



# BLUEPRINT IMMUNISATION PROGRAMME

Project Name	Immunisation Service Redesign	Date	26/05/2021
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## 1. Purpose and Alignment

### 1.1 Background

This Service Redesign Blueprint (Immunisations – HSCP.21.037) was presented and approved on 8 September 2020 by the Integration Joint Board (IJB) to define a future state model for the Aberdeen City Vaccination Programme.

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.

The Annual Flu Programme 2021/22 has now been further extended to include Aberdeen City Health & Social Care Partnership, Aberdeen City Council, NHS Grampian staff and independent contractors; teachers and pupil facing support staff; the HMP Grampian prison population and prison officers who deliver direct front facing detention services, secondary school pupils and all those aged 50-64 years old.

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 11<sup>th</sup> August, 156,067 first doses and 126,821 second doses have been administered. There remains 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).

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.

As part of the Vaccination Transformation Programme (VTP), adult pneumococcal and shingles has transferred from GP Services to delivery by Health and Social Care Partnership (HSCP). NHS Grampian have advised that previous years uptakes have been in the region of 40-45%, therefore there is a substantial amount of outstanding vaccinations within this population. This has been planned into the Immunisation Blueprint.

Lessons learned from the mass flu delivery programme in 2020 concluded that additional resource would be required to deliver a safe and sustainable VTP annually. It is clear increased funding is required to deliver a sustainable vaccination service to Aberdeen City residents.

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.



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## Purpose

This Blueprint forms an integral part of redefining the City Vaccination Transformation Programme (VTP). It explains the future model and demonstrates how the objectives will be achieved. The Blueprint is a detailed description of what the team will look like in terms of its people, premises, processes and information systems.

This document includes a financial summary relating to the costs. It takes into account the learning from last year's Influenza Programme and extended cohorts 2021/22 and the introduction of the COVID 19 booster programme. It includes further resources required to safely deliver this programme.

## 2. National and Local Drivers for Change

- PCIP – moving of vaccine delivery to HSCPs
- Pandemic – Mass Vaccine Delivery for COVID19
- Flu programme (Extended for 2021/22)
- Pre-school Immunisation Programme
- School Immunisation Programme
- Adult Immunisation Programme

This equates to approximately an additional 58,000 flu vaccinations, and an expected, 236,000 COVID booster vaccinations to be delivered during 2021/22.

## 3. Organisational Context

NHS Grampian are working towards the Scottish Government agreed plan to transition vaccinations away from general practice delivery by 31 March 2022. The delivery of vaccinations have been devolved the Aberdeen City Health & Social Care Partnership.

The VTP has been divided into different work streams to facilitate a phased approach to transfer:

1. pre-school programme – transferred 2019
2. school-based programme (HPV, MMR, MenACWY, flu) – transferred 2019
3. travel vaccinations and travel health advice – plan to transfer 2021/22
4. influenza programme – preschool transferred 2019, adult transferred 2020
5. at risk and age group programmes (shingles, pneumococcal, hepatitis B, BCG) – transferred
6. Covid19 – Vaccination Programme/ Yearly Booster – March 2022, and beyond

This blueprint will ensure that the VTP are delivered in an efficient and effective manner, aligned to localities, as well as seeking to increase immunisation uptake.

The COVID19 Vaccination programme is currently being delivered by existing staff deployed during the pandemic, and a further employed workforce funded through temporary funding to March 2022. This revised blueprint will seek to provide a proposal for ongoing provision of a yearly booster or further vaccine delivery to the population of Aberdeen City.



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## 4. Current Position

Currently the city has four separate vaccination teams:-

- Pre School Team
- School Vaccination Team
- Flu Vaccinations (mainly delivered by Bank Staff)
- COVID19 Vaccination Team (fixed term contracts)

There is room for improvement in the uptake levels in Aberdeen City.

We recognise that the previous version of the blueprint did not identify sufficient resources to deliver the VTP based on the experience of 2020/21.

The COVID19 Vaccination Programme is currently being provided as per Joint Committee on Vaccination (JVC) priorities. This has been delivered by GPs to the Over 80 Population and the Community Nursing Teams have delivered in care homes and housebound individuals. The Scottish Government (SG) and vaccine supply have guided who and when are vaccinated. Due to cold spots and an increase in vaccine supply, there has been some relaxation in SG boundaries, enabling some pop up clinics across the city to reach diverse and disadvantaged communities.

A newly appointed vaccination team made up of approximately 88 whole time equivalent (wte) Vaccinators, 55wte Health Care Support Workers (HCSW), Logistical co-ordinators and admin staff based at P&J Live are delivering to the remaining citizens of Aberdeen City as part of the Mass Vaccination Programme. This workforce is employed to March 2022 and funded by SG COVID19 money.

During the 2020/21 Flu Programme an additional number of senior managers, senior administrators, rostering, data management, call centre staff, logistics and data inputters were identified as being required. This resource and learning led into the recognised requirements to deliver a safe and effective mass vaccination programme.

## 5. Vision Statement

We will support the health of Aberdeen Citizens by modernising the delivery of vaccinations, providing services at the right time, in the right place, to meet the population needs.

## 6. Programme Objectives

### ➤ Objective 1

Implement a new model of delivery, which is coproduced and based on local decision-making. New operational arrangements will be established as business as usual reflecting the needs of the population in regard to accessibility.

### ➤ Objective 2

Ensure any transformation in delivery is achieved without any adverse impact on safety or sustainability of current / existing vaccination programmes.



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➤ **Objective 3**

Ensure that the necessary systems and infrastructure (e.g. IT, data and premises) are in place to support new models of delivery.

➤ **Objective 4**

To continually learn and develop models of delivery which are sufficiently resourced and sustainable.

➤ **Objective 5**

Improve uptake of vaccinations across the city.

## 7. High Level Benefits Map

Benefit	Type	Certainty	Cash Releasing	Owner
Greater access and inclusion for the citizens of Aberdeen by providing person centred service	Tangible	Expected	No	Programme Manager (PM)
Ability to plan better and meet variations in demand as a city Vaccination service. This will return in increased efficiency across the team.	Intangible	Anticipated	No	Programme Manager (PM)
Improved uptake of Vaccinations within the city	Tangible	Anticipated	No	Programme Manager (PM)

## 8. Our New Delivery Model

The proposal is based on the assumption that COVID19 boosters will be provided annually.

The 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.

Evidence demonstrates the development of a vaccination team allows increased consistency in programme delivery enabling implementation of city-wide protocols covering discussion, recording and follow-up with population on immunisation. Team development also facilitates staff education, training and updating, problem solving and has been found to yield efficiencies in staffing requirements to deliver programmes.



