

HSI21/004

GOVERNING BODY

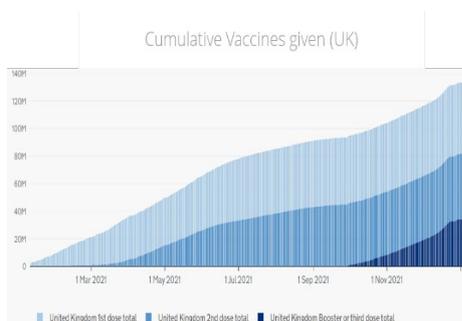
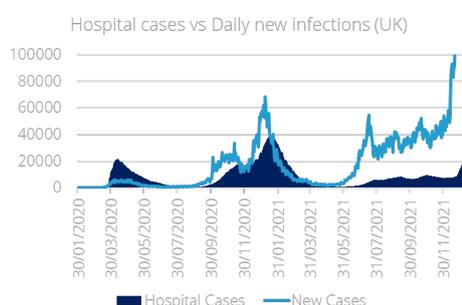
Title of paper	Hampshire and Isle of Wight Covid-19 Vaccination Programme		
Agenda item	6	Date of meeting	2 February 2022
Executive lead	Helen Ives, Executive Director of Workforce		
Author	Hassan Majeed, Deputy SRO of the Vaccine Programme		

Purpose	For decision	<input type="checkbox"/>
	To ratify	<input type="checkbox"/>
	To discuss	<input type="checkbox"/>
	To note	<input checked="" type="checkbox"/>

Link to strategic objective	Operational service delivery Transforming services Strategic planning and engagement Developing our Integrated Care System
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Executive Summary

- 91% of those aged 50 or over or those with underlying health conditions have had two doses of the vaccine with a further 90% of those eligible having had a booster (as of 26/01/2022)
- 85% of adults over the ages of 18 have had two doses of the vaccine with a further 86% of those eligible having had a booster (as of 26/01/2022)
- In December 2020 and January 2021, the high number of infections (c.70,000 nationally at peak) led to a corresponding rise in hospitalisations for Covid-positive patients. In December 2021 and January 2022 case rates have soared to over 100,000 a day but hospitalisations have stayed low. This points to the success of the vaccination programme. See Graph below.



- The newest vaccination delivery rollout is for vulnerable children aged 5+, which will be delivered mainly through general practice but with additionality at hospital hubs. The second vaccination to children aged 12 to 15 is well underway through the school-aged immunisation service in Southern and Solent with additionality at the large vaccination centres and in general practice.

- Flu delivery and uptake continues to be monitored through the ICS Vaccination programme, which includes colleagues from public health.
- Demand for vaccination has considerably dropped off and capacity in all delivery settings has been tapered down. An extensive project on modelling and scenario planning has been undertaken to ensure preparation for future vaccination delivery and/or vaccination surge.

Key Information

Uptake of Vaccines in hard-to-reach populations

- Of those who have not had a vaccine yet, the lower uptake populations are predominantly located in more urban areas with younger patients significantly over-represented.
- Uptake broadly tracks index of multiple deprivation.
- Care home and Health and Social Care Workers make-up a large proportion of *un-boosted* high-risk cohorts.
- We are employing a flexible vaccination model across HIOW to ensure that we are able to reach populations who have had not a vaccine yet.
- We are utilising a blended model of fixed geographically dispersed capacity across Primary Care Networks, Pharmacies, and Mass Vaccinations sites combined with a more flexible model where roving services take vaccinations to sites. We are particularly focusing on urban areas such as Southampton.
- The Vaccine Equality Group meets weekly and is a multi-agency team supported by the 'Turning the Tide Oversight Board' to monitor and act on health inequalities in groups with protected characteristics and health inequalities.

Highest risks from the programme

- If we are unable to reach under-vaccinated populations, there is increased risk to multiple communities/ cohorts across Hampshire and the Isle of Wight.
- If we are unable to secure sufficient workforce due to illness, vaccination as condition of deployment or any other reason our delivery of services will be impacted

Recommendations	The Governing Body is asked to receive and note the risks and actions in place for COVID-19 vaccination.
Publication	Include on public website <input type="checkbox"/>

Please provide details on the impact of following aspects	
Equality and quality impact assessment	Quality impacts from workforce shortages noted. Equality Impact Assessment continues to be undertaken through the Equality Group for Vaccines.

Patient and stakeholder engagement	The report will be of interest to patients and stakeholders across the CCG.
Financial impact, legal implications and risk	<p>Performance impact to services from population health inequalities, delivery pressure on existing workforce and potential dismissals from refusal to vaccination as a condition of deployment.</p> <p>Financial impact of workforce shortages and use of agency/ locum staff.</p> <p>Health and Wellbeing and burnout of staff.</p>
Data protection impact assessment	None to note