

## READING HEALTH AND WELLBEING BOARD

<b>Date of Meeting</b>	11 October 2024
<b>Title</b>	Berkshire Seasonal Influenza and COVID-19 Campaign
<b>Purpose of the report</b>	To note the report for information
<b>Report author</b>	Marisa Alexis
<b>Job title</b>	Public Health Principal
<b>Organisation</b>	Reading Borough Council
<b>Recommendations</b>	<ol style="list-style-type: none"> <li>1. The Health and Wellbeing Board notes the start of the seasonal Vaccination Programme: autumn/ winter 2024/25. The programme is being supported by a communications campaign with Blue Lozenge and aims to encourage uptake amongst eligible vulnerable groups.</li> <li>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.</li> </ol>

### 1. Executive Summary

- 1.1. This report provides a brief update on the 2024-25 seasonal flu campaign across Berkshire West, the communications plans, update on local outreach programmes and the arrangements for employees of Reading Borough Council.

### 2. Background and Context

- 2.1. Seasonal influenza is an unpredictable virus that has the potential to kill thousands of people every year during the winter months. The flu vaccine is the best defence against the virus to prevent serious illness and to support NHS and adult social care resilience. This programme is of particular importance to Reading as uptake of the seasonal flu vaccine has been low historically.
- 2.2. The vaccination programme is based on recommendation from the independent expert advisory group that advises the Government on vaccination- the Joint Committee on Vaccination and Immunisation (JCVI). The 2024-25 seasonal influenza vaccination programme commenced on the 1<sup>st</sup> of September for pregnant women and all children's flu cohorts. The main flu and COVID-19 vaccination campaign will commence on Tuesday 3<sup>rd</sup> October 2024, with the annual national marketing campaign starting 7<sup>th</sup> October 2024. The aim is to complete vaccination of main cohorts by 20<sup>th</sup> December 2024. However, flu vaccinations will be available until the end of March 2025.
- 2.3. An updated version of the national Infection Prevention and Control (IPC) manual was published in August 2024. This document offers guidance on IPC measures for vaccine administration and there were no modifications or new recommendations to the Standard

Infection Control Precautions, namely the personal protective equipment usage and the safe management of care equipment sections which relate to vaccine administration.

- 2.4. The groups eligible for flu vaccination in the 2024 to 2025 flu season remains unchanged and is based on recommendations from the JCVI. This includes nursery and school aged children up to year 11, pregnant women, adults aged 65 years and over, adults aged 18-65 in clinical risk groups, carers, frontline health and social care workers.
- 2.5. Outreach programmes are still being finalised at regional level which will include collaboration with system partners and stakeholders to reach underserved communities and increase both COVID-19 and flu vaccination uptake in eligible cohorts. The aim is to administer both vaccines together where operationally possible. The main initiative will be the utilisation of a roving vaccination van that will be situated in key areas of the borough to provide opportunistic vaccination.
- 2.6. Data on reports of flu-like illnesses and vaccine uptake is being collected and will continue for the duration of the programme. A request has been made to NHS England for the data to be disaggregated and presented at local authority level. This will enable us to better identify inequalities.
- 2.7. 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.
- 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.

### **Inequalities**

- 2.9. In recent years, providers were able to bid for funding to develop local outreach programmes to address inequalities locally by focusing advertising and utilising community partnerships. This model has been discontinued for the 2024-25 programme. Until these new plans are finalised, the ICB plans to award discretionary contracts directly for this campaign. This is a change from previous grants-based process which means that local authorities will no longer be able to bid.
- 2.10. Concerns have been raised with the ICB on execution of the new model. Assurance has been requested from the ICB about local community engagement, how intelligence about inequalities is being gathered and plans for collaboration with local authority partners and other key stakeholders. Emphasis was made about the importance of wrap around locally tailored communications for an effective community outreach campaign in Reading.

### **Risks**

- 2.11. The risks identified include 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. These risks have been assessed and mitigating controls are being put in place.

### **Local arrangements in Reading**

- 2.12. The local authority's role is to ensure provision of vaccine to frontline health and social care staff; to support communications and to address health inequalities through 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.

- 2.13. The interim Public Health Principal is working closely with the Blue Lozenge team to develop a localised communications plan which will focus on school aged children and adults. Initiatives will include social media messaging, an article in the resident's newsletter, tailored information for head teachers and parents, a webinar for the Community Health Champions and internal RBC campaigning. This plan will be cascaded through a number of channels to reach RBC employees, voluntary community sector, children's centres and the Family Information System.
- 2.14. Collaboration is ongoing with system partners around the collection of data and intelligence to effectively support 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.
- 2.15. 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
- 2.16. Arrangements are in place for RBC employees, frontline and healthcare staff to receive flu vaccinations. 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.
- 2.17. 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 COVID-Vaccination Programme has begun and is supported by a local 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 of the Community Vaccine Champions network during the early stages of the COVID 19 pandemic and will be supported by the current Community Health Champions programme. This 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.