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Northumberland  
Clinical Commissioning Group



# COVID-19 Vaccination Programme Update

31 August 2021

Health & Wellbeing Board OSC

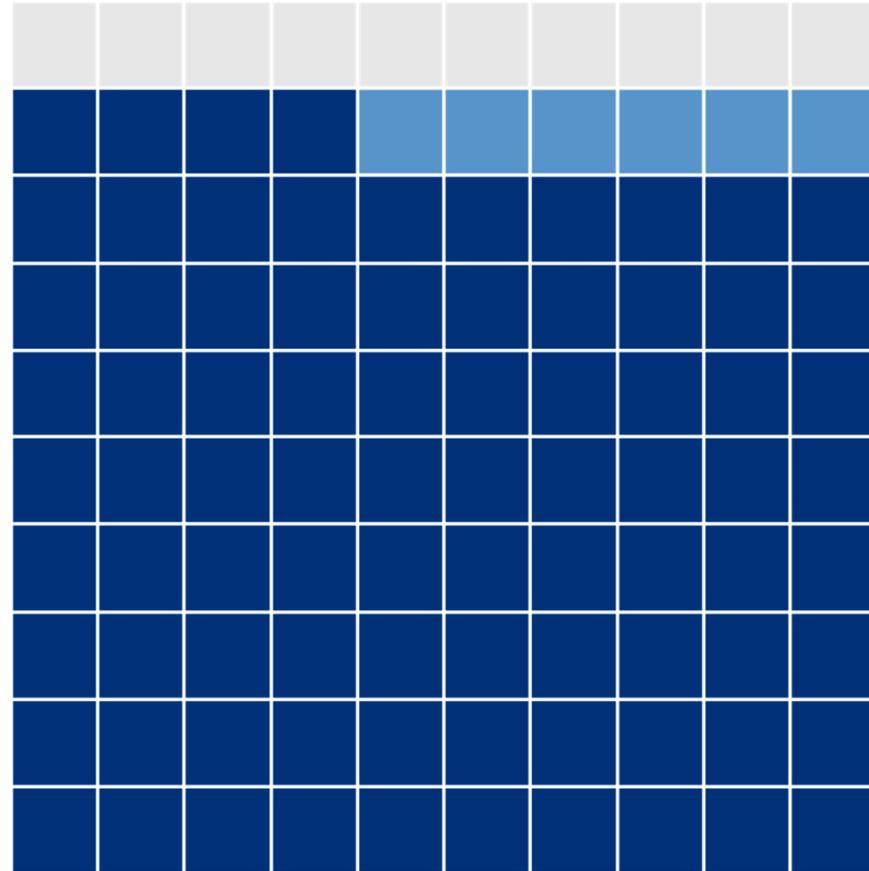
Richard Hay