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Following on from learning from flu delivery in 2020 and the mass vaccination programme in 2021, the proposed structure for the immunisation programme includes 133wte staff to delivery our full vaccination programme includes Vaccinators, Health Care Support Workers, Associate Vaccinators, Pharmacy Assistants, Logistics, admin team leader, check in admin, data and digital support, rostering support, as well as a delivery manager and team leader role.

Staff appointed via Covid Funding are in place until the end of March 2022. This workforce will deliver the Covid boosters and Extended flu.

Funding post March 2022 will be required to continue to deliver on extended Flu and Covid -19 boosters if they become an annual event. Temporary 12 month contracts will be issues in the first instance until permanent funding is available.

**Workforce Sustainability** – to ensure a sustainable long term vaccination workforce, the service is expanding the development of Band 3 Associate Vaccinators in line with Scottish Government guidance and local NHS Grampian supported training programme.

A hub and spoke model will be utilised with the majority of vaccinations delivered in the vaccination hub. The vaccination hub will be utilised to be the central hub for all necessary vaccination equipment/PPE.

The ‘spokes’ will include vaccination clinics at venues in North and South localities, as well as ad-hoc pop up community clinics to support with diverse and disadvantaged areas. It is the intention that out with peak vaccination periods the vaccination hub could be used for mop up clinics for school vaccinations (e.g. Human Papillomavirus (HPV)).

With the move of routine adult vaccinations (shingles, pneumococcal, hepatitis B) to the community it is anticipated that these can be carried out as a condensed 6 monthly programme, out with peak vaccination periods within the hub and spoke model.

### Annual Schedule

Vaccine	Annual	Approximate Numbers per annum
Annual Flu (included extended)	September -Dec	120,000
Annual Covid Booster	October - March	236,200 (potential cohort)
Routine Adult Vaccinations	April - September	Per Annum – 2,450 – 2,100
Pneumococcal – Age 65 Shingles – Age 70 Hepatitis B		
Backlog Pneumococcal – Age 65 Shingles – Age 70		– 7,351 – 6,223
School Age Mop Up	April - September	



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School Vaccinations (Primary and Secondary) <ul style="list-style-type: none"> <li>• HPV Boys and girls aged 12-13 years. (x 2 Vaccinations)</li> <li>• Catch-ups</li> <li>• DTP &amp; MenACWY – Boys and girls aged 14-5</li> <li>• MMR (delivered between Jan-June)</li> <li>• Flu (September / October – December)</li> </ul>	Term Time September - June	HPV Per annum 19,500 DTP / MenACWY per annum 28,000 – 30,000 (Academy 900-1200 and Prim School 300-500) delivered Sept/Oct-December.
Preschool x 5 appointments per child	Year Round	12,500 per Annum (2,500 year x 5)
Travel	Year Round	Await figures
BCG & MMR Mop up	Year Round	0.5 days per Month

The following table details the potential venues for delivery of VTP.

Venue	Number of Pods	Vaccines deliver to	Facilities	Locality
Aberdeen City Vaccination Centre (Former John Lewis Site)	Up to 40	Covid -19 Vaccine Covid -19 Booster Flu Immunisation Shingles (including backlog) Pneumococcal (Including back Log) School Mop up (e.g., HPV)	To be confirmed	Central
Airychall Clinic	6	Covid -19 Booster Flu Immunisation Routine Adult Immunisations	To be confirmed	South
Bridge of Don Clinic	3	Covid -19 Booster Flu Immunisation Routine Adult Immunisations	To be confirmed	North

### Care Homes & House Bound

Care Homes – Older people  
Mental Health & Learning Difficulties

A team of vaccinators will be used for vaccinating those in care homes.

Housebound

It is anticipated that those who are house bound will be vaccinated within their own home.

### School Immunisations – Business as usual

All Primary and Secondary Schools

n/a

All Routine School Immunisations

All

### Pre -school Immunisations – Business as usual



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Healthy Hoose @ Middlefield Community Hub	1 Room – 5 days per week	Pre-school Immunisations	Facilities already set up for immunisations	North
Tillydrone Community Hub;	1 Room - 5 days per week	Pre-school Immunisations	Facilities already set up for immunisations	Central
Marywell Health Centre.	Up to 3 rooms available - 5 days a week	Pre-school Immunisations	Facilities already set up for immunisations	Central
Bridge of Don Clinic	5 days 1 room	Pre-school Immunisations	Facilities already set up for immunisations	North
Old Aberdeen	5 days 1 room	Pre-school Immunisations	Facilities already set up for immunisations	North

**Potential Pop up Venues – Used for Over 80's or Diverse and Disadvantaged Areas – list is not definitive**

Inverurie Road Clinic	North	Pop Up venues will be used to target specific groups such as: Over 80's Diverse and Disadvantaged areas
Seaton Community Church	North	
Bridge of Don Baptist Church	North	
Danestone Community Centre	North	
Froghall Community Centre	Central	
Mastrick Community Church Hall	Central	
Woodend Hospital	Central	
Mannofield Church	Central	
Westburn Lounge	Central	
Health Village – Green Zone	Central	
Altens Community Church	South	
St Nicholas Church, Kincorth	South	
Old Torry Community Centre	South	
Peterculter Community Church	South	

Map Showing Fixed Venues





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## Mobile Community Immunisation Unit

To ensure that ability to travel is not a blockage to vaccination uptake, a mobile community vaccination solution will also be available. This will allow immunisations to be delivered where people live and in response to areas of lower uptake. Procurement of this mobile unit is to be progressed in 2021.

## Plan for Venues

### Medium Term (1-3 years)

It is anticipated that the mass vaccination centre within the old John Lewis site will become a medium term solution, until a more permanent long term solution can be secured.

### Long Term (3+ years)

It is anticipated that a long term venue will be required for all annual vaccinations (flu, covid booster) and adult routine vaccinations (shingles, pneumococcal, and hepatitis B). Work will be taken forward by the ACHSCP Infrastructure and Capital Programme to determine an NHS owned premises to provide long term space for annual and adult's routine immunisations.





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There will be an update provided within the CO report to the IJB on 24 August 2021 to provide an update for a programme of work to identify assets for longer term. It is anticipated that the smaller community venues would remain as well as a new permanent mass vaccination centre.

### Processes and Information Management

The changes proposed for the delivery of the vaccination programme offer the opportunity for us to deliver services differently. Over time and as recruitment and redesign of workforce allow, we would look to move the service to provide residents with choice as to when they would wish to attend clinics which will include some evenings and weekends.

During the delivery of the mass vaccination programme, Service Now (SNOW) and a Vaccination Management tool (VMT) have been implemented.

