REPORT TO: Health and Wellbeing Board

DATE: 24th March 2021

REPORTING OFFICER: Director of Public Health & Chief Commissioner

Halton CCG

PORTFOLIO: Public Health

SUBJECT: Covid-19 vaccination programme

WARD(S) Borough-wide

1.0 PURPOSE OF THE REPORT

1.1 The report presents an update on the progress of the local Covid-19 vaccination programme for the Borough

2.0 **RECOMMENDATION: That**

- 1. The Health and Wellbeing Board note the content report; and
- 2. The positive rapid escalation of plans and system wide response is recognised and praised.

3.0 SUPPORTING INFORMATION

3.1 What Vaccines are available?

There are currently 2 vaccines that have been approved by the UKs MHRA (Medicines and Health Care products Regulatory Agency) and currently available. Pfizer- BioNTech vaccine and AstraZeneca (Oxford) vaccine. Both have been approved as effective and safe and supply is available and being rolled out across the UK. These vaccines differ slightly in their production and make up and so delivery systems are slightly different for these vaccines. If you are offered a vaccine, you will not be given a choice, unless you have a medical reason why one vaccine may be unsuitable.

A 3rd Vaccine, Moderna, has been approved by the MHRA but supplies are not yet available in the UK but are anticipated within the next few months.

3.2 How is the vaccine rolled out?

The vaccine roll out is being coordinated nationally with a number of sites identified and becoming live in a series of waves. Initially some NHS Vaccine hubs were identified to serve as vaccine centers and facilitate local coordination and vaccine storage. This enables a series of Primary Care delivered sites to come on stream in a series of waves over December and Early January, with Widnes and Runcorn sites being designated to Waves 1 and 2.

Additional capacity was included as a number of Mass Vaccination Sites across the Country, with the nearest current mass vaccination sites to Halton being the Totally Wicked Stadium in St Helens and the Etihad Stadium in Manchester.

A series of pharmacies are also identified to deliver the vaccine to the eligible populations. New or different approaches to delivery may be developed over time as vaccine availability and supply increases.

The vaccine is provided by an national Enhanced agreement which provides the template for the mechanism for delivery, support and remuneration for vaccine delivery to primary care and relevant sites, including the rules by which the sites can operate under.

Delivery Model

1) There are four main vaccine delivery site models within the system for Halton:

Local Vaccination Sites:

- Two in Halton the Brindley Theatre in Runcorn and the DCBL Stadium in Widnes
- Hospital Hub at Warrington and Halton Teaching Hospitals NHS Foundation Trust & St Helens & Knowsley Trust
- Pharmacies:
 - Appleton Village Pharmacy in Widnes
- Mass Vaccination Site at The Totally Wicked Stadium (St Helens)
- 2) In addition, Bridgewater Community Healthcare NHS Foundation Trust and North West Boroughs Healthcare NHS Foundation Trust have been delivering vaccines to their own staff (and inpatients at North West Boroughs Healthcare NHS Foundation Trust).

To support system vaccine delivery across Halton a Steering Group meets twice a week, chaired by Leigh Thompson (COVID-19 Senior Responsible Officer for Halton and Warrington). The Steering Group includes representation from all key interested parties from across the system, including partners from the borough council, NHS providers, public health, commissioners and the volunatary sector.

3.3 Who can have the vaccine?

The UK JCVI (Joint Committee on Vaccination and Immunisation) has identified that the first priority for vaccination to prevent mortality from Covid-19 and to protect the health and social care staff and systems.¹

Current evidence strongly indicates that the single greatest risk for mortality from Covid-19 is increased age and the risk of death increases exponentially with age. The JCVI have predominantly recommended an age based approach to vaccination with the oldest age groups given the highest priority.

There is also strong evidence that those living in a care home for older adults are disproportionately affected, given the increased risk of outbreaks in closed settings. Adults and workers in such settings are amongst the highest priority to protect the most vulnerable and prevent severe illness and death.

Also a high priority are those people who are working at the front line of health and care are at greater personal risk when working in areas of high rates of Covid and at greater risk of transmitting the virus to vulnerable people. Health and care workers are also considered a top priority.