Head of Planning and Operations



# Vaccine Uptake in Northumberland

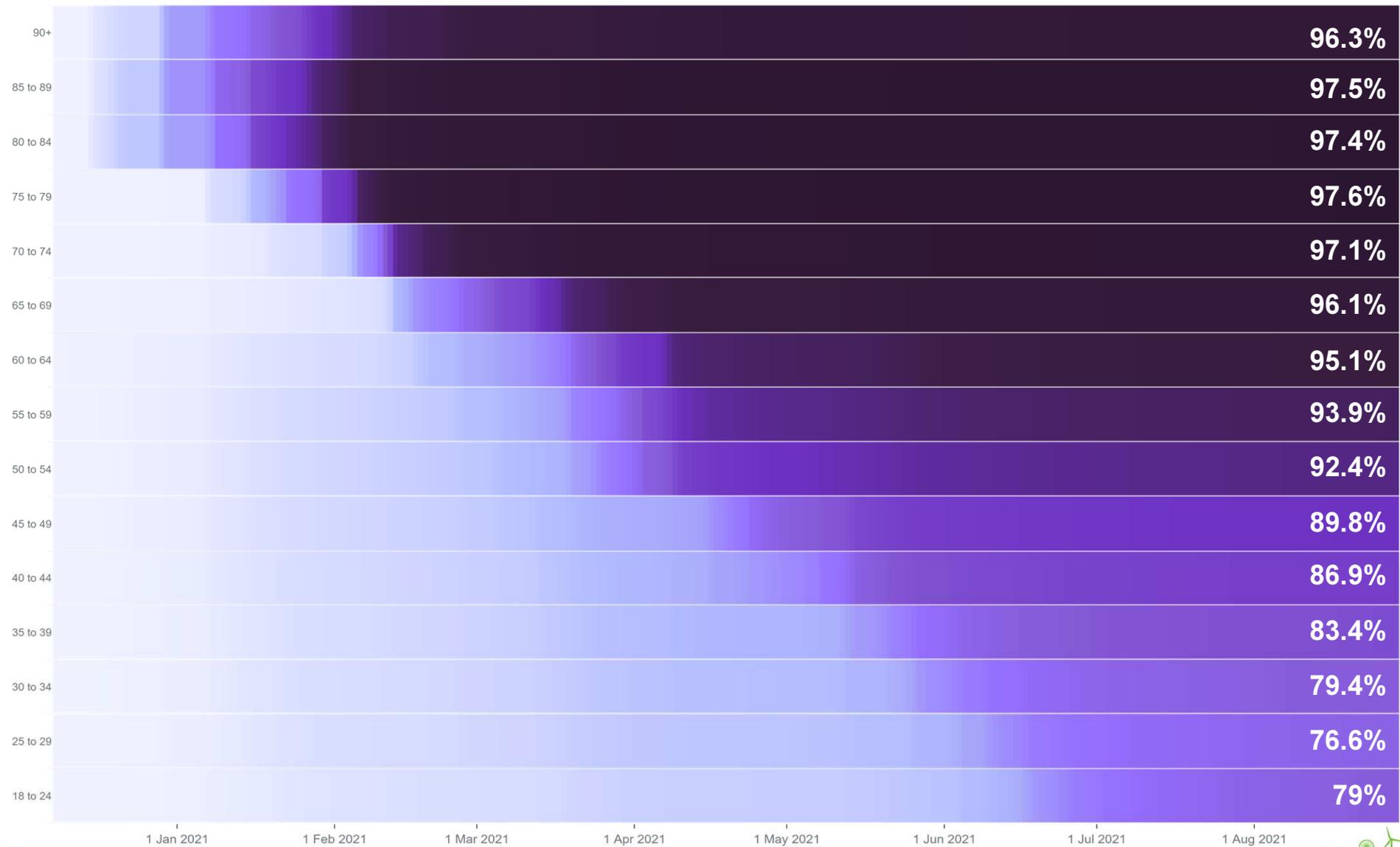
Northumberland has the **highest % uptake of both doses (84.1%)** of any Upper Tier Local Authority (UTLA) area in **England** (out of 150)