It is the intention that all adult vaccinations should be scheduled utilising these tools going forward. High level assumptions from the Scottish Government indicate that Service now and VMT will continue to be available and fit for purpose for the delivery of Covid-19 Boosters and Flu. These assumptions have been utilised when planning the anticipated workforce. Please see Appendix 2 which details the data process for the current mass vaccination programme.

## 9. Data

Currently existing vaccination uptake data is available on a city and practice level on a quarterly basis, around 6 months following each quarter. It has been identified that in order to continue to make improvements and be confident that these improvements are having a positive impact on our vaccination uptake levels, frequent, quality data is required at a community/ locality level.

During COVID19, public health data on uptake is now available to the service at a community level on a daily basis to support the vaccination programme to identify areas that require further promotion and support. Work is ongoing with NHS Health Intelligence to ensure this information is available for all vaccination programmes.

## 10. Financial Summary

	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



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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
<b>TOTAL</b>	<b>£5,558,291.81</b>	<b>£904,235.97</b>	<b>£259,686.00</b>	<b>£394,607.00</b>	<b>£3,999,762.84</b>
Total Spend	£5,558,291.81	£904,235.97	£259,686.00	£394,607.00	£3,999,792.84
<b>Shortfall</b>	<b>-£3,999,762.84</b>	<b>£0</b>	<b>£0</b>	<b>£0</b>	<b>-£3,999,762.84</b>

### 11. Governance Approvals

Report	Committee/Board	Date
Blue Print for City Immunisations	IJB	September 2020
Blue Print for City Immunisations - Refresh	EPB	May 2021
Blue Print for City Immunisations - Refresh	IJB	July 2021

### 12. Key Risks

Description	Mitigation
It is unclear if there will be a new funding stream for the covid booster and extended flu. As such the new posts cannot be recruited to until this has been confirmed.	Recruitment to new posts will not commence until funding source identified
It is unclear when a COVID19 booster may be available, if it is ready by autumn we may be able to plan delivery alongside flu, or after flu.	We will continue to receive updates nationally
We are unclear if the COVID19 booster will be an annual event or just for 2021/22	Covid-19 booster immunisation nurses will be employed on a fixed term for the first 2 years.
Inability to recruit registered nurse vaccinators and retain them	Proactively advertising vacant posts. Use of existing bank nurses. Expand/develop Band 3 vaccinator role
Time to recruit and train nurses	Work with recruitment team to ensure timely process and work with PEF/clinic coordinators for training.
Availability of sufficient staff to mentor nurses on the training programme	Vaccination Team Leader to support if required.
Unable to source sufficient venues in the community to deliver immunisations	Building relationship with communities during COVID has secured further community venues.



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<p>The use of VMT for Covid 19 Booster and Flu for Autumn 2021 has been confirmed for adult vaccinations – awaiting confirmation for children. If VMT is not available for use across all vaccinations this will cause substantial admin support required to update Vison / Emis (GP IT Systems) for all patients</p>	<p>Ongoing dialog with the national team to highlight the need for use of VMT across all vaccinations</p>
<p>The use of the national booking centre to allocate all child &amp; adult appointments and send letters for Covid 19 Booster and Flu has yet to be confirmed. Risk around contact centre support/ admin required for lettering (mail merge) and costs of letters sent via royal mail</p>	<p>Confirmation that national booking centre will be used for Adult flu and COVID booster – local systems to continue to be used for Pre-school and School Vaccinations.</p>
<p>It is currently unknown if Flu and Covid can be administered at the same time. Update of both vaccines likely to be higher if provided at the same time. If not whichever is provided last likely to have much lower uptake.</p>	<p>Plan has been made with both vaccinating together and separately.  Communications around benefits of getting both Flu and Covid built into communications and engagement plans.</p>
<p>Potential double work in terms of admin and contact centre work around issuing twice as many letters and lining up cohorts / ensuring time in -between – especially if patient reschedules</p>	<p>Consideration being given to run Flu programme first.</p>
<p>Risks around logistics support for using ad-hoc venues – Increased requirement for logistic/facilities support for new Mass Vaccination Centre.</p>	<p>Logistics Support built into the workforce requirement.</p>
<p>Preschool boosters will be changing from 4years to 3 years 4 months in 2021/22. As such there will be a backlog of 1600 of Preschool boosters to catch up on</p>	<p>Plan in place to start with oldest children and put one extra clinic on per week to catch up these.</p>

### 13. Communications, Engagement and Consultation

#### Engagement and Consultation to date

#### **Covid Focus Group – Locality Engagement Groups**

In March 2021 a focus group was carried out through Community Planning Aberdeen (CPA) with the Local Empowerment Groups (LEGS) to discuss issues around covid-19 vaccinations and testing. The focus groups identified a number of issues around vaccine uptake including:

- Appointment letters not received or received after appointment date - lack of awareness GP details need to be kept up to date.
- Barriers around travelling to P&J Live - lack of awareness of community transport available
- Anxieties from those at home/shielding for so long - attending large venue.



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- Concerns around allergies.
- No Photography at P&J Live – social media for younger people

Solutions and actions were identified and taken forward :

- Promotion of keeping details up to date at GP and promoting how to re-book missed appointments.
- Video Walk through of what to expect at P&J Live & promoting “Quiet Space” highlighting social distancing measures put in place.
- Promotion of ThinC and other travel options to P&J Live via social media and radio.
- COVID-19 Vaccination Staff Handbook to provide all staff with information to allow them to encourage vaccine uptake.
- Community Pop Up Clinics organised to provide more local venues for those unable to travel to P&J.
- Promote use of social media to promote uptake – areas outside P&J Live where young people can photograph their attendance at clinic.

There are weekly meetings with Public Health co-ordinators to ensure further linkages and promotion of vaccine through Locality Empowerment Groups and neighbourhood leads.

### **Covid-19 Vaccine Local Survey**

In April 2021 a local online public survey undertaken and widely advertised through social media and LEGS. 149 responses were received. Key themes include Vaccine hesitancy; transport / distance to P&J Live; and a theme around being healthy/ trusting own immune system.

There will be ongoing review with public health colleagues & ACHSCP Covid Touchpoint group to identify ways of increasing uptake and address the issues raised through the survey.

### **Covid – 19 Local Community Clinics to target our Diverse and Disadvantaged Populations)and Cold Spot Areas.**

From April 2021, a number of ‘pop up’ clinics have been organised for the covid-19 vaccination to target diverse and disadvantaged population’s e.g. homeless population and Black and Minority Ethnic (BAME) communities.

