



INTEGRATION JOINT BOARD

Date of Meeting	4 th February 2025
Report Title	Grampian Vaccination and Immunisation Programme - Annual Report 2024
Report Number	HSCP.25.004
Lead Officer	Sandy Reid People and Organisation/Service Manager for Sexual Health Services
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Consultation Checklist Completed	Yes
Directions Required	No direction requires to be issued to Aberdeen City Council or NHS Grampian as a result of this report.
Exempt	No
Appendices	<i>A - Vaccination and Immunisation Annual Report 2024</i>
Terms of Reference	1c - Any other matter that the Chief Officer determines appropriate to report to the IJB

1. Purpose of the Report

To provide an annual monitoring report of vaccine preventable disease surveillance data, along with uptake data for each vaccine delivered within Grampian.

2. Recommendations

2.1 It is recommended that the Integration Joint Board:

- notes the findings of the Vaccination and Immunisation Annual report 2024; and
- Instructs the Chief Officer to provide an annual report to the Integration Joint Board with the next due in 2026.



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3. Strategic Plan Context

3.1 The Aberdeen City Health and Social Care Partnership's Strategic Plan 2022 - 2025 has 4 main aims: caring together; keeping people safe at home; preventing ill health; and achieving fulfilling, healthy lives.

3.2 The attached annual report is a document which demonstrates the continued delivery of the Grampian arm of the Scottish Vaccination and Immunisation Programme. It is offered to the Aberdeen City IJB as one of our partners to deliver assurance on a local footprint. Because of its strong return on investment, vaccination will be a cornerstone of strategic priorities to prevent ill health and achieving fulfilling, healthy lives. Maximising uptake is the cornerstone of a vaccination service and the entire attached report explains the Grampian context of how vaccination is offered, to whom and why within the framework of a national programme. Reports of quality improvement actions which have already been carried out and those which are planned over the coming years are given from page 40 onwards. Aberdeen City's IJB Strategic plan highlights childhood vaccinations and evolving risks from Covid-19. There is a highlight section in Part 9 commencing on page 41 which details the Aberdeen City's team's successful response to support to childhood delivery. The changing context of vaccines for Covid-19 is given to explain why eligible cohorts are reducing and the programme is changing.

3.3 Principles and priorities of local partners and those of the programme are expected to align and resonate in the focus on maximising vaccination uptake, finding ways to improve equity, supporting wider health improvement initiatives of colleagues out with the programme via Making Every Opportunity Count etc, joint events and other integrated outreach initiatives. We also seek to move to a Once for Grampian approach where possible to deliver efficiencies and free up resources by the removal of duplication. One example for this year is the Grampian call centre, a second for 2025 is the Grampian Travel Health Service.

4. Summary of Key Information

4.1. The World Health Organisation (WHO) describes vaccines as one of the two public health interventions that have the greatest impact on the world's health, the other being clean water. Vaccination can prevent or reduce the severity of disease, minimise disability and save lives, often in many of the most disadvantaged people in society. It offers excellent value for money by reducing current and future public expenditure on health and social care provision.



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- 4.2. Effective control of vaccine preventable disease requires action across the whole health and care system, and this aligns with the drive to improve outcomes and reduce inequalities.
- 4.3. Scotland, like many countries close to home and worldwide, is seeing declines in vaccinations. In Scotland uptake has largely held or shown modest decline for many routine vaccinations with sharper declines in seasonal vaccinations. Grampian is seeing the same trend, almost exactly mirroring the national picture. Against this trend since our last report percentage uptake for Aberdeen City has improved for almost every part of the childhood routine vaccination programme for every year group.
- 4.4. Teams continue to transition from the mass vaccination hub model of delivery created at the height of the Covid pandemic to a smaller service, more fitted to “business as usual” activity whilst retaining the ability to flex as needed. Aberdeen City are at the forefront of a change in model from a mass vaccination hub to a vaccination and wellbeing hub, bringing together a range of professionals and services, making every opportunity count across a range of determinants of health, and by doing so making a vaccination offer to citizens who may not have attended otherwise. During Public Health Scotland’s visit to NHS Grampian the good practice seen at Aberdeen City Vaccination and Wellbeing Hub was greatly admired.
- 4.5. The delivery of vaccination programmes has not yet reached a stable state nationally or locally. A number of changes have been implemented since the previous report including the introduction of a new Respiratory Syncytial Virus (RSV) vaccine to protect infants and older adults. A change in the vaccine for Pertussis in pregnancy programmes, changes to eligibility for Spring and Autumn COVID-19 programmes, changes to eligibility for flu programme and the rolling programme changes to Shingles continue to roll out. In addition to this the service has moved from separate call centres within health and social care partnership areas to a Once for Grampian single call centre to utilise economies of scale with resultant financial savings. Next year we will see changes to the preschool programme to introduce an 18 months visit to support an additional dose of hib c and the introduction of a vaccine against varicella (chickenpox). We will also see the eligible for severely weakened immune system for the shingles programme reduce from age 50 to 18 years and based on JCVI advice we should begin to plan for more stable eligible cohorts for covid-19 programmes based on cost effectiveness analysis.
- 4.6. As part of the new Scottish Vaccination and Immunisation Programme’s Strategic Framework we are asked to focus on improving equity across our



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programmes. We are responding with an equity plan and a Grampian Strategic Framework which is realistic within current resources and will build on the successes seen within Grampian, including those in Aberdeen City. In addition, we are expecting the launch of national standards for vaccination teams to work to which are included in NHS Grampian's Annual Delivery Plan reporting to Scottish Government.

- 4.7. These competing priorities will all have an impact on the work done in Aberdeen City over the next 3-5 years. Outreach work for small populations cannot deliver as many vaccinations as in a hub in the same timeframe. As programmes expand and the resources to deliver funded via Scottish Vaccination and Immunisation Programme and Primary Care Improvement Programme remain static at some point there will be a trade-off between putting resources into reducing inequity and maintaining the offer to other parts of the population.

5. Implications for IJB

5.1 Equalities, Fairer Scotland and Health Inequality

There are no direct implications arising from the recommendations of this report.

5.2 Financial

There are no financial implications arising from this report.

5.3 Workforce

There are no direct workforce implications arising from the recommendations of this report.

5.4 Legal

There are no direct legal implications arising from the recommendations of this report.

5.5 Unpaid Carers

There are no direct implications relating to unpaid carers arising from the recommendations of this report.

5.6 Information Governance



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There are no direct information governance implication arising from the recommendations of this report.

5.7 Environmental Impacts

There are no direct environmental implications arising from the recommendations of this report.

5.8 Sustainability

There are no direct sustainability implications arising from the recommendations of this report.

5.9 Other

There are no other direct implications arising from the recommendations of this report.



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6. Management of Risk

6.1. Identified risks(s)

The risks for the delivery of the vaccination programme within Grampian are captured in the NHS Grampian datix system and reviewed regularly. Oversight and escalation of the risks is via the agreed governance for the programme. This is via the Vaccination Clinical and Care Governance group and Grampian Vaccination Programme Board.

We will continue to monitor progress towards mitigating the areas of risk closely.

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

This report links to Strategic Risk 5

Cause: Performance standards/ outcomes are set by national and regulatory bodies and those locally determined performance standards are set by the board itself.

Event: There is a risk that the IJB, and the services that it directs and has operational oversight of, fails to meet the national, regulatory and local standards.

Consequences: This may result in harm or risk of harm to people. This report gives the IJB assurance on the areas where we are performing well and highlights areas where performance could be improved allowing remedial activity to be directed where required.