



INTEGRATION JOINT BOARD

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| Date of Meeting | 24 August 2021 |
| Report Title | Immunisation Blueprint Refresh |
| Report Number | HSCP.21.066 |
| Lead Officer | Fiona Mitchelhill |
| Report Author Details | Name: Ali Chapman Job Title: Programme Manager Email Address: alchapman@aberdeencity.gov.uk Phone Number: |
| Consultation Checklist Completed | Yes |
| Directions Required | Yes |
| Appendices | Appendix A - Blueprint for City Immunisations Appendix B – Direction to NHSG |

1. Purpose of the Report

- 1.1. The purpose of this report is to provide the Integration Joint Board (IJB) with an update on our immunisation plan including the re-fresh of the Immunisation Blueprint.

2. Recommendations

- 2.1. It is recommended that the Integration Joint Board:

- a) Note the progress made on the mass vaccination programme and flu delivery in 2020 and lessons learned from both;
- b) Agree to the implementation of the new service delivery model for Vaccination services, as outlined within Appendix A, with effect from end of August 2021;



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- c) Note that fixed term staff funded by Covid funding will be in place to deliver on the Extended Flu and Covid Booster until end of March 2022;
- d) Note the identified funding stream required for Covid -19 Booster and Extended Flu; as outlined at paragraph 4.2 of this report.
- e) Makes the Direction, as attached at Appendix B, and instructs the Chief Officer to issue the Direction to NHSG.

3. Summary of Key Information

- 3.1. Immunisation is one of the most effective public health interventions in the world for saving lives and promoting good health. Immunisation helps protect against serious diseases and once we have been immunised, our bodies are better able to fight these diseases if we come into contact with them.
- 3.2. The IJB on 8 September 2020 approved our Service Re-design Blueprint which defined our future state model for the Aberdeen City Immunisation Programme.
- 3.3. Since its development, and the delivery of the Flu Programme (2020/21), which highlighted multiple learning points, there has been increased understanding of the requirements for adequate staffing, programme management, Information Technology, and data to successfully deliver a mass vaccination programme.
- 3.4. The annual Flu Programme (2021/22) has now been further extended to include Aberdeen City Health & Social Care Partnership (ACHSCP), Aberdeen City Council (ACC), NHS Grampian (NHSG) Staff and independent contractors; teachers and pupil facing support staff; the HMP Grampian prison population, prison officers who deliver direct front facing detention services, secondary school pupils and all those aged 50-64.
- 3.5. In February 2021, we commenced the COVID19 Vaccination programme which is currently being delivered in our Mass Vaccination Centre at P&J Live and various pop up clinics throughout Aberdeen City. As at 11th August, 156,067 first doses and 126,821 second doses have been administered.



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There remain around 97,000 doses to be administered to complete all first and second doses in Aberdeen City (made up of around 34,000 first doses and 63,000 second doses)

- 3.6.** In Spring 2021, it was announced there would be a covid booster. High level assumptions have been provided by the Scottish Government (SG) with guidance on which cohorts will receive this and anticipated delivery timescales. Further guidance is awaited regarding the assumption that Covid and Flu could be delivered at the same time.
- 3.7.** Lessons learned from the COVID vaccination programme also highlighted the need to deliver services locally and engage with local community groups, hubs, community centres and places of worship to ensure easier access for diverse and disadvantaged groups. Full details of how we engaged with the Community to target our diverse and disadvantaged groups and cold spot areas are highlighted in Appendix A – Section13.

New Service Delivery Model

- 3.8.** The Vaccination Transformation Programme (VTP) will move towards a single team working across the three locality areas with a central mass venue identified as the main hub. The team will provide a vaccination service across all ages. Uptake data for preschool, school, and adult routine vaccinations will be used to identify areas where further promotion or pop up clinics are required to increase the uptake with locality areas.
- 3.9.** Staff appointed via covid funding are in place until the end of March 2022. This workforce, along with the existing Immunisation Nurses will deliver the covid boosters and flu (including extended flu). This is due to the assumption that covid and flu vaccinations will be delivered at the same time.
- 3.10.** New funding streams, post March 2022, will be required to continue to deliver on extended flu and covid -19 boosters if they become an annual event.

Hub and Spoke Model

- 3.11.** A hub and spoke model will be utilised with the majority of vaccinations delivered in the vaccination hub. There will be a central Vaccination Hub



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within the city centre and fixed clinics in the north and south locality. In addition to this there will be:

- Pop up Clinics for Diverse and disadvantaged populations
- Mobile Vaccination Unit
- Central storage for all equipment within the central vaccination hub
- Routine adult immunisations will utilise the same venues as Covid-19 Booster and Flu, out with their peak delivery times

Partnership Working

3.12. As part of the COVID Immunisation Programme, we have worked collaboratively with partners to look at different ways of delivering vaccinations in alternative settings. This has included working with Locality Empowerment Groups, community leaders, groups, centres and other hubs to raise local awareness within the community, to build networks and enable rapid mobilisation of pop up clinics. We have worked jointly with local churches, mosques and community centres to provide venues as well as Aberdeen City Council for the access of outdoor spaces for delivering vaccinations and support local knowledge to promote vaccine. Collaborative working with local health services, housing, social work and third sector services to deliver at alternative local vaccine clinics i.e. Homeless Services, Sexual Health Services and Healthy Hoose. Joint working with the Grampian Regional Equality Council (GREC) has built relationships which has allowed better reach to promoting vaccine to ethnic minority groups, responsively plan local pop up clinics and support residents with no CHI or not registered with a GP to attend for their vaccine. This approach has supported building longer term relationships to help promote the delivery of the wider immunisation programme within Aberdeen City. Full details can be found on page 14 of Appendix A.