1<sup>st</sup> Dose: 90%, 2<sup>nd</sup> Dose: 84.1%



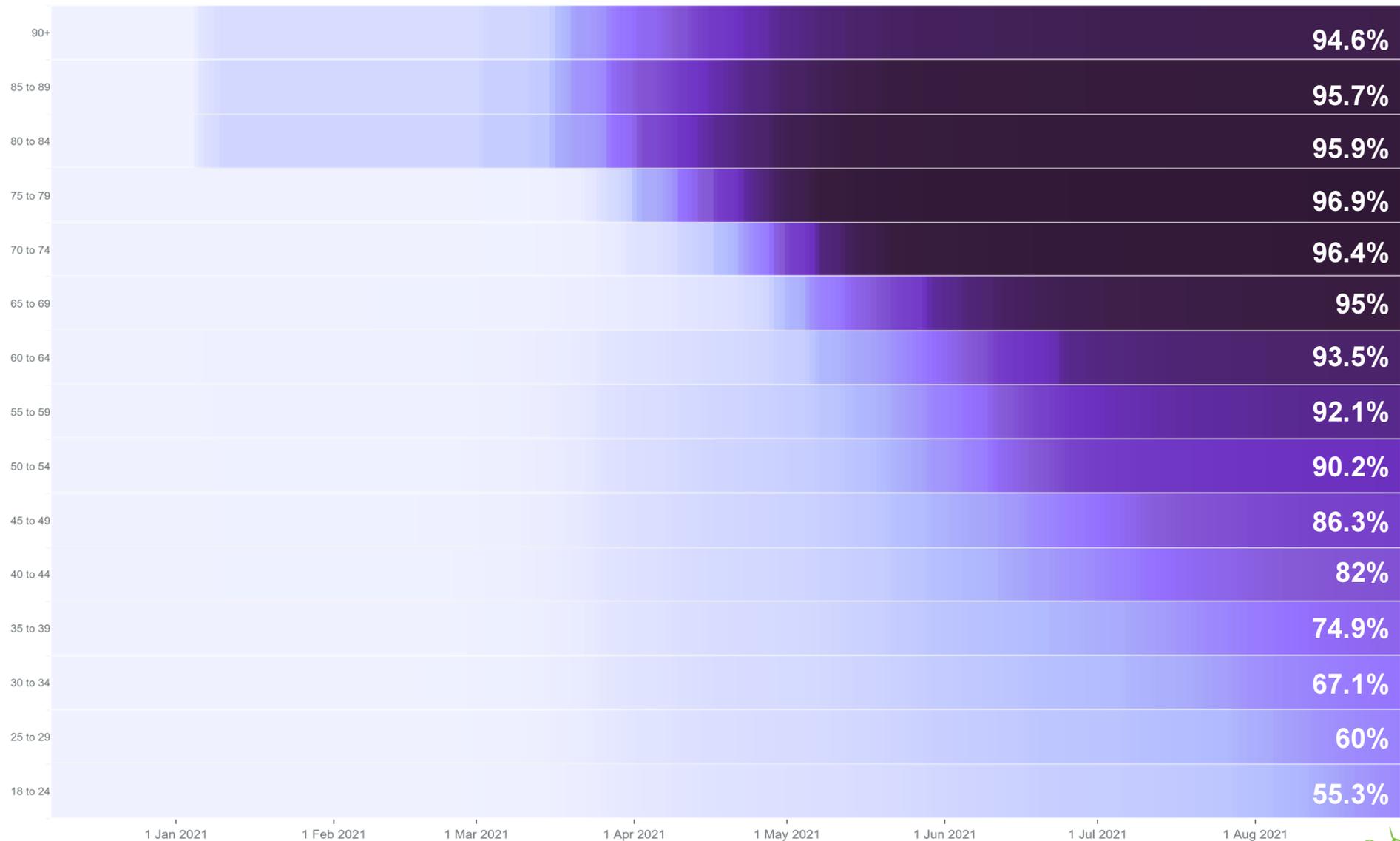
# First dose uptake/progress within age bands



Heatmap of first dose uptake in Northumberland (<https://coronavirus.data.gov.uk>)



# Second dose uptake/progress within age bands



Heatmap of second dose uptake in Northumberland (<https://coronavirus.data.gov.uk>)



# Northumberland Vaccine Equity Board

- Joint group established between **CCG** and **LA Public Health** colleagues with multi-agency representation
- **Identifying** and **addressing** potential areas of inequity within the vaccination roll out
- Priorities are **BAME** groups – especially black communities, **GRT** communities, **LD/SMI** registered patients, **socio-economic deprivation**
- **Rurality** and **travel time** also key considerations
- Regional comms group established to tackle vaccine **hesitancy** and increase vaccine **confidence**
- Intention is for PCN-led **Roving Vaccination Unit (RVU)** to target harder to reach groups



# Improving and promoting uptake

- **Identifying** and **addressing areas with low uptake** – jointly between CCG/LA
- A number of PCN and Community Pharmacy sites now offering **walk-in vaccinations**, especially in areas of high deprivation
- Joint working with Northumbria FT maternity team to provide midwifery advice and guidance at clinics targeted at unvaccinated expectant mothers
- **Pop-up** vaccinations at Northumberland Pride festival
- Continued promotion of vaccination locally and regionally
- An **evergreen** offer remains open to all eligible patients for a 1<sup>st</sup> and 2<sup>nd</sup> dose of the COVID-19 vaccine



# Northumberland's Roving Vaccine Unit (RVU)

- **PCN-led** model of mobile vaccine delivery to take vaccines to our most **remote** and **isolated** communities
- Commissioned to target **harder to reach** groups and also to ensure **local provision** in West Northumberland following PCN decision to 'opt-out' of delivery of phase 2 of the programme
- RVU launched in **Bellingham** in early-April, in partnership with **Northumberland Fire & Rescue Service** to deliver pop-up clinics at Fire Station sites across the county
- RVU has also vaccinated at **homeless shelters** and independent **residential settings**
- Piloted **workplace vaccinations** with great success (e.g. Egger – Hexham)
- Assisted across the region to provide hyper-local pop-up clinics areas of low uptake (Newcastle, Tees Valley, North Tyneside)