For non-English speakers vaccine leaflets in various languages are available along with a language line to provide translation support. In May 2021 Covid Flyers were translated into 7 different languages to support the promotion of local clinics to increase uptake and these were posted on various community sites across Aberdeen City.

The NHS Grampian Liaison Officer has been linking with Residents at Clintery and any new traveller groups arriving in Aberdeen to promote vaccine uptake and support attendance at vaccination clinics. Links have been made with the Seafarers Organisation and ISS Shipping to ensure any crews arriving in Aberdeen Harbour can attend walk in clinics. ACHSCP Vaccination Team have also been linking with Intermediaries to ensure anyone not registered with a GP can attend to be vaccinated no matter what their circumstances.



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As of 11<sup>th</sup> August, 48 pop up community clinics have taken place in response to the above engagement events. These have seen **3,594** people vaccinated who were unable to attend their appointments at P&J Live. These clinics were bookable via the Aberdeen City Council (ACC) COVID call centre or resident “Walk Ins” on the day. These clinics have taken place at various locations within Aberdeen City targeting our diverse and disadvantaged areas and could not have been achieved without the support of local community centres and hubs, places of worship, local businesses and venues and Aberdeen City Council for supporting the use of outdoor spaces. The following venues have been used to deliver our local community Clinics

Jesus House, Holburn	Timmermarket	Sexual Health, HV	Health Village Green Zone
Tillydrone Community Hub	Gerrard Street Baptist Church	Seaton Community Church	ASCO, Harbour Services
Michie's Pharmacy	Fountain of Love Church	St Nicholas Church, Kincorth	Froghall Community Centre / Foodbank
Balnagask Community Centre	Tillydrone Community Church	Masjid Alhikmah Mosque	Inschgarth Community Centre
Beach Ballroom	Healthy Hoose	Mastrick Community Centre	Quaker Meeting House, Crown Street
Elphinstone Hall, University of Aberdeen	Northfield Community Centre	Hazelhead Park – V in the Park	Aberdeen Football Club

Pop up clinics will continue to run to target diverse and disadvantaged populations and these will be extended to further areas of Aberdeen City. It is intended that this will continue with Extended Flu and COVID Booster.

Feedback from these community clinics have been very positive to date, highlighting the need to reach the more vulnerable members of the community that have been unable attend P&J live for various reasons including extreme poverty, health reasons and diverse and disadvantaged groups who have been supported by local community networks to attend these pop up clinics.

### **Covid -19 Feedback – Call Centre**

A survey was conducted by ACC Call centre to determine reasons people were not attending their planned appointment to support planning work to increase uptake.

A large number of the calls were unanswered and 18% of the total number of people who answered no longer live at their address or have moved abroad reiterating the importance of encouraging people to change their details with their GP practices.

### **Ongoing Consultation – Diverse and Disadvantaged Populations**

An action plan was developed and provides details of ongoing communication and promotion to address vaccine uptake in diverse and disadvantaged populations. The action plan will continue to be progressed when covid-19 boosters and Flu vaccinations commence in Autumn 2021.



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### Future Vaccination Plan – Engagement Survey and Focus Groups

A survey around the future immunisation model was carried out in May and June 2021, to determine the key themes that the general population feel are most important to them.

The Engagement survey had 267 responses and there were 15 people who attended the engagement session, with a range of localities represented.

The key themes from the engagement can be seen in the table below:

Venue	<ul style="list-style-type: none"> <li>Results imply that the majority of respondents would prefer to have a clinic in their community which is near to their home address (10-20 minute journey).</li> <li>Respondents are also willing to visit a city centre venue so community clinics should be considered for people in disadvantaged areas, those with young children and older people.</li> <li>Transport is an important priority and bus routes should be considered along with adequate parking</li> </ul>
Appointments	<ul style="list-style-type: none"> <li>Most of the respondents would prefer weekdays and have the option to make their own appointments. They feel this would result in less wastage of appointments.</li> <li>Text and email were the most popular correspondence method.</li> </ul>
Other	<ul style="list-style-type: none"> <li>Recognition that TECA was appropriate for COVID due to extraordinary circumstances however, respondents would prefer regular vaccines in community clinics. For instance, using local churches and pharmacies which worked well and could consider using family appointments to reduce the travel time.</li> </ul>

A summary of all responses can be found in Appendix 5.

### Partnership Working

As part of the COVID Immunisation programme, we have worked collaboratively with Partners to look at different ways of delivering vaccinations in alternative settings. For example:

- Working with Aberdeen City Council to make use of local awareness, networks and rapid mobilisation when required. This has included access for the use of outdoor spaces (parks and city centre locations) to target our younger age groups with mobile vaccination clinics.
- Working in partnership with Homeless Service, Housing, Social work & third sector services i.e. Street Friends to deliver local immunisation clinics whilst supporting with the provision of food via the foodbank and housing support and advice.
- Working in partnership with Sexual Health Services (SHS) with staff attending local pop up clinics to hand out Dry Blood Spot Testing kits & future joint Sexual Health Screenings and COVID vaccination Clinic planned in July.
- Working jointly with GREC (Grampian Regional Equality Council) to promote vaccine to ethnic minority groups, plan local pop-up clinics, undertake surveys, and support residents with no CHI or GP registered to increase uptake.
- Working jointly with local Churches/places of worship, Mosques and Community Centres to provide venues for delivering vaccinations and support local knowledge to promote vaccine.
- Liaising with ACC Public Health, LEGS and CPA to promote vaccine within local communities.
- Working collaboratively with Healthy Hoose Hub to deliver vaccinations on a daily basis.





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- Working collaboratively with Universities to delivery vaccinations to local and international students.
- Working collaboratively with Aberdeen Football Club to promote uptake and organise local pop up clinics.

This approach has supported building longer term relationships for the delivery of the wider vaccination programme within Aberdeen City.

### 14. Resources/ Support Required from NHS Grampian

We will continue to work closely with our colleagues within NHSG to progress our local delivery model and transform the way in which we deliver vaccinations in the city.

Areas of support required are:

- Access to regular, timely, accurate data at city level, and ideally at data zone level.
- Delivery of ongoing training, including at peak vaccination periods.
- Providing timely information on national changes to vaccination requirements.
- Liaise with national vaccination bodies/ groups to continue to push towards implementing digitalised and more streamlined services.
- Organisational redesign to combine the school vaccination team with the wider immunisation team.
- Research and sharing of best practice from elsewhere

### 15. Lessons Learned

In April 2021 Grampian wide lessons learned process was undertaken to ensure all learning points from 2020 Flu delivery and the mass vaccination programme were captured.

The immunisation blueprint has taken cognisance of the lessons learned. In particular the issues around capacity, capability, roles and responsibilities of staff delivering the vaccination programme.

