

# 12-15 COVID-19 Vaccination Programme System Plan January – 31st March 2022

Draft 0.4 25/01/22

## Purpose, Aims & Objectives

The **purpose** of this document is to bring together all the aspects of the vaccination programme for 12 to 15 year olds (extended to 16 and 17 year olds in the case of those needing extra support to access vaccinations) into one plan. This programme includes the delivery of in-school vaccination being led by the Local Care Organisation (LCO), complemented by the out-of-school vaccination approach currently being coordinated by the Vaccination Programme PMO, and underpinned by a Health equity approach.

The **aim** of the vaccination programme for 12-15 year olds is to increase vaccine uptake (both doses and booster) amongst this cohort, ensuring health equity is a key driver behind where vaccination resources are deployed. The impact of achieving higher vaccine uptake amongst this cohort should be a reduction in covid-related disruptions to children's education, and a reduction in transmission rates in the community.

### **Specific objectives**

- To raise Manchester's vaccination position within English Local Authorities (currently 138/148)
- To close the vaccination coverage gap between ethnic groups with the highest /lowest coverage and within the LSOAs which are the most/least deprived in the city.
- Comprehensive vaccine offer delivered across all schools and non-mainstream schools/settings by 31<sup>st</sup> March 2022
- Develop learning and understanding of how to best increase vaccination coverage for this cohort within Manchester's most deprived populations.

## Scope

The **scope** of vaccine roll out the Covid 12-15 Vaccine Task Group needs to monitor and assure was agreed on 14/01/21, as follows:

### Children/Young People:

- 1<sup>st</sup> dose 12-15
- 2<sup>nd</sup> dose 12-15
- Booster 12 – 15 vulnerable
- Booster 16-17 if pupils in sixth form
- New children into the country.

### Schools - all schools in Manchester & Trafford including:

- State
- Independent
- Faith
- Special
- Pupil Referral Unit
- Home schooled children.

