Covid 19 and Vaccination Programme Update

Manchester Health Scrutiny Committee, 25th May, 2022

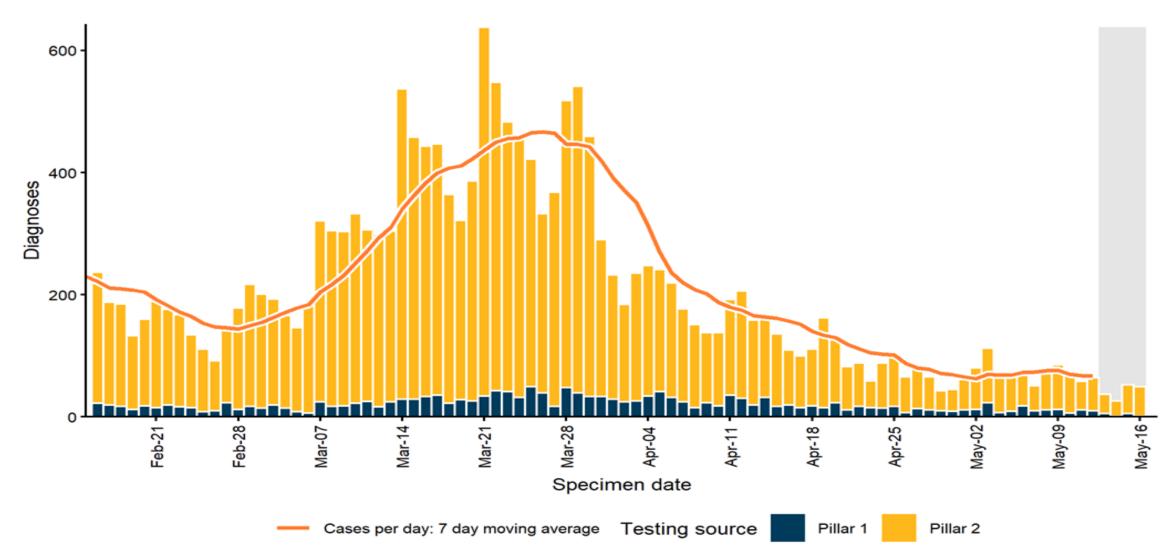
This slide set is in three parts:

Part 1. Covid data update (slide 2-4)

Part 2. Manchester Health Protection System -Living Safely and Fairly with Covid (slides 5-15)

Part3. Covid Vaccination Programme update including the plans for 2022/23 (slides 16-34)

Figure 1. Epidemic curve of confirmed COVID-19 cases in Manchester from February 15, 2022 to May 16 2022. **ONS Infection survey North West (week of 11th May) shows a reduction down to a prevalence of 2.05% or 1 in 50 people.**



Summary of number of deaths and excess deaths (all causes) by place of death: Deaths registered in 2020, 2021 and 2022 combined

Place of death	Total registered deaths	Total expected deaths	involving	No. of excess deaths	Excess deaths ratio	% Deaths involving COVID
Hospital	4,141	3,814	1,061	327	1.08	25.6%
Care Homes	1,182	1,037	143	145	1.14	12.1%
Elsewhere	2,990	2,313	110	678	1.29	3.7%
Total	8,313	7,164	1,314	1,149	1.16	15.8%

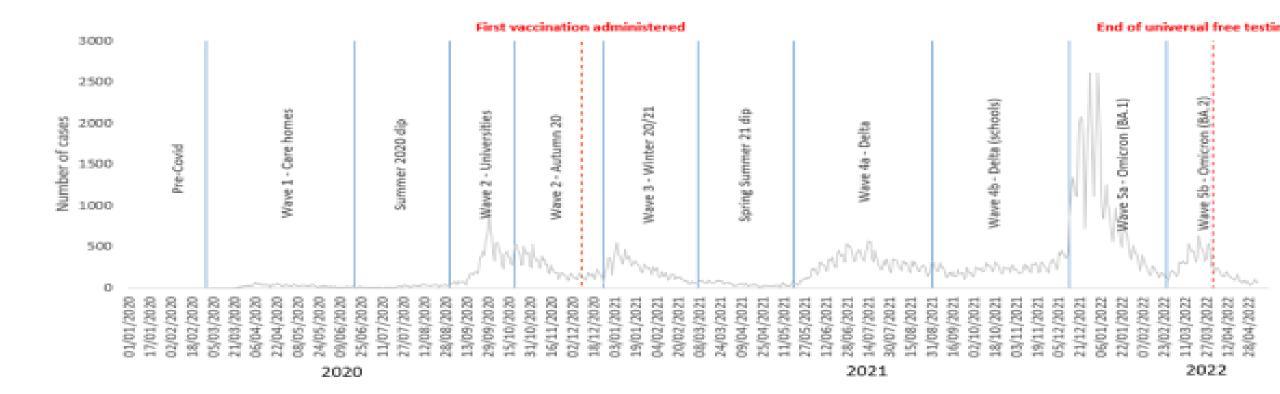
Notes:

- Figures for 2020 cover the period from Week 12 (week ending 20 March 2020) onwards to exclude deaths in the pre-pandemic period
- 2. Figures for 2022 cover the period up to Week 13 (week ending 1 April 2022)

Source: Office for National Statistics (ONS) weekly provisional figures on deaths occurring and registered in England and Wales by Local Authority