There has been lots of learning in the last year about staffing rostering, this learning needs to now be embedded in all of the Vaccine Programmes.

The Immunisation Blueprint has captured staff required to form a business as usual service including support from Logistics, rostering, data and digital and the local ACC contact centre.

The lessons learned as part of the COVID 19 Vaccination Programme has also highlighted the need to ensure early communication with Neighbourhood leads who have links to various groups and networks throughout Aberdeen City to help to promote uptake. It 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.

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Appendix 1 – Covid Booster Delivery - Plan A & B

	Covid -19 Booster & Flu (including Extended) Plan A	Presumptions Of Plan A	Covid -19 Booster & Flu (including Extended) Plan B	Risks of Plan B
National Booking System Including letters	Use of National Booking system to upload cohorts for upload of cohorts. Letters issued centrally	Use of national booking system annually going forward for Covid 19 booster and flu	Letters to be created locally with Contact Centre and Wendy Aitkens team	Costs associated with Royal Mail  Covid and Flu letters not being issues by the same body – will impact on scheduling cohorts
VMT	Use of VMT for Covid Boosters and Flu	Full end to end integration for Flu and Covid 19- booster	Paper VMT Forms – for potentially both Flu and Covid -19 booster	Resource required to input into GP system  Potential for Covid-19 booster to have VMT but not flu.
Local Contact Centre	Local Contact Centre to be used to re-schedule bookings within national booking system Action to liaise with JM / ES around what this resource might look like / cost.	National Contact centre not in place	NHS Contact Centre – Used for Flu in 2020	
Venues	Mass vaccine site for Covid-19 Booster, and flu vaccine  3 or 4 community venues which can be set up for vaccinations on a permanent basis)	Long term lease option for mass vaccine site  Community venues prioritised for vaccination space within Infrastructure Refurbishment Programme of work	Local community venues – Churches, Community Centres.	Risk around capacity for logistics to set up venues on a weekly basis

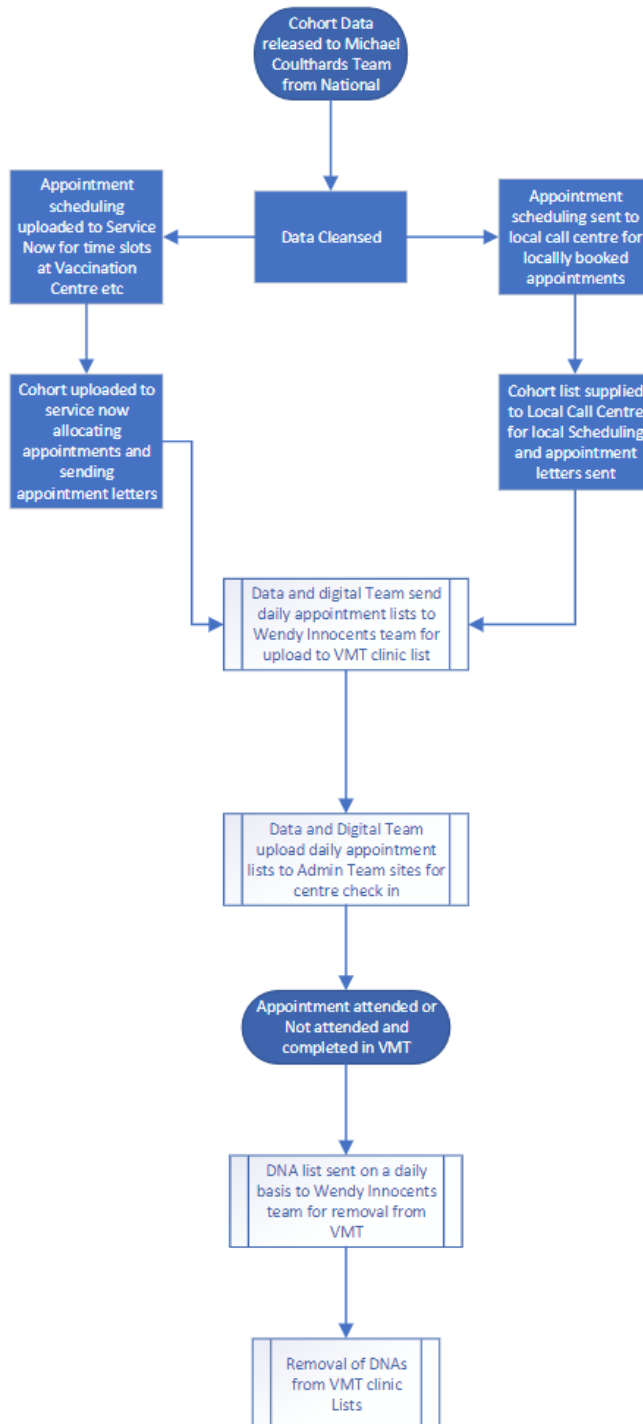
	<h2>BLUEPRINT IMMUNISATION PROGRAMME</h2>	
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IT	Use of teams for uploading clinic list and check in of public  iPads for vaccinators	Appropriate Access to Wi-Fi within venues	Paper clinic lists and paper VMT Forms	Risk around the logistics of printing clinic lists  Admin support required to manually update records
Vaccinator & HCSW Workforce	Permanent, business as usual, vaccination staff employed by Aberdeen City HSCP to provide all annual and routine adult vaccinations – Development of Band 3 Associate Vaccinator Role.	Funding in place to support new delivery model	Use of bank vaccinators and HCSW	Risk around covid boosters and annual flu not being progressed at pace



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## Appendix 2 Data Process





# BLUEPRINT IMMUNISATION PROGRAMME

## Appendix 3 Future Vaccination Plan – Engagement Survey and Focus Groups Summary of Stakeholder Engagement

### Section 1: Immunisation Transformation Programme Survey

Number of responses - 267

North

Central

South

Priority Neighbourhoods

#### 1. Where is most important for you/your family to get immunisations?

[More Details](#)

Insights

Near to my home address	230
Near to my work	10
Near to public transport optio...	15
Other	11

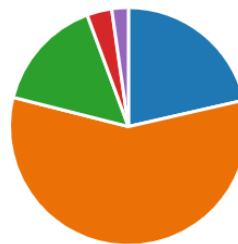


#### 2. How far would you be prepared to travel for you/your family's immunisation appointment?

[More Details](#)

Insights

Less than 10 minutes	57
10-20 minutes	153
20-40 minutes	41
More than 40 minutes	9
Other	6



#### 3. When would you prefer to attend your immunisation appointments?

[More Details](#)

On the weekdays i.e. Monday-...	106
In the early morning i.e. 7am t...	25
In the evening i.e. 5pm to 8pm	59
At the weekends i.e. Saturday ...	40
Other	33



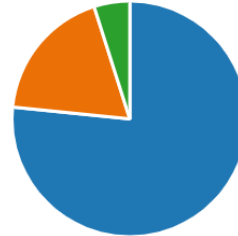


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4. Would you prefer to make an appointment or to be able to drop-in to get your immunisation?