# Vaccinating Children and Young People

- Latest JCVI advice to Government for **all 16-17 year olds and those most vulnerable 12-15 year olds** to be vaccinated
- Current guidance is for 16-17 year olds to receive one dose only, eligible 12-15 year olds will receive both doses
- PCNs have identified eligible 12-15 year old cohort and are proactively contacting them to be vaccinated as a priority
- 16-17 year olds have all received a national invitation and can attend walk-in/pop-up clinics in addition to pre-booked clinics
- A number of schools/colleges have arranged for pop-up clinics (delivered by PCNs/RVU) for their students to be vaccinated
- JCVI are still to opine and advise on vaccination of entire 12-15 year old cohort – advice expected imminently
- Uptake of vaccination in children & young people will be monitored by Health Protection Board



# Phase 3

- Autumn/Winter 2021 – JCVI has issued interim advice to Government
- JCVI advises that any potential booster programme should begin in **September 2021**, in order to maximise protection in those who are most vulnerable to serious COVID-19
- Any potential COVID-19 booster programme should be offered in two stages:
  - **Stage 1:** all those over 70 inc. Care Homes and all those over 16 who are Clinically Extremely Vulnerable, frontline H&SC workers
  - **Stage 2:** all those over 50 and all those 16-49 in a flu or COVID-19 'at-risk' group
- The core planning scenario is to deliver booster doses of COVID-19 vaccine to between **6 September** and **17 December 2021** (15 weeks)
- Clinical trials on-going to determine whether **co-administration** of COVID-19 booster with the flu vaccine is permissible, and the best type of vaccine to use. **Final JCVI guidance is still awaited.**
- NENC ICS Vaccination Board and Northumberland Vaccine Collaborative already **well placed** with system planning. A **multi-agency, collaborative approach** will be needed to deliver a successful booster programme.



# Why have we been so successful?

- Incredible **engagement** from highly motivated and dedicated teams across health and social care in Northumberland
- Central **co-ordination** by CCG with joint CCG/LA leadership
- PCNs have **collaborated** across GP practice and locality boundaries to deliver a fantastic service
- Strong **system leadership** by SVOC and a great relationship between our CCG and SVOC has enabled pragmatic solutions
- Effective **communication** with stakeholders and patients
- Fantastic **integration and co-operation** between CCG, PCNs, Public Health, Local Authority, Northumbria FT, Community Services, Voluntary Sector, Healthwatch, and many others has enabled a comprehensive offer to residents
- Public **support** for, **confidence** in, and **engagement** with the vaccination programme has been excellent



# What have been the biggest challenges?

- National **command & control** has left local teams with the burden of responsibility to deliver but very limited control
- Several **course corrections** and changes in guidance, often at very short notice and usually in the media first
- Unpredictable **supply chain** and **push** model of deliveries has made planning (of both workforce and delivery) incredibly difficult
- Nationally mandated decisions have not always reflected the need for local interpretation and flexibility
- **Multiple routes** to access vaccinations (i.e. National Booking Service vs local 'call & recall') has caused confusion and inconvenience for patients and frustration for providers
- The sheer **size & scale** of the programme



# Next steps...

- Continue to provide 2<sup>nd</sup> doses to all eligible patients at **8 weeks**
- **Promote** importance of second dose uptake to provide **greater protection** to patients and **reduce** opportunities for transmission
- **Maximise uptake** and cohort penetration across all JCVI priority groups, including revisiting those who have previously refused
- Prioritise vaccination of **eligible Children and Young People**
- Increase activity and promotion of the benefits of vaccination in our most deprived communities to **tackle inequity** of uptake
- Maintain **an evergreen offer** of vaccination into the Autumn/Winter
- **Collaborate** and **co-operate** across delivery models (PCN, Community Pharmacy, Vaccination Centre) to complete Phase 2 and prepare to deliver Phase 3
- **Communicate proactively and effectively** with our patients and public



# Any questions?



**Join the  
millions already  
vaccinated**

You're much less likely to get serious Covid-19 or be hospitalised if you've been vaccinated.

We'll let you know when your Covid-19 vaccine is ready for you.

EVERY VACCINATION  
GIVES US

**HOPE**