Waves of the Coronavirus (COVID-19) Pandemic in Manchester

The various waves of cases in Manchester can be labelled and given approximate timeframes to help understand differences in the spread of the virus



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Manchester Health Protection System

Using learning from our pandemic response to deliver a fit for purpose local health protection system for Manchester

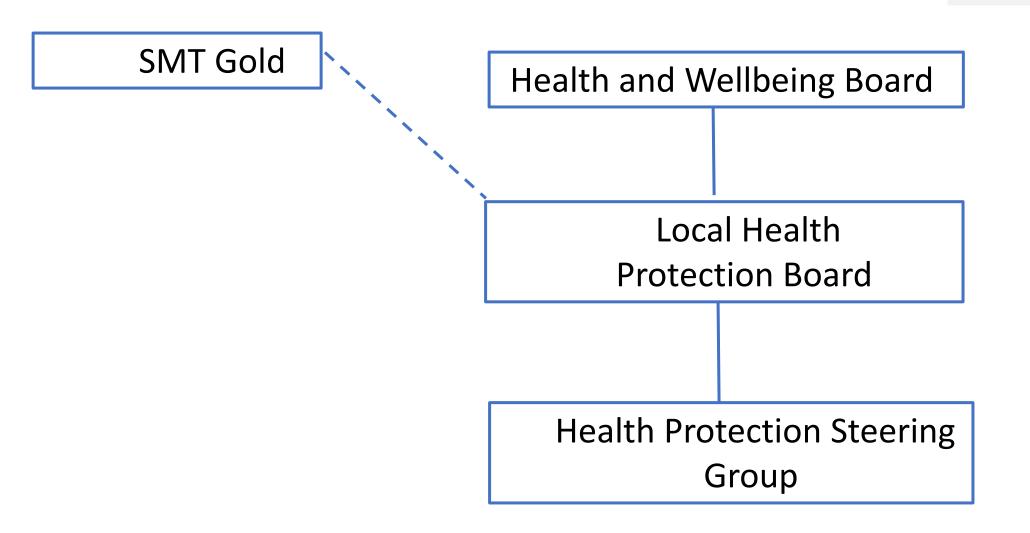
Health Scrutiny Meeting 25th May 2022 Manchester as part of a wider health protection system

Integrated Care System (ICS)

UK Health Security Agency (UKHSA)



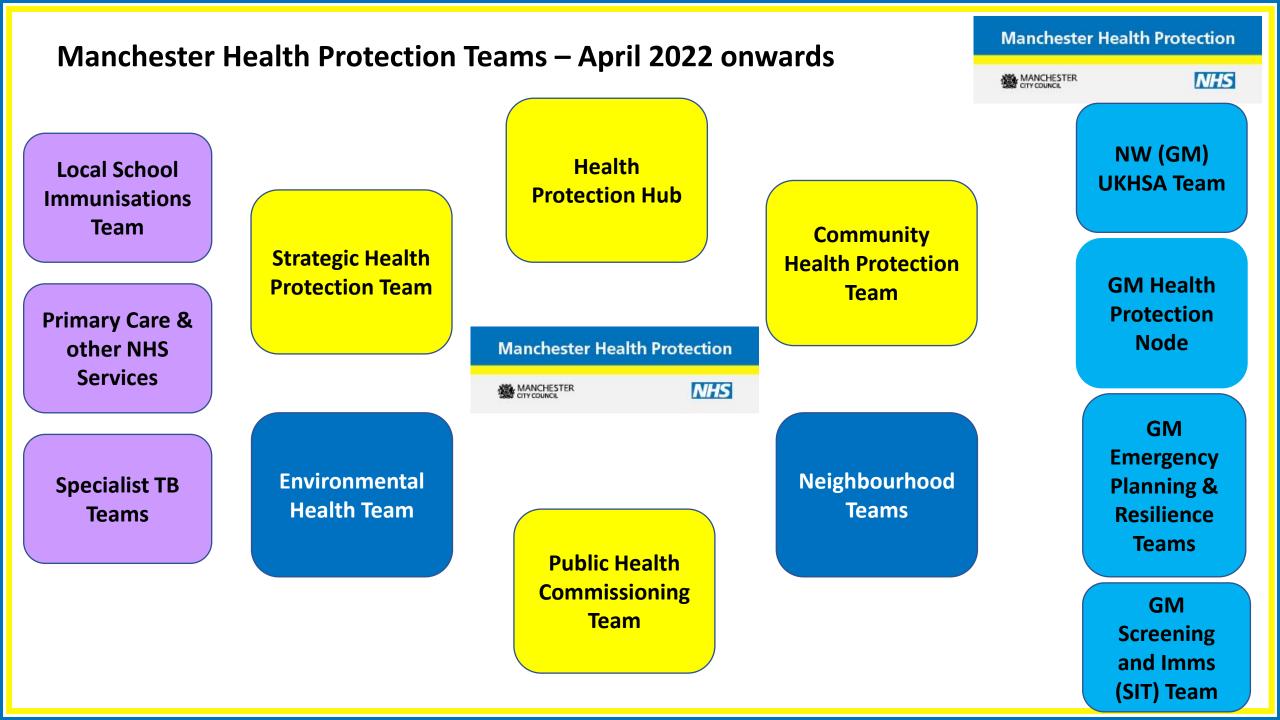
Local Governance Emerging Arrangements – April 2022 onwards