Community Engagement

3.13. Meetings & engagement sessions have been held with local Community Leaders, local social media influencers and local residents to improve engagement with the community and support the vaccine programme to deliver a “person centred” service. Full details of our community engagement sessions are details in pages 11-15 of Appendix A.



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Scheduling of Appointments

- 3.14.** During the delivery of the Mass Vaccination Programme, Service Now (SNOW) and a vaccination management tool (VMT) were implemented.

It is the intention that all adult immunisations should be scheduled utilising these tools going forward. High level assumptions from the Scottish Government indicate that SNOW and VMT will continue to be available and fit for purpose for the delivery of Covid-19 Boosters and Flu for both our Child & Adults Vaccination programmes. These assumptions have been utilised when planning the anticipated workforce.

4. Implications for IJB

- 4.1.** Equalities, Fairer Scotland and Health Inequality: The content of this paper aligns with our Strategic Plan, for which a full health inequality impact assessment has been undertaken. The assessment overall was positive in relation to the Strategic Plan's impact on equality and diversity within Aberdeen City.

A significant amount of work has been conducted during the mass vaccination programme to ensure diverse and disadvantaged are targeted for their vaccination. It is anticipated that the implementation of these plans, will have a positive impact on people affected by socio-economic disadvantage and support the Fairer Scotland duties, as per the ambitions within our strategic plan

Appendix A Blueprint for City Immunisations includes a Summary of Communications, Engagement and Consultation (page 11 – 15).



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4.2. Financial

| | Recurring | Recurring Cost Centre Split | | | |
|------------------|-----------------------|-----------------------------|-------------------|---------------|-----------------------|
| | | PCIP - Adult | PCIP - Pre-school | Core - School | Additional Funding |
| | £ | N33001 | N32203 | N35050 | (COVID/Extended Flu) |
| Agreed Finance | | £904,235.97 | £259,686.00 | £394,607.00 | 0 |
| SUMMARY | | | | | |
| STAFFING | £4,907,947.81 | £834,727.97 | £259,686.00 | £384,963.00 | £3,428,570.84 |
| PREMISES | £408,444.00 | £14,000.00 | £0.00 | £0.00 | £394,444.00 |
| EQUIPMENT | £161,644.00 | £40,000.00 | £0.00 | £1,644.00 | £120,000.00 |
| IT | £20,000.00 | £0.00 | £0.00 | £8,000.00 | £12,000.00 |
| OTHER | £60,256.00 | £15,508.00 | £0.00 | £0.00 | £44,748.00 |
| TOTAL | £5,558,291.81 | £904,235.97 | £259,686.00 | £394,607.00 | £3,999,762.84 |
| Total Spend | £5,558,291.81 | £904,235.97 | £259,686.00 | £394,607.00 | £3,999,792.84 |
| Shortfall | -£3,999,762.84 | £0 | £0 | £0 | -£3,999,762.84 |

4.3. Workforce

The workforce required is a significant step change compared to the previous blueprint. The required workforce is based on lessons learned from Flu delivery in 2020, as well as the mass vaccination programme.

The workforce required will be dependent on the roll out, and financial support available for Extended Flu and Covid-19 Boosters.

Any workforce changes will continue to be progressed in consultation with affected staff and in partnership with our staff side colleagues in line with usual organisational change process. During the Covid-19 response stage, staff side and trade unions have been integral members within our operational governance decision making processes and this will continue.

Workforce Sustainability – to ensure a sustainable long term vaccination workforce, the service is expanding the development of Band 3 Associate



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Vaccinators in line with Scottish Government guidance and local NHS Grampian supported training programme.

4.4. Legal

There are no specific implications as a direct result of this report

4.5. Covid-19

This report deals specifically with the requirements to further the Covid-19 immunisation programme. To ensure the workforce, venues and logistics are in place to support the roll out of the programme.

4.6. Unpaid Carers

Unpaid carers are defined as a specific category within Covid immunisations blueprint and work will continue to ensure access to vaccines is available for this group.

5. Links to ACHSCP Strategic Plan

5.1. The areas of work progress referred to in this report directly align with the delivery of our strategic plan. Specifically:

5.1.1. Prevention: the delivery of our vaccination programme directly seeks to address the preventable causes of ill health in our population.

5.1.2. Personalisation: the vision of our immunisations service redesign seeks to “providing services at the right time in the right place to meet patient needs.”

5.1.3. Connections: The shift in immunisation delivery into community hubs will help us to develop meaningful community connections with local people which will seek to improve immunisation uptake levels.



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6. Management of Risk

6.1. Identified risks(s)

A number of key risks have been identified in relation to the programme of work. See Page 10 & 11 in Appendix A for a full Summary of Identified Risks.



6.2. Link to risks on strategic or operational risk register:

This report links to Risk 2: There is a risk of financial failure, that demand outstrips budget and IJB cannot deliver on priorities, statutory work, and projects an overspend. If Financial budgets for delivering the covid booster and extended flu are not provided to ACH&SCP

This report links to Risk 7 on the Risk Register - Failure to deliver transformation at a pace or scale required by the demographic and financial pressures in the system. If sufficient resources are not provided the VTP may fail to deliver on its objectives.

6.3. How might the content of this report impact or mitigate these risks:

This report is seeking to instruct the Chief officer to request funding streams from NHSG for the covid-19 booster and extended flu, as well as extended funding for the VTP.

| Approvals | |
|---|---|
|  | Sandra Macleod (Chief Officer) |
|  | Alex Stephen (Chief Finance Officer) |