hepatology Outreach	OUH	<p>To increase the uptake of covid vaccination in an underserved community. Improving immunity and health of individuals who do not normally engage in primary or secondary care.</p>
At Risk uptake with a focus on Renal Haemodialysis	RBH	<p>Improving education and access to COVID and FLU vaccinations for Haemodialysis patients. Propose to provide dedicated offer of vaccinations to each of our haemodialysis centres (4 centres).</p>

PROJECT (for medium term delivery up to end Jan 24)	Provider	Objectives (high level)
MEET PEET Engagement	RBH	Providing Information and targeted discussions around COVID vaccinations from the MEET PEET team who provide engagement outreach services across many disadvantaged communities (high deprivation, or challenges accessing healthcare).
At risk – serious mental illness	RBH	Improving identification and vaccination of Care Home Patients admitted to secondary care, with an admission over 21 days, with a focus on those with a reduced ability to consent due to impaired cognition.
COMMS	BOB	<p>Communications and Engagement: To encourage key groups, as identified by JCVI and NHS, to take up the offer of winter vaccinations from September 2023 - Jan 2024. Winter vaccines cover COVID-19 (boosters, first doses) and flu vaccines</p>