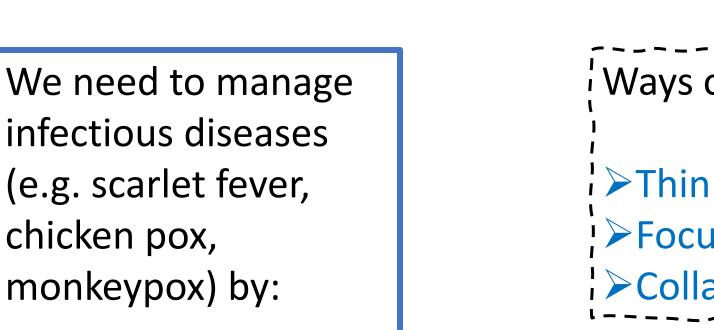


Manchester Health Protection

NHS

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- Preventing
- Detecting
- Controlling
- Responding
- Preparing





NHS

¹ Ways of working:

Frink Family approach Focus on health equityCollaboration

Where we need to focus our efforts (1)

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- The COVID-19 pandemic has demonstrated the value of looking at infectious disease data at a whole population level as well as for high-risk individuals, settings and locations. This has raised expectations among partners of the way data can be presented and investigated to inform the way our health protection work is planned and delivered in a more focused and targeted way.
- Going forward, we will have a continued focus on the routine monitoring and reporting of patterns and trends in infectious diseases in different:
 - **Geographical areas** e.g. wards, neighbourhoods etc.
 - Sexes and age groups
 - Ethnic groups
 - Other communities experiencing inequalities e.g. disabled people, migrant communities
 - Household types e.g. Mosaic Groups
 - Areas containing concentrations of higher risk **housing and occupations** as identified by 2021 Census and local administrative datasets
- Triangulation of different types of data and insight will provide a more rounded picture of an issue and will allow us to consider 'soft intelligence' alongside 'hard data'.

Where we need to focus our efforts (2)

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Focus on:

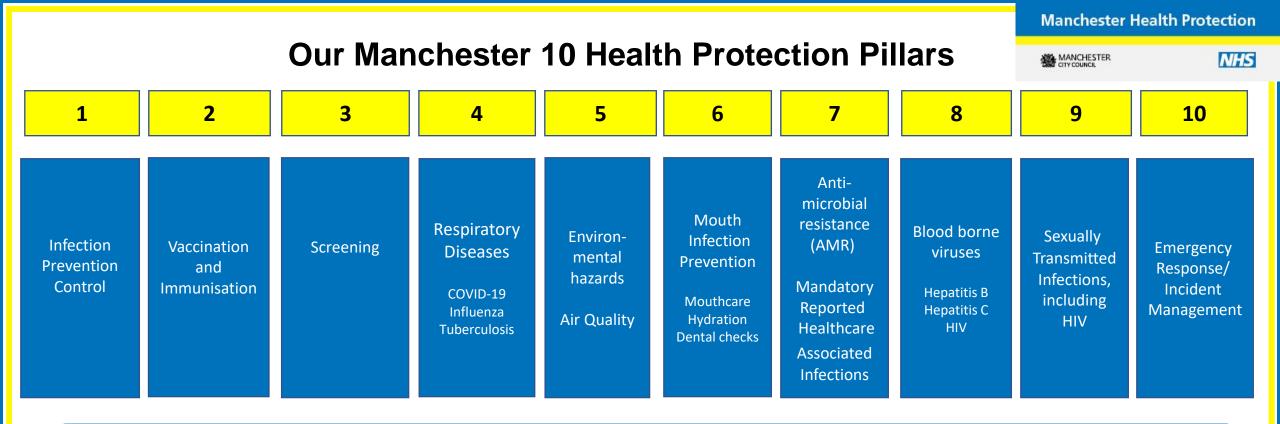
- High risk, clinically vulnerable, underserved people
- High risk settings and locations

Manchester has a high number and range of complex and high risk settings. These are settings where:

- individuals may be more vulnerable to infectious diseases
- where infectious diseases are more likely to spread
- where outbreaks may be harder to control.

Complex and High Risk Settings in Manchester include:

- Adult's care homes
- Supported living accommodation
- Homeless hostels
- Asylum seeker provision
- Prison
- Manchester Airport
- Sex on premise settings
- Hospice
- Universities Halls of Residences/large shared private accommodation
- Children's care homes and residential settings
- Boarding schools
- Special Educational Needs schools
- Day centres
- Large businesses, warehouses



Tackling Inequalities Improving health equity

Surveillance – Work underpinned by the best available evidence, data and intelligence

Work supported by communications and engagement work

Health Protection standards delivered within commissioned services

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Examples Pillar 1 – Infection Prevention Control

General work:

- Proactive relationships need to be in place with all high risk settings and key stakeholders
- Regular visits to high risk settings
- •Clear system in place to identify which settings need additional support

Prevention work with education settings:

- •E-BUG training
- •Hand hygiene work
- •Annual Infection Prevention Control Training Session
- •Infection Prevention Control (IPC) champions identified in each setting
- •Link Infection Prevention Control work with the Healthy Schools Award
- •Align work with other existing schemes

Examples Pillar 2: Vaccination & Immunisation

Priorities for 2022/3:

- Development of a 0-5 Childhood Immunisations Project to address decline in coverage and reduce inequality
- Spring/Summer Covid-19 Vaccination Delivery Evergreen & mobile health equity offer (*)
- Winter planning for Covid-19 and Annual Influenza, Shingles & Pneumoccocal vaccination delivery
- Development of a resilient vaccination outbreak response system
- Oversight and shaping of GM Maternity Vaccination pilot
- Develop the data and intelligence systems to support informed approaches to childhood immunisation coverage, working with primary care, neighbourhood teams and local communities
- Develop further evaluation priorities with University of Manchester
 (*) Joint Committee on Vaccination and Immunisation recommended Autumn/Winter
 COVID booster on 19 May 2022





Examples Pillar 2 – Screening - links to pillar 7 TB

Tuberculosis

- TB screening with migrant health population
- Latent TB screening programme

General

• Screening and vaccinations for children newly arriving to Manchester

Manchester Spring Vaccination Plan March – September 2022



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Manchester Local
 Care Organisation



High Level Priorities March – September 2022



- Spring Booster delivery to eligible JCVI cohorts (from 21/3/22)
- First dose vaccination delivery to healthy 5-11's (from 4/4/22)
- Maintain comprehensive 'Evergreen' offer to anyone eligible for first, second and booster
- Continue pop-up/outreach offer to support vaccine equity informed by learning review from January – March delivery
- Contingency plan in place to provide surge capacity at 2 weeks' notice
- Maintain taxi offer, Gateway booking system & Covid-19 helpline support for vaccination

Information

- Citywide and local communications to support and promote vaccination offer
- Bespoke communications to support vaccine equity focus

Motivation

 Targeted engagement at neighbourhood, citywide and within community groups and inclusion health groups

Strategy

- Plan for autumn/winter vaccination 2022/3
- Development of a wider vaccination & immunisation strategy building on learning from the Covid-19 programme
- Work with GM on evolution of new delivery models (eg. Immunisation Hub Pilots)
- Further evaluation development with University of Manchester









Covid-19 Vaccination Delivery Model

A single system approach focused on 'place' and 'person'



Vaccination site map

COVID Vaccination Programme - Spring Booster Sites

This dashboard maps the Spring Booster vaccination sites. Hover over the sites in the list to view their location on the map.

tearsley Middleton Oldham	Hospita	4 MVC 12+	PCN 5+	16+ 12+	acy 18+
Prestwich	+		•	• ×	36
Fallsworth	Sits Type	Ages Vaccinating	; She		
To a Gallaword	Hospital	NUM	MFT Vaccination Hub		M13 9WL
	MVC:	12+	Etihad Vaccination Centre		M11 3DU
Ashton			Town Rates Hall fixed pop-up		M2 5DB
Mancester under-Lyne			Whith Centre		M8 ORY
X - Yor Holl			Plant HB Clinic	M9 8LX	
A ARCHER	-	5+	The Grange		M11 3TQ
- marine 1	PCN		Jain Centre		M12 40E
MARCHEN TTHE			The Vallance		M13 500
Sale Sale (not			Forum Vaccination	M22 6RX	
Stockport		15+	Newton Heath Health Centre		M40 2./F
			MMC College (Welffield Pharmacy)		STR BM
National Contractor Car	Ma	12+	Whaley Range 11-	M16 8GW	
	Hai		BAGULEY PHARM	M23 9PS	
	Pharmacy		RUSHOLME PHARMACY		M14 SLW
RUCCHAY WAN S		18+	COHENS CHEMIST	M20 455	
merre Poynton			St James & Emmanual Church (Didshury Pharmacy		M20 GTR
© 3622 Mapbes © OpenfilmeetMas			BEECH ROAD PHA	RMACY	M21 9EQ

- Clinics available 7 days a week, morning, afternoon, evening across the city to meet modelled demand
- Surge plan to enable all sites to scale up within 2 weeks to increase vaccination capacity if required
- Peripatetic outreach service will continue to run clinics to support vaccine equity throughout spring and summer

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Still awaiting operational times from Choriton, Harportey & Didabory CPs

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Spring 2022 Covid Booster Data and modelling

160,149	total patients are now eligible within JCVI Cohorts
133,476 (83.3%)	have received their first dose
127,536 (79.6%)	have received their second dose
98,874 (61.7%)	have received their third dose
1,382 (0.9%)	have received their fourth dose

JCVI Cohorts for Spring Booster

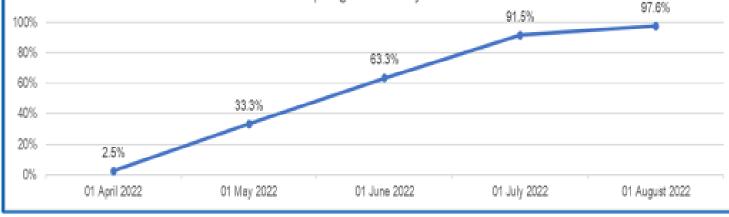
- People aged 75 & over (by 30/6/22)
- All residents of older adult care homes
- Eligible housebound individuals
- Immunosuppressed people aged 12 & over

Based on the total eligible population (c98,874), Manchester will need the capacity to deliver c.6,592 vaccines per week on average across the 15-week period assuming the highest case scenario of 100% uptake.

We can profile when this population will become eligible for the 2nd booster vaccine based on when 1st booster doses were delivered (assuming a gap of 180 days between the two booster doses as per current national guidance). As per the chart, there is a gradual increase of people being eligible from April to July with a drop off through to August.

In addition, the National Booking System and guidance now enables people to book for a vaccine 90 days after their 2nd Booster dose which we expect may contribute to an initial surge in demand.