[More Details](#)

● Make an appointment	203
● Drop-in service	49
● Other	13



5. If you were to use a drop-in service, how long would you be happy to wait to be seen?

[More Details](#)

Insights

● Less than 15 minutes	121
● 15-30 minutes	110
● More than 30 minutes	25



6. Would you be willing to attend a city centre clinic and/or a community pop up clinic?

[More Details](#)

Insights

● City centre clinic	10
● Community pop up clinic	97
● Both	136
● Don't know	20



7. How would you like to be notified about your appointments?

[More Details](#)

● Text	99
● Email	81
● Letter	46
● Online booking forum	29
● Other	11







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8. Do you have any other comments about what is important about access of future venues for all vaccinations?

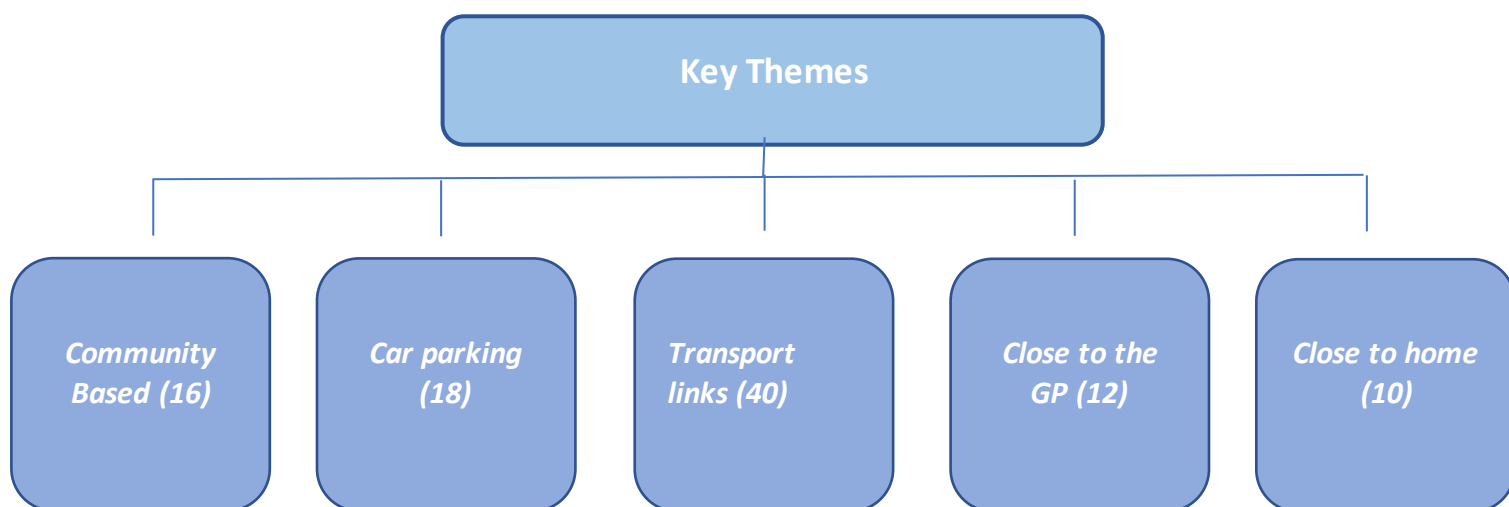
[More Details](#)

Insights

100

Responses

Latest Responses



Transport	
Responses	Number of responses
Bus fare to be waived	3
Transport Links	14
Cost of public transport	4
Car Parking	18

Location	
Responses	Number of responses
Community based	16
Accessible in the community by foot or bike	3
Unnecessary trips to the city centre put people at risk	1
At home for people with mobility issues	1
Drop in centre	1
Will not attend the city or pop up clinics	1
Easy access	5
Close the GP	12
Close to home	10
Health issues that make travelling challenging	1



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Safety	
<i>Responses</i>	<i>Number of responses</i>
<b>Covid anxiety of using public transport</b>	2
<b>Health professionals have too much to do</b>	1
<b>Patients should be able to access health vaccine records</b>	2
<b>Efficient time management for appointments</b>	1

Inclusive for all	
<i>Responses</i>	<i>Number of responses</i>
<b>Consider individuals age</b>	3
<b>Accommodating for disabilities</b>	2
<b>Language support and translation</b>	1
<b>Family vaccinations</b>	4