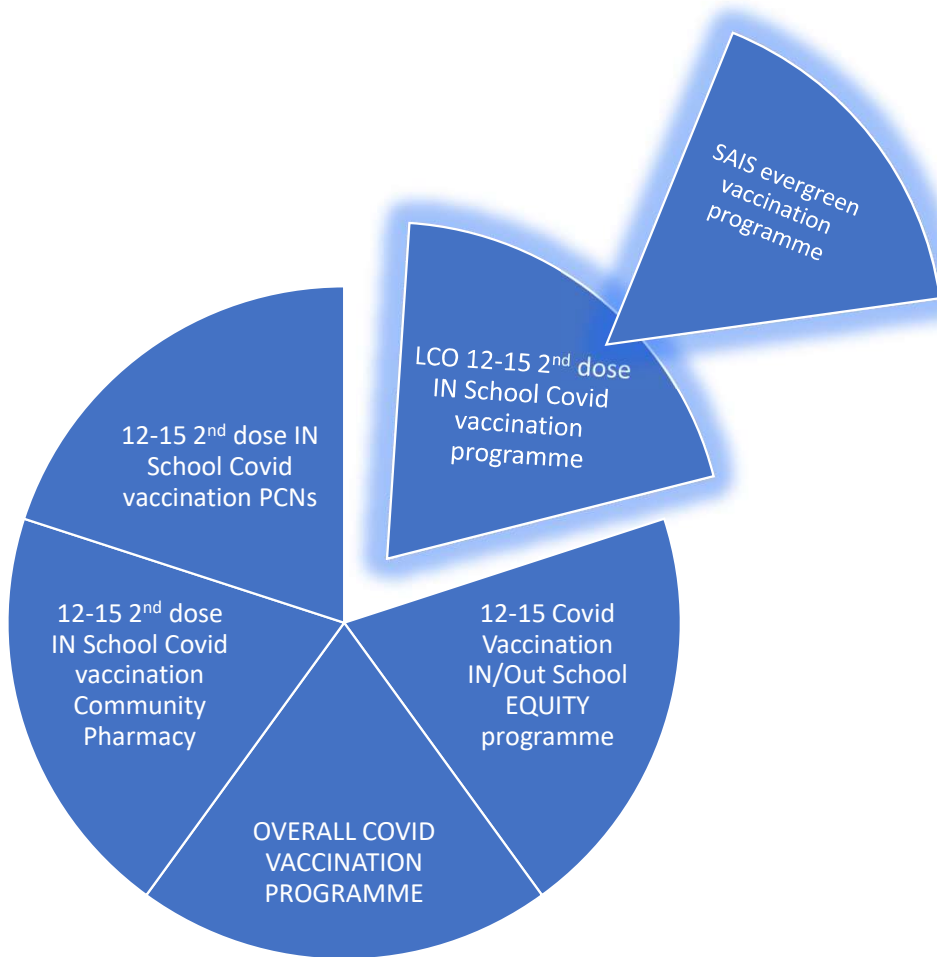


## The In School Offer – LCO Led January – 31st March 2022

## In School Offer – MLCO Led - BACKGROUND

- From September to December 2021 MFT/LCO School Aged Immunisation Services (SAIS) delivered an offer of first COVID-19 Vaccination to every school across Manchester.
- On 13<sup>th</sup> December NHS England and NHS Improvement (NHSE/I) released outline guidance on the next steps for the deployment of second phase COVID-19 vaccination for children and young people aged 12 to 15 following completion of Phase One. The second phase will run until the end of the Spring term, 31 March 2022. 'Termed the Spring Offer'.

### In School Offer – CONTEXT



The SAIS 12-15-year-old second phase COVID-19 Vaccination Programme is only one element of multiple programmes running in parallel both in and out of school Jan- March (list not exhaustive):\*

- Overall COVID-19 Vaccination Programme including first dose, adult Equity, adult boosters. 12-15 PCN /LVS & 12-15 Mass Vacc site offers.
- 12-15 second dose, In School community pharmacy offer
- 12-15 second dose In School PCN offer
- 12-15 COVID-19 Vaccination In and Out of school EQUITY programme.

(End Feb+):

- SAIS Core (evergreen) programme

*\*Subject to workforce and estates availability*

## In School Offer – CONSIDERATIONS & INTERDEPENDENCIES

- Additional Equity and Inclusion work supported by LCO neighbourhood teams but led by Partners will include:
  - ✓ Identification of schools with less engagement or low vaccine uptake.
  - ✓ Plan of engagement and additional work with schools / communities.
  - ✓ This will run in parallel with SAIS second dose.
- Partner Provider
  - Agreement to deliver sub-contract as per MFT governance.
  - Model of delivery and Standard Operating Procedure (SOP) adherence.
  - Progress monitoring and addressing operational issues.
- Key Considerations with multiple parallel initiatives.
  - Communication of asks prior to agreement.
  - Confirmation of capacity to support.
  - Timely 360 communication of changes across several initiatives.
  - Capacity to deliver parallel initiatives.

- LCO (internal)
- MFT
- Schools Headteachers Governors
- GM H&SCP
- MHCC
- MCC
- GMP
- Community Pharmacy
- Engaged and non-participatory PCNs





## The Out of School Offer – Vaccination Programme PMO Led January – 31st March 2022

## Out of School Offer – Vaccination PMO Led

The JCVI stated that from the 23<sup>rd</sup> August 2021 children and young people over 12 yrs with specific underlying health conditions that put them at risk of serious Covid-19, should be offered the Covid Vaccination. Following this advice, PCNs were able to opt in to provide over 12yrs vaccinations, and then were required to go through an assurance process led by the to approve the LVS for this cohort. In Manchester all LVS with the exception of Newton Heath (which is approved for 16+) now offer vaccinations for 12yrs+.

The out of school offer for 12yrs+ CYP can be accessed through the NBS which will enable them to book an appointment at the mass vaccination site, community pharmacies, and LVS in Manchester, pharmacies across Manchester a covid vaccination sites through the NBS

The key focus of the PMO moving forward is to ensure

- the communication of the out of school offer is clear for parents and for the priority school compliments the in - school offer
- LVS make appointment available via NBS for 12yrs+ and ensure that walk-ins are available for 12yrs+
- the peripatetic offer can support a whole family vaccination approach, particularly linked into the priority schools.
- appropriate invites are sent to the 'at risk' 12+ through the GP systems.
- that partners can take a targeted approach for particular cohorts within 12-17s e.g. children with LD, a LTCs enables to improve vaccine rates. This workstream will be linked to the 12-17s equity plan.