Percentage of eligible patients who have received their dose dose that can receive their spring booster by month



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Spring Vaccination Programme

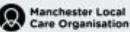
Performance Data and Information Update for Health Scrutiny May 2022



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1st/2nd dose & winter booster data as of 17th May 2022

20.5%

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10.7%

00.8%

09.25

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85.7% 103.5N

T.056

1.855

65.5%

1 12.4%

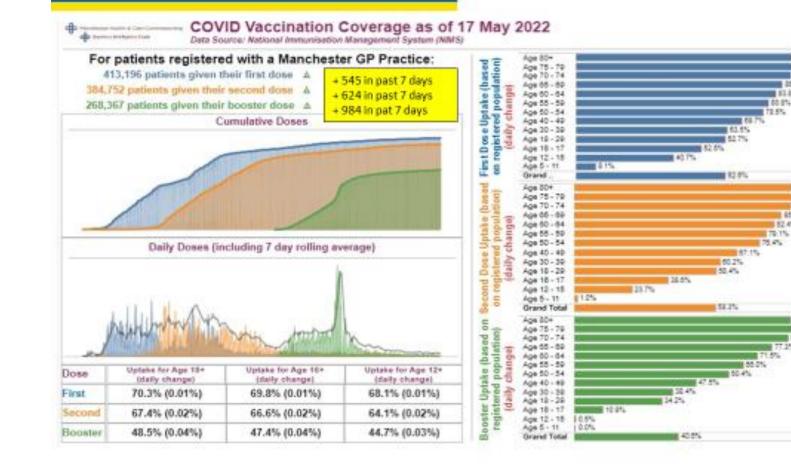
20.0%

18.63

10.01

1.5%

81.2%



Uptake across the system has plateaued over the past week. In total 2,153 vaccinations were delivered in the past 7 days. This consists of 545 (1st), 624 (2nd) and 984 (3rd/Winter boosters). The total vaccines delivered the in previous 7-day period was 2,327. however does not include this spring boosters (shown separately)

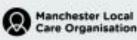
Manchester resident/registered patients are still coming forward for a range of doses with an Evergreen offer being maintained across the city

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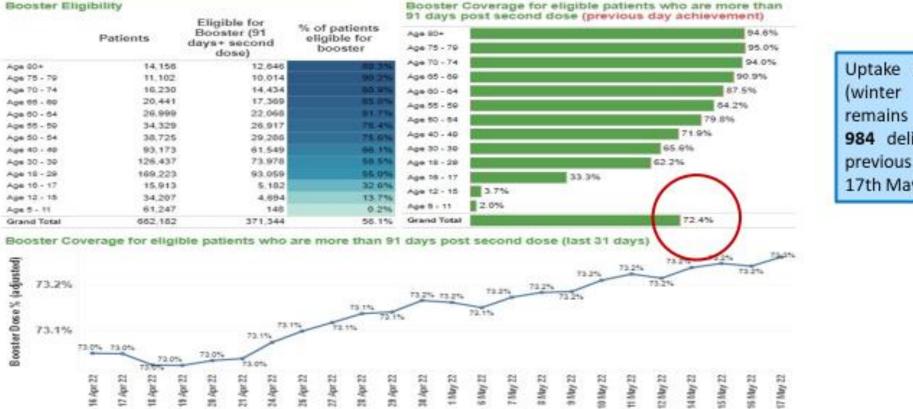


NHS Manchester University NHS Foundation Trust





Winter Booster coverage for eligible patients 17th May 2022



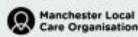
Uptake on 3rd dose (winter booster) remains steady with 984 delivered in the previous 7 days to 17th May.



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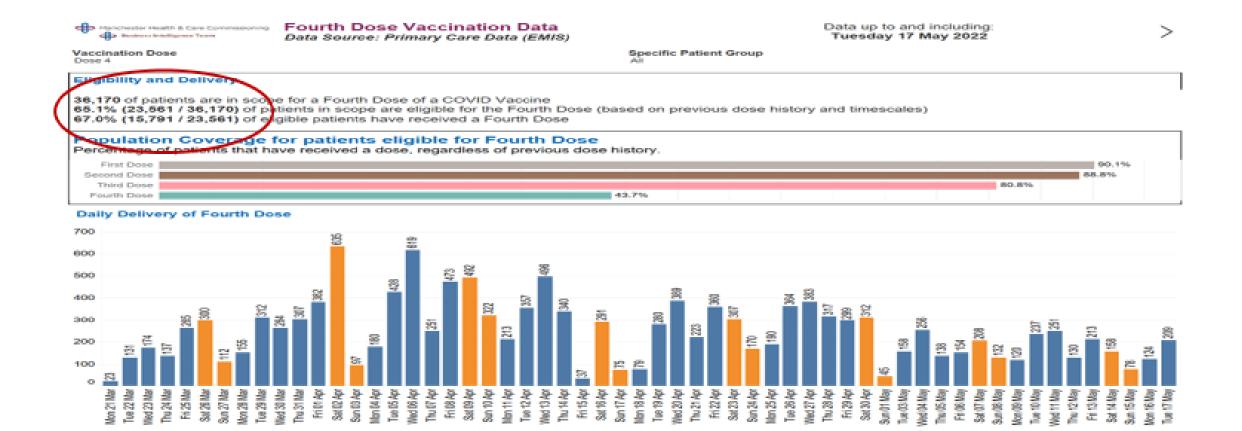