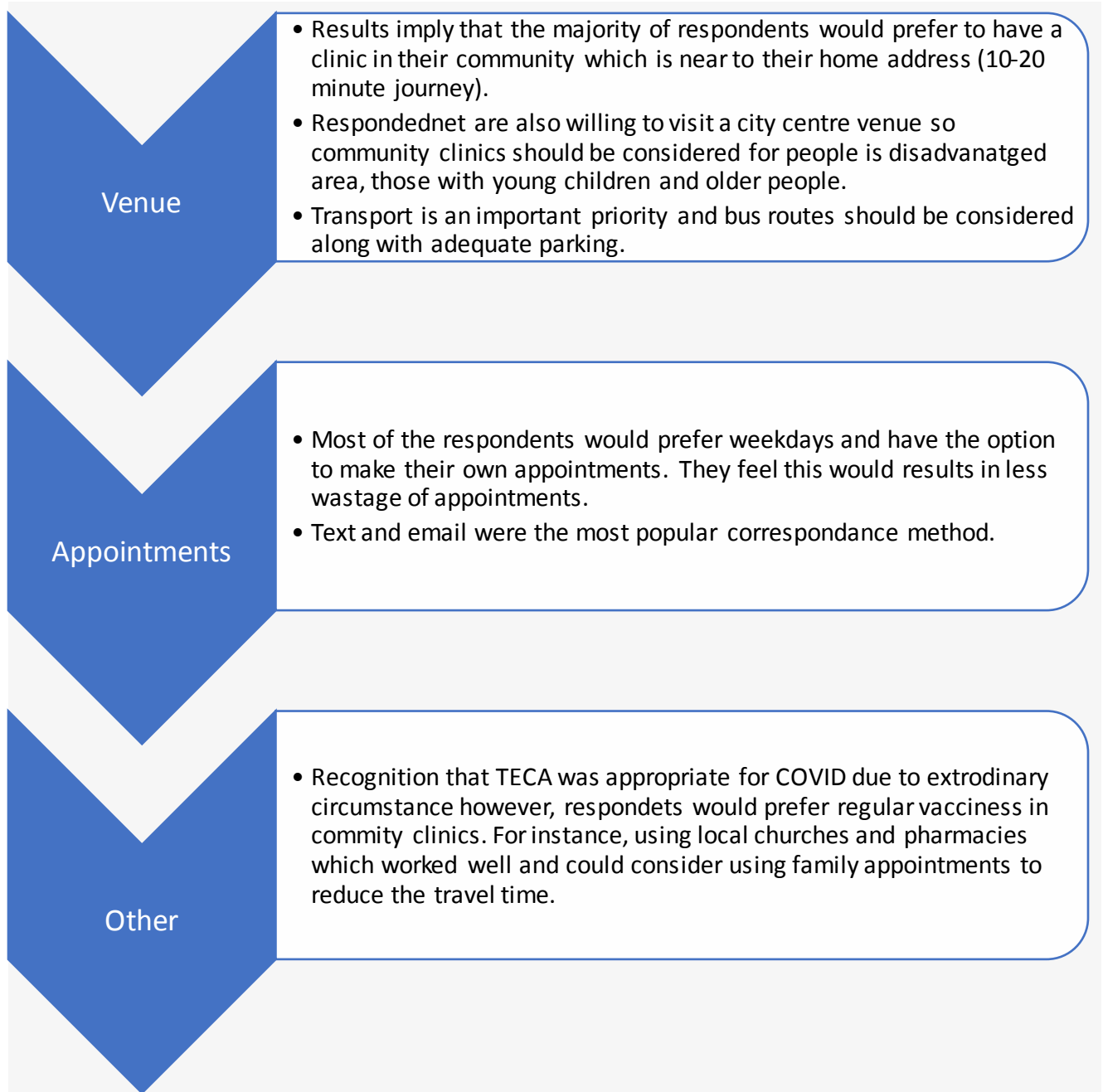
Facilities	
<i>Responses</i>	<i>Number of responses</i>
<b>Toilet facilities</b>	1
<b>Mass vaccination centre</b>	1

Concerns	
<i>Responses</i>	<i>Number of responses</i>
<b>Ability to book your own appointment time</b>	6
<b>Difficulty using the NHS public inform</b>	1
<b>Wait time for vaccine</b>	1
<b>Contact details in case you get missed out</b>	1
<b>To be informed about left over vaccines</b>	2
<b>Vaccines should be done by the local health visiting team</b>	1
<b>Ability to choose the type of vaccine</b>	1
<b>GP concerns</b>	2
<b>No changes are needed for the organisations of immunisations</b>	1
<b>Detailed information about the vaccines</b>	1



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## Primary Themes



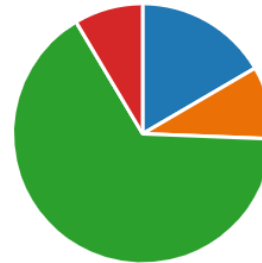


# BLUEPRINT IMMUNISATION PROGRAMME

9. Is there anything else you would find beneficial at an immunisation centre?

[More Details](#)

● Health information	33
● Wellbeing activities	18
● Health checks	131
● Other	17

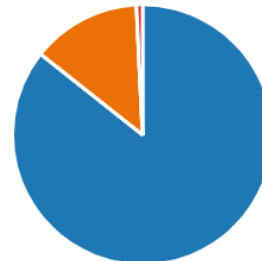


10. What gender are you?

[More Details](#)

Insights

● Woman	227
● Man	36
● Non-binary	0
● Prefer not to say	2

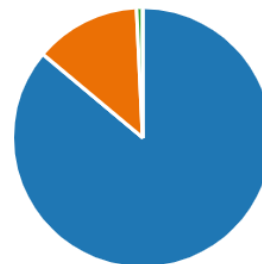


11. What is your sex?

[More Details](#)

Insights

● Female	229
● Male	35
● Prefer not to say	2
● Other	0



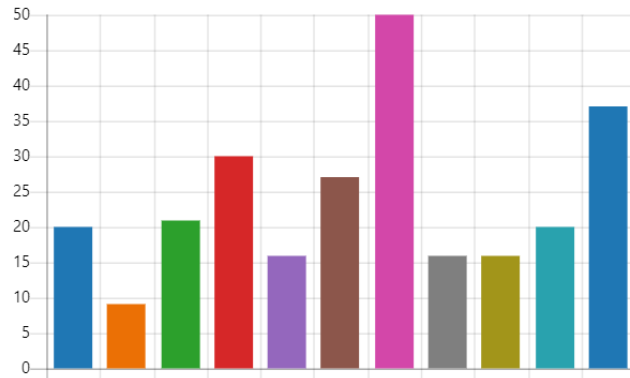


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## 12. What is your postcode?

[More Details](#)

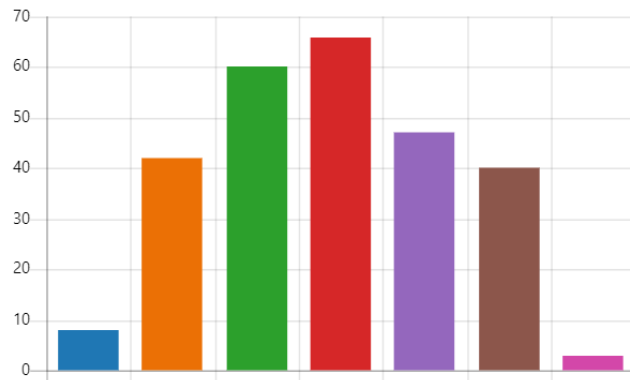
● AB10	20
● AB11	9
● AB12	21
● AB15	30
● AB16	16
● AB21	27
● AB22	50
● AB23	16
● AB24	16
● AB25	20
● Other	37



## 13. What age group are you in?

[More Details](#)

● 18-24	8
● 25-35	42
● 35-44	60
● 45-54	66
● 55-64	47
● 65 and over	40
● Prefer not to say	3



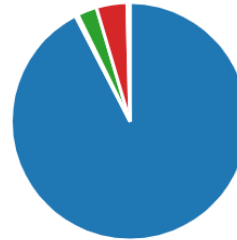


# BLUEPRINT IMMUNISATION PROGRAMME

## 14. What is your sexuality?

[More Details](#)

<span style="color: blue;">●</span> Heterosexual/Straight	243
<span style="color: orange;">●</span> Gay/Lesbian	1
<span style="color: green;">●</span> Bi-sexual	7
<span style="color: red;">●</span> Prefer not to say	11
<span style="color: purple;">●</span> Other	1