## Out of School Offer – Vaccination PMO Led

The key next steps for the out offer are:

- Co-ordinate to deliver a mobile/outreach vaccination offer January to March, in partnership with PCN Local Vaccination Sites, working with, colleges and 6<sup>th</sup> forms, drawing on previous experience.
- To work with the INT leads and neighbourhoods to develop a whole family offer using the peripatetic service, and deliver a series of community popups, and be able to vaccinate from the 12yrs (to be confirmed by GM). This will compliment the in-school offer and also the wider engagement that is taking place in neighbourhoods with low take up.
- Confirm appropriate arrangements for 12-17s in PCNS which have not opted to vaccinate this cohort, and ensure that these are communicated to the eligible 12-17s so that an appointment can be secured (via Gateway, LVS, NBS or attend a walk in)
- Widely communicate the vaccine offer available across the city for the 12-17s to compliment the in-school offer.
- To work engage with schools and facilitate primary care professionals e.g. GPs to go into schools to talk to children and young people about covid and the vaccine.
- Agree the targeted cohorts to increase vaccination rates in the 'at risk' 12-17yrs.
- General engagement including:

Work with the Parent Carer Forum to understanding what information parents may want for the more complex children - this will be picked up with in the action plan for special schools.

Focus session with parents to understand the reasons why uptake is low amongst this group cohort

Development of Pod Casts for CYP

# Health Equity Summary Plan

## Children & Young People's Vaccination 12-17

## Purpose, Aims and Objectives

The **purpose** of this summary plan is to address health equity challenges arising from low vaccination coverage within Children and Young People's vaccination, particularly in response to data and intelligence on coverage for the 12-15 population. The proposal focuses initially on 'in school' settings. It will develop to include the wraparound support which can be provided from out of school vaccination settings.

The **aim** is to define the system priorities and rationale for enhanced delivery of the 1<sup>st</sup> and 2<sup>nd</sup> dose COVID19 vaccination for 12-17's, in order to ensure that health equity and increased vaccination coverage is the foundation of the approach in Manchester.

The **objective** is to provide an agreed framework for delivery planning in order to ensure system-wide co-ordination and action of additional activity to drive up coverage at a school and wider neighbourhood level

**Timescale**- the in school offer is to be made to all schools by half term, to be delivered by 31<sup>st</sup> March 2022. Out of school vaccination clinics are regularly available throughout the city via National Booking Service.

## Vaccination Coverage 12-15's – Summary Data & Intelligence

- Vaccination data for children & young people registered with a Manchester GP showed that **33%** of 12-15 year olds had received a first dose vaccination (at 9/1/22). The Greater Manchester average is **43.4%**
- Vaccination coverage in the **most deprived 10%** of LSOA areas is **25.5%** compared with **68.8 %** in the **least deprived 10%** of areas within the city.
- Nationally Manchester is ranked **138<sup>th</sup> out of 148 boroughs** for 12-15 vaccination, just above Liverpool, Knowsley, Nottingham and several London boroughs (at 21/12/21)
- There are **seven wards** in the city where less than a quarter of the registered population aged 12-15 years have received a one or two doses of the vaccine. These are Ardwick (24.7%), Ancoats & Beswick (24.4%), Cheetham (23.0%), Harpurhey (23.0%), Miles Platting & Newton Heath (22.4%), Moss Side (22.4%) and Hulme (18.0%).
- In absolute terms, the wards that contain the largest number of children needing to be vaccinated are **Cheetham, Harpurhey and Moss Side**.

## Vaccination Coverage 12-15's – Summary Data & Intelligence

- The **lowest coverage by ethnic group** from ward-based data is those describing their ethnicity as Arab (9.1%) followed by Black Caribbean (9.6%), mixed White & Black Caribbean children (17.1%) and children from an 'Other Black' background (18.1%). Coverage rates in the 12-15 year old age group are highest in children from a South Asian group (39.6%) and the White population (37.5%).
- However, there are **variations within particular ethnic groups**. For example, vaccination uptake in 12-15 year olds is over 50% in Indian (53.5%) and Bangladeshi (51.9%) children, but only 38% in Pakistani children and 32.8% in children from an 'Other Asian' background.
- The coverage data for adult vaccination within wards and neighbourhoods and particular ethnic groups mirrors low 12-15 coverage and reflects the need for a **whole family/community approach**. Although there are concentrations of ethnic groups in certain areas of the city, for example, Pakistani families in Cheetham and Ardwick, and Black African/Black Caribbean families in Moss Side & Hulme and Ancoats/Clayton/Bradford and Harpurhey, this is not always the case. We will need an approach to reach these groups which is not entirely place-based, for example, by connecting to places of worship, culture, particular retail/high streets, outside the areas of residence.