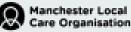
Spring Booster coverage as of 17th May 2022



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5–11-year-old 1st Dose uptake as of 17th May 2022

Patient Group Spin By Primary Care Network. Children (5 - 11) Eligible for 1% Eligible Eligible for % Eligible Ellipitole for 16 Eligible Eligible for 35 D1 of . Received. % D2 of Received. 76 D3 of Received 76 CH of Received. Q4 (Sm for Q4 from D2 (dwks for D2 from after D1) D1 Spitt D3 (91d for D3 from D11 100 Eligible. D4 Eligible. 101 Lighte Lighter. 0.0 after this. 100 after (22) 100 Antwick and Longsight 0.204 400 211 4.7% 28.076 0.0% 100 Setter Health MCR 2.068 104 0.0% 26 18.0% 10 Ø. 0.01 101 100 Cheelhars Hill and 6,495 456 46 10.11 0 - 65 Crumpsall 907 7.2% 0 City Centre and Ancosts 1,254 100 0. **Glayon**, Beswiek and 5,344 285 5.2% 44 15.41 12 22.7% 0 0.09 2 Operation Didsbury, Ghariton and 2,419 206 0.4% 222 11.27 15 46.9% 0 - 61 10 Burnage **.** 43% 42 8.97 10 **Conton and Levenshulme** 5,723 21.3% 10 10 Higher Blackley, Harputhey 8.400 238 4.4% 225 8.7% 0.0% 0 • 101 and Charlestown Hume and City Centre 1.470 37 2,8% 8.476 0.0% o. 2 - B1 100 æ., South Miles Plating, Newton Health 4,497 205 4,5% 22 10.01 0 4 and Moston æ., Northernien and Brooklands. 2,649 166 6.3% 87 22.2% 0 15. - Ö -8 (Why Thermal America) æ., 46 26.7% West Central Manchester 4,522 5210 12 0 0.01 Withington and Patiowleid 2,481 192 5.5% 118 10.01 31.0% 0 2 279 27 8.77 Weythernshapper 0,001 4.476 28.07 ÷Ö. **Orang Total** 22.444 3,684 6.2% 397 10.07 927 24.4% Ċ, 0.075 % O1 of Eligible 15 D2 of Eligible % 03 of Eligible 10 D4 of Eligible 6.2% 24,476 Lobert: 23.2% 0.8% 7 days ago. Change 0.4% 1.3%

Uptake remains low amongst the cohort at 6.2%. Though clinics get booked up when advertised in some parts of the city.

It's worth noting that Manchester has the 4th highest uptake in the cohort across GM.

Parents have a range of options to obtain vaccination

- NBS
- Accubook
- Walk in
- 911
- Gateway

All sites authorised for the delivery of this vaccination offer appointments via the above booking methods.

Families are bringing their CYP forward to pop ups for vaccination.



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Spring Booster – breakdown by ethnicity

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 Mentioner teater & Gen Generalisetrep Meteodontigene hans 	Fourth Dose Vaccination Data Data Source: Primary Care Data (EMIS)	Data up to an Tuesday 17	
Vaccination Dose Dose 4		Specific Patient Group	

Fourth Dose Uptake (based on eligibility) by Primary Care Network

Othnicity	Eligible for Dose	Received Dose	% Done of Digible		% Dose of Bligible (Change)		
English / Weish / Scotlish.	17,550	12,107			40.8%	2.7%	
Chinese	291	202			68.4%	5.2%	
Declined to provide	264	170			67.4%	2.9%	
triah:	1,114	754			67.4%	2.2%	
No record of ethnicity	1,407	997			68.8%	2.0%	
Indian	307	218		64	.2%	1.8%	
Any other White backgro	589	371		63.07	6	2.7%	
Any other Asian background	105	99		60.0%		4.2%	
Any other ethnic group	176	105		08.7%		2.8%	
White and Black Caribbe.		35		97.4%		0.0%	
Gypsy or Irish Traveller	T	4		67.1%			28.6%
White and Asiam	27	15		\$5.6%		3.7%	
Arab	27	15		55.6%		3.7%	
Any other Black / African / Caribbean background	53	27	50.9%			1.9%	
White and Black Athican	-41	20	48.8%			4.9%	
Any other Mixed / multipl	\$5	25	45.5%			1.8%	
Caribbean	435	194	43.6%			1.4%	
Pakistani	680	290	42.2%			2.8%	
African	297	110	37.0%			1.3%	
Dangladeshi	64	34	35.9%			1.2%	
Grand Tatal					67,0%	2.3%	

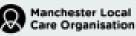
Work continues to improve uptake amongst population groups. Pop ups to target harder to reach communities are planned including