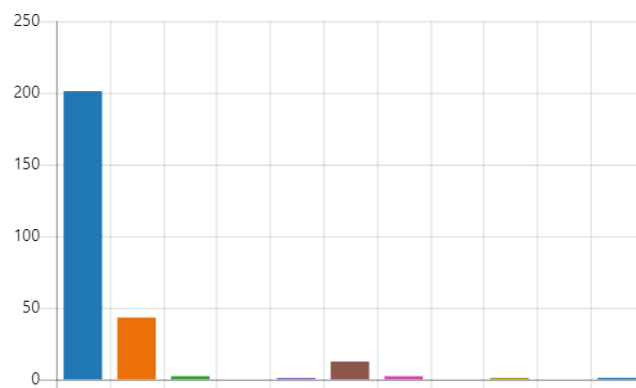


## 15. What is your ethnicity?

[More Details](#)

[Insights](#)

<span style="color: blue;">●</span> White Scottish	201
<span style="color: orange;">●</span> White British	43
<span style="color: green;">●</span> White Irish	2
<span style="color: red;">●</span> Gypsy/Traveller	0
<span style="color: purple;">●</span> White Polish	1
<span style="color: brown;">●</span> Other white	12
<span style="color: pink;">●</span> Mixed multiple ethnic group	2
<span style="color: grey;">●</span> Pakistani	0
<span style="color: olive;">●</span> Indian	1
<span style="color: teal;">●</span> Bangladeshi	0
<span style="color: blue;">●</span> Chinese	1

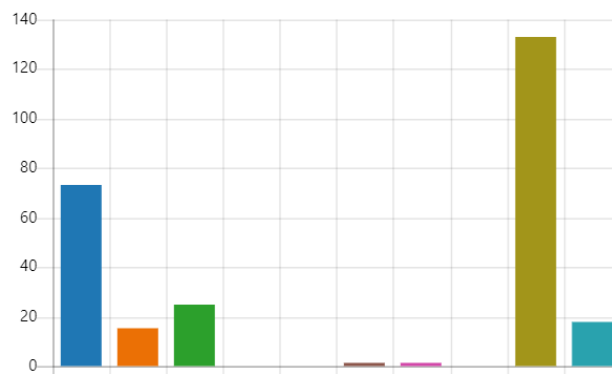


## 16. Which is the following best describes your religion?

[More Details](#)

[Insights](#)

<span style="color: blue;">●</span> Church of Scotland	73
<span style="color: orange;">●</span> Roman Catholic	15
<span style="color: green;">●</span> Other Christian	25
<span style="color: red;">●</span> Muslim	0
<span style="color: purple;">●</span> Sikh	0
<span style="color: brown;">●</span> Buddhist	1
<span style="color: pink;">●</span> Jewish	1
<span style="color: grey;">●</span> Hindu	0
<span style="color: olive;">●</span> No religion	133
<span style="color: teal;">●</span> Prefer not to say	18







# BLUEPRINT IMMUNISATION PROGRAMME

## Section 2: Vaccination Transformation Programme - Focus Groups

### Central Vaccine Focus Group 5 attendees

#### Venue

- City centre is accessible and as it has good transport links would be a convenient location, however would be willing to travel further even if it caused some inconvenience to enable me to get vaccine quicker/helped with a quicker delivery of programme
- Benefit of TECA was parking, however a city centre location may be easier for older people
- After shielding was concerned at getting public transport to TECA however when at TECA felt safe
- City centre location is better however appreciating logistics of delivering such a large programme therefore need to choose venue that works for the majority

#### Appointment times

- If the programme is delivered in winter, I would be concerned to go to evening appointments when it is dark at nights therefore during the day would be better and happy to attend any day of the week.
- If your employer is supportive any time is suitable however may be more difficult for people who work if they don't have supportive employers. It would be good to encourage employers to let staff attend e.g., Community Plan Aberdeen employers could set a good example by encouraging employees to attend for appointments

#### How to Book Appointments

- Booking on-line is best option as this means highest chance of people turning up, for people who don't have access to on-line they could get family/friends to help or provide a national number they could call.
- Could there be a waiting list so if people DNA there could be a reserve list to call people up at short notice to save wastage of vaccine.
- The group all praised the set up at TECA, commenting how safe people felt, how well organised it was and that people felt it was delivered with a 'human' approach which was above and beyond expectations.

#### Other

- Mannofield Church worked well with flu vaccine; additional benefit of community clinics is connecting people who may otherwise be isolate



# BLUEPRINT IMMUNISATION PROGRAMME

## South Vaccination Focus Group – 10 attendees

### Venue

- Needs to have disability access.
- Parking, there needs to be lots of spaces available (not just 1 or 2). TECCA was good for this.
- Common City Centre bus routes need to be considered as people with learning disabilities often use the same bus routes regularly, trying to navigate a new route may be stressful and off putting.
- Needs to be directly on a bus route. However, consideration needs to be taken with clinic time as some buses are not regular and people may find themselves only having the option to arrive very early or for example when travelling from Cove to TECCA journey may take approx. 2 hours. This is not practical and may mean people having to leave at 7am or not getting home until late at night.

### Suggestion of pop-up clinics

- Residents were appreciative of the Kincorth Community Centre Flu Clinic. Plenty of parking and most residents could walk. There is also a bus from Cove.
- Beach Ballroom
- Community Centres and Churches are well known by community members and local. ACVO are happy to send out an “advert” to their contacts if needed when scouting locations.
- The Mission on King Street.
- Medical Practices could be utilised on evenings and weekends.
- Schools like when they were used for the 2020 Flu clinics. Plenty of parking and local, most are on a bus route.
- Supermarkets or Shopping centres. Drop-in clinics like they do in America. E.g. Asda, Bon Accord Centre, Union Square etc.
- Empty shops in the City Centre e.g. BHS, Debenhams

### Appointment Times

- Weekends and evenings are good for people who work.
- Flexibility needed to be able to change appointment if required for example if you need to arrange for a support worker to come along.
- If you give people plenty of notice they will be able to make suitable arrangements.

### How to Book Appointments

- Happy for appointments to be booked for you in advance if there is an option to reschedule if required.
- Would be good if someone could phone to offer an appointment as this allows a suitable time to be found and helps those who are blind and may miss the letter.
- Would be good to offer all options text/letter, online booking and phone call for booking.
- Could a generic reminder be sent to all - “You are due your flu vaccination, please call ... Or book online”?



## BLUEPRINT IMMUNISATION PROGRAMME

### General

- Myths going around Polish community about contents so individuals not getting vaccine due to Catholic faith.
- Will a quiet room be bookable at all venues?