## Recommendation for Priority Mainstream Schools

### **Action: Develop a bespoke plan for each mainstream priority school working back from the scheduled visit date**

This work will need to move at pace to meet the timeframe over the next few weeks. It should include an identified lead working with relevant engagement, SAIS and Education named partners. The component parts should include

- A bespoke written plan for each school, with an identified lead co-ordinator
- Active engagement and partnership with the Head/Principal to guide the approach
- Targeted engagement and communication support within the school and wider community including culturally competent approaches to support consent and vaccine confidence. This will ideally be done with someone who already has a good relationship with the school.
- Determination of any service offer needed in addition to the first in-school visit – eg. concurrent mobile/outreach offer for parents/families (whole family approach), link up with LVS offer, further access/taxi offers, a further in school visit
- Capture of learning from delivery in each school to inform future development



- It is likely that some but not all 12-17 year olds in special schools are in the JCVI 12-15 or 16+ 'at risk' cohorts and therefore will have been called forward for vaccination at PCN Local Vaccination Sites. As the intake will be from across the city (and wider) it is not possible to overlay ward/neighbourhood coverage data to get a clear understanding of the likely picture in these settings.
- We can only therefore indicate that the coverage rates appear low based on the consent and immunisation data from the In School Offer but this need to be treated with extreme caution, and for some non-mainstream settings we have no data.
- For Children & Young People in Hospital Schools settings the offer was made to through invitations to attend the North Manchester and Oxford Road half term clinics. These clinics were well attended overall however it is not possible to obtain data to assess effectiveness of coverage for those within the hospital school system. The Head of Hospital schools has indicated that further bespoke work may be needed.
- For children in home-schooled environments including vulnerable children offer was made to through invitations to attend the North Manchester and Oxford Road half term clinics.
- **In order to establish a more accurate position specific insight is needed from each setting. This should be a priority given the vulnerability of the young people concerned and the additional challenges there may be in delivering vaccination to this group.**

## Recommendation for Special Schools/Non-Mainstream Settings

**Recommended Action:** Further investigation into vaccination coverage and the needs of children and young people on an individual school basis.

The proposed March visit date allows time to scope this work further, which will include

- Rapid engagement with the Heads Group of Special Schools with the support of MCC Education to understand the position and to assess how to establish vaccination coverage of first and subsequent doses
- Identify additional needs/ requirements at special schools /PRU including vaccination venues of choice (in/out of school) and other support and access needs (e.g. consent processes, individual plans and utilisation of calm clinics where appropriate.
- A **sub-group working on special schools/non-mainstream settings** likely to be needed
- Develop bespoke plans for each school as required

The ward-based data for 12-15's is reflected in our lowest coverage electoral wards for the **16-17 year old** population based on patient level data, which are Moss Side (29.6%), Hulme (27%), Ancoats & Beswick (34%), Miles Platting & Newton Heath (34.1%), Ardwick (34.8%), Harpurhey (35.6%), and Cheetham (35.7%).

All 16-17 year olds are now eligible to receive a booster dose three months following their second dose.

Young people may access a school or college offer in any part of the city. An evergreen offer is available at all out of school vaccination sites across the city, and targeted mobile/outreach clinics were delivered to support first doses of vaccination in those settings, with mixed uptake.

### Recommended Action

- The Vaccination Programme Management Office will co-ordinate a to deliver a mobile/outreach vaccination offer January to March, in partnership with PCN Local Vaccination Sites, working with colleges and 6<sup>th</sup> forms, drawing on previous experience.
- 16-17 year olds in Special School settings should be picked up through the in-school delivery offer

### Proposals Agreed at 12-15 Covid Vaccination

- Clear plan to be established for each priority school with identified single point of contact who will develop and report on plan.
- Coordination of the supplemental use of a pop up to enhance school offer where required, working with Vaccination PMO, to capture families (parents/carers) who may also come forward for a vaccination.
- Specific sub-group to work on Special Schools/Non-mainstream settings
- Commitment of Comms and Engagement to develop strategy and materials to support individual plans
- Engagement with Intrahealth to ensure open and two way communication to avoid clashing of programme timetables
- Operational plan and schedules affecting relevant schools to be regularly shared by MLCO
- Governance - regular update report to be co-ordinated via the 12-17 Leadership Team/PMO and presented at Task Group