- Longsight Market
- Powerhouse
- Cheetham Hill Tesco



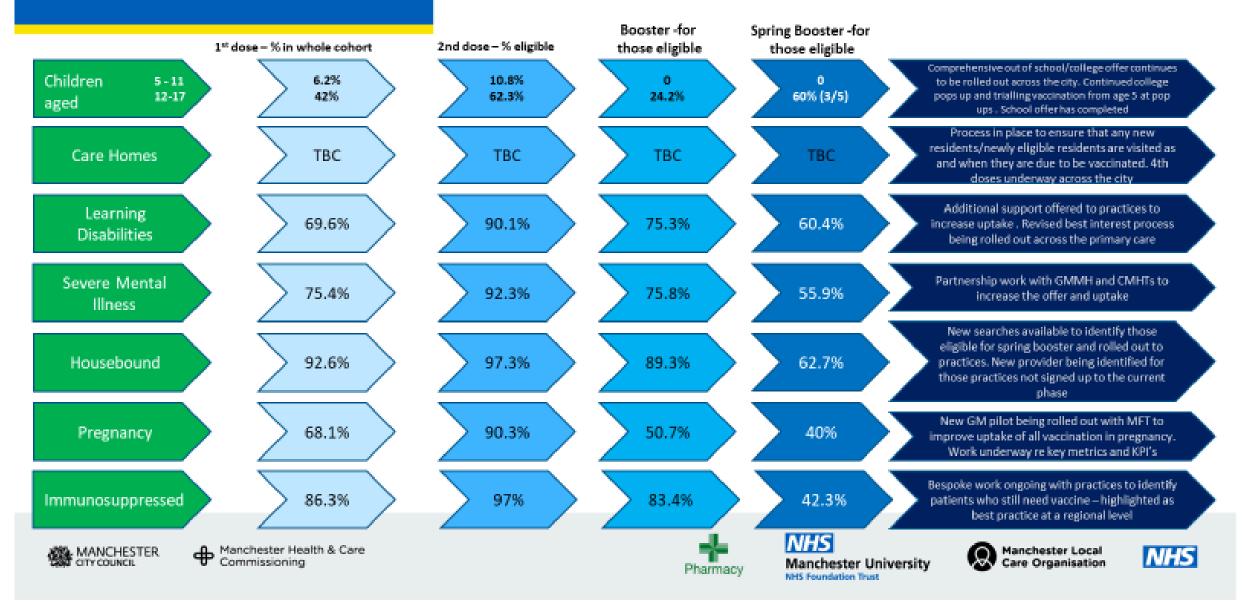








Coverage for key cohorts – as of 17.05.22



Spring Vaccination Programme Spotlight - Peripatetic Outreach Model Overview





As part of Manchester's ongoing support to the Covid-19 vaccination programme and to ensure we have a continued Evergreen offer to the City's residents through the coming months we will continue to provide a popup service in parallel to our vaccination sites from 1st April 2022 until 31st March 2023.

- Pop-Up's have always formed a part of the wider vaccination offer and in more recent times become a real focus. The Peripatetic model was set up in January 2022 and has been very successful in supporting the citywide offer via an equity focused approach, delivering 2,173 vaccinations in the 54 clinics so far.
- Working closely with Integrated Neighbourhood Teams, Health Development Co-ordinators and Primary Care Network teams to deliver targeted outreach focused on engaging with hard-to-reach populations.

There will be a requirement to support at least 2 pop up's a month for each PCN grouping.

- We will continue this work and it will remain data driven and focus on areas with low uptake, geographic gaps, review of cohorts, ethnicity, and respond to shifts in priority etc.
- There will continue to be an Ops Manager working with the PMO who will help co-ordinate this work.
- Access to vaccine at sites will be supported by a roving meds ops team member and the logistics will be worked out in the planning stages of each pop-up clinic.
- As previously stated, there is a process for identifying proposed outreach work and we will continue to work collaboratively with Ops Managers, HDC's, INT's etc.



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Spotlight: Peripatetic Team Outreach Clinics





Date	Venue	Vaccinations given	Date	Venue	Vaccinations given
19th January	Eden School, Cheetham Hill	6	15 th March	Connell college, Beswick,	30
21 [™] January	TESCO car park, Crumpsall,	43	16th March	Manchester University	15
27 th January	Abraham Moss School, Cheetham Hill	24	18 th March,	Didsbury Mosque	24
28 th January	Moss Side Powerhouse	24	19 th March,	Parts Wood Complex, Didsbury	60
29 th January	Pakistani Community Centre, Longsight	58	25 th March	Moss Side Powerhouse	48
4 [±] February	Moss Side Powerhouse,	96	1 ^{er} April	Moss Side Powerhouse	30
S* February	Pakistani Community Centre, Longsight	54	2 ^{rei} April	Manchester Settlement, Openshaw	60
8th February	Manchester Communications	36	7* April	The Fort Complex	24
10th February	Xaverian College, Rusholme	90	08 April	Crowne Plaza Hotel	60
11th February	Powerhouse, Moss Side	36	12 th April	UOM - Whitworth Hall	18
12th February	Pakistani Community Centre , Longsight	46	14 th April	Tesco Crumpsall	30
12th February	Manchester University	24	21# April	Tesco Crumpsall	30
14th February	Clayton Sure Start Centre	20	22 nd April	Loretto College	75
18th February	Powerhouse, Moss Side	36	23 rd April	Harporhey Market	48
19 th February	Pakistani Community Centre, Longsight	38	26 th April	Minehead Court, Didsbury	58
24th February	Manchester University	24	26 th April	Oasis Centre, Gorton	24
25th February	Powerhouse, Moss Side	36	28 th April	Tesco Crumpsall	28
26th February	Pakistani Community Centre , Longsight	38	28 th April	MMU - Business School	24
2nd March	Gorton Oasis Centre,	41	29 th April	Moss Side Powerhouse	30
3rd March	Gorton Dasis Centre	26	4 [±] May	Didsbury Grove Lane	22
3rd March	Manchester University	26	Sth May	Tesco Crumpsall	36
4th March	Loreto College	120	5 [±] May	Manchester University	36
4th March	Moss Side Powerhouse,	54	6° May	Moss Side Powerhouse	6
8th March	Xaverian College, Rusholme,	114	7 th May	Longsight Market	30
9th March	Welcome Centre, Cheetham Hill	3	12 th May	Tesco Crumpsall	21
10th March	Manchester University	12	14 th May	Longsight Market	42
11th March	Moss Side Powerhouse	60	19 th May	Tesco Burnage	24