Based on all available evidence and considering the risks of specific population groups, the JCVI have identified a priority grouping for the roll out of vaccines. There can be no variation within these groups and the vaccine must only be made available to each group, in priority order when most individuals in the previous groups has been offered the vaccine.

The JCVI priority groups, as advised on 30th December 2020 are:

1	Residents in a care home for older adults and their carers
ı	Tresidents in a care nome for older addits and their carers
2	All those 80 years of age and over Frontline health and social care
	workers
3	All those 75 years of age and over
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4	All those 70 years of age and over Clinically extremely vulnerable
	individuals*
5	All those 65 years of age and over
6	All individuals aged 16 years** to 64 years with underlying health
	conditions which put them at higher risk of serious disease and
	mortality***
_	All the second s
7	All those 60 years of age and over
8	All those 55 years of age and over
	, ,
9	All those 50 years of age and over
*	Clinically extremely vulnerable individuals are described here. This
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 $^{^1\} https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-30-december-2020$

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	advice on vaccination does not include all pregnant women or
	those under the age of 16 years (see above)
**	The Pfizer-BioNTech vaccine is authorised in those aged 16 years
	and over. The AstraZeneca vaccine is only authorised for use in
	those aged 18 years of age and over
***	This also includes those who are in receipt of a carer's allowance,
	or those who are the main carer of an elderly or disabled person
	whose welfare may be at risk if the carer falls ill

The JCVI have recently announced that there will be a phase 2 of vaccine delivery which will ensure that all adults aged 18 and over have received at least a first dose of vaccine by the end of July 2021:

10	All those 40-49 years of age
11	All those 30 to 39 years of age
12	All those 18-29 years of age

There has been a very recent announcement that the Enhanced Services for the delivery of the vaccination in primary care will be extended as an opt out system. Discussions are currently under way as to the continuation of delivery approaches for Halton.

3.4 <u>Vaccine uptake</u>

Response to the vaccination has been phenomenal with exceptionally high uptake in all current cohorts.

All Cohorts 1-4 were required to be completed by 15th February 2021. Locally we ensured a 100% offer of vaccination with an uptake of over 80% at that point.

Other cohorts have since been added to the current vaccination list in a phased approach and delivery of vaccines continues at a great rate. The uptake amongst these cohorts is constantly developing and the presentation will provide the most recent update of data as it stands, including updates on the current issues and achievements to date.

4.0 **POLICY IMPLICATIONS**

4.1 The vaccination programme is a national requirement and a key element of the fight against Covid-19.

5.0 OTHER/FINANCIAL IMPLICATIONS

5.1 There will be financial implications in the implementation though much is

remunerated through national mechanisms.

6.0 IMPLICATIONS FOR THE COUNCIL'S PRIORITIES

6.1 Children & Young People in Halton

Reducing the risk of transmission of Covid-19 to protect the most vulnerable children.

Children under 16 are not licenced to receive the vaccine except under exceptions clinical circumstances

6.2 Employment, Learning & Skills in Halton

Maximising uptake to provide better outcomes for at risk individuals and ensure a faster return to normal conditions and reduce disruption to daily life.

6.3 **A Healthy Halton**

Maximising uptake to provide better outcomes for at risk individuals and ensure a faster return to normal conditions and reduce disruption to daily life.

6.4 A Safer Halton

Keeping Halton's population safe from all threats is a key consideration and more important currently with the added difficulties posed by the pandemic.

6.5 Halton's Urban Renewal

Maximise opportunities for Halton's regeneration and development approaches by maximising the return to normal.

7.0 **RISK ANALYSIS**

7.1 Failing to adequately implement the vaccination programme and protect our community puts the population at significant risk of outbreaks and increased incidence of a serious, preventable infection, increasing mortality and morbidity and adding to the significant burden on health and social care services as well significant detriment to the local economy and local communities

8.0 **EQUALITY AND DIVERSITY ISSUES**

8.1 The strategy is developed in line with all equality and diversity issues within Halton.

9.0 LIST OF BACKGROUND PAPERS UNDER SECTION 100D OF THE LOCAL GOVERNMENT ACT 1972

None within the meaning of the Act.