- The top areas identified as requiring support based on uptake of 1st, 2nd and Booster using data taken from Tableau: Ardwick and Longsight, Hulme, Moss Side and Rusholme, Cheetham & Crumpsall.
- Pop ups in some areas were repeated Moss Side Powerhouse, Longsight Pakistani Community Resource Centre, which has
 proven to be successful. Some work has been done at LVS/back to practice also.



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Spotlight: Collaborative working with Covid Health Equity Manchester Sounding Boards

Proposal to deliver pop up at Longsight market on a Wednesday

Spring Vaccination Programme

Consultation with South Asian Sounding Boards who provided feedback:

- Ramadan was not an ideal time as there may be hesitancy within the Muslim community. It was advised that in order to target this community, vaccine engagement events/pop-ups should be carried out after Eid (3-4th May)
- The market area is a good location, but Saturdays would be the best day to Pop-Up
- 11am-3pm is preferred timings on a Saturday

The pop-up series was planned post Ramadan/Eid beginning on Saturday 7th May (See spotlight slide)



Wednesday (above) & Saturday (below)

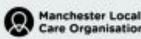




in April



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Spotlight: Peripatetic team case study – Longsight Market

Challenge:

Address the low vaccine coverage amongst the Longsight population

Response:

For consistency, 4 Pop-Up vaccination clinic were booked into to be held within Longsight market - a high footfall area that serves the local population. A 'whole family' offer has been put in place so that we can vaccinate anyone over 5 years old Prior to the event the MHCC Integrated Neighbourhood Team linked in with sounding boards, local charities and Covid chat co-ordinators who supplied volunteers from local area to help run the pop-up clinic.

Leaflets were printed in a variety of languages and fixed banners were put up in the local area advertising the events

Outcome:

Circa 70 vaccines were delivered during the first 2 sessions – this included over 20 5-11 vaccinations.

The second clinic saw a 66% increase in turnout suggesting word of mouth/advertising was having an effect





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Spotlight: Peripatetic team case study – Manchester Settlement

Challenge:

Address the low vaccine coverage amongst the Openshaw population

Response:

A Pop-Up vaccination clinic was held on the grounds of Manchester Settlement, a charity which serves the local area

The MHCC Integrated Neighbourhood Team linked in with Manchester Settlement and another local charity, Ceebee Gold who promoted the event amongst their networks two weeks before.

Leaflets were distributed in the local area advertising the event

Several volunteers, including local marshals were mobilized to help on the day.

Outcome:

60 vaccines were delivered during the session. A high proportion of these were spring boosters

Qualitative evidence suggests that patients weren't sure where to go to get their vaccine and were grateful for a local offer

Several pop-up events have been planned for June in Openshaw due to this clinic's popularity.











Key Programme Updates May 2022

Autumn Covid-19 Boosters 2022

Interim JCVI advice released 19th May recommending that Covid-19 vaccines are offered to Residents in a care home for older adults and staff; Health and social care staff; All those aged 65 and over; Adults aged16-64 in a clinical risk group. JCVI will provide further advice on the timing and value of doses for less vulnerable older adults and those in clinical risk groups ahead of Autumn 2022

Estates review

NHSE is undertaking a value for money assessment of all non-NHS Estates currently being leased as vaccination sites. Manchester has submitted a robust case for retention of The Jain, Irish Centre, Grange and Forum vaccination sites based on clear evidence of the lack of alternative NHS estate capacity and the risks to health equity of removing local vaccination sites.

GM Maternity Vaccination Pilot

A new service was launched in April to deliver Covid, Flu and Pertussis vaccinations to pregnant women attending ante-natal appointments at Manchester MFT sites and Salford. Uptake has been strong with over 500 women vaccinated in the first three weeks.

Changing Governance

A new Health Protection Board is being established for the City – vaccination programme governance is being reviewed to reflect new reporting arrangements for the Board and emerging locality structures under the new GM Integrated Care Board.

Development of 0-5 Childhood Immunisations Improvement Project

A project team is now in place to address decline and drive improvement in childhood immunisation coverage, building on learning from the Covid-19 vaccination programme.





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Childhood 0-5 Immunisation Project - Work to date

The purpose of this project is to plan, co-ordinate and deliver change across system partners to address the decline in childhood immunisation coverage and drive improvement to protect the health of children in Manchester.

- Project Scoping document drafted
- Childhood 0-5 Immunisation Steering Group and working group in place
- Public Health Specialist Immunisation Nurse is Project Lead
- Leadership and Capacity from Health Protection Hub identified
- Key workstreams identified
 - Literature Review/Best Practice models
 - Immunisation Promotion Project Review commissioned from CHIS
 - Data and Intelligence development
 - PCN Childhood Immunisation pilots' development
 - Influenza 2's & 3's
 - Looked After Children
 - Hepatitis B for at risk babies @ 4weeks



Hanchester Health & Care Commissioning



Manchester University



