Towards vaccine equity – through reducing variation in NWL CoViD-19 vaccination uptake
Co-production and Improvement Huddles
Proactive population health management & inequalities programme
30th March 2021
<table>
<thead>
<tr>
<th>Huddles</th>
<th>Topic</th>
<th>Recommendations</th>
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<tbody>
<tr>
<td>1. 23rd February</td>
<td>Setting the scene, what has the data and our community been telling us?</td>
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<td>2. 2nd March</td>
<td>The role of trust in conversations around the vaccine</td>
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<td>3. 9th March</td>
<td>Active listening: the what, who and how of messaging</td>
<td>- Local Borough plans should be updated to reflect the significant informal influencing role of friends, family members (including those overseas), and neighbourhood figures, in addition to local health and care professionals</td>
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<td>4. 16th March</td>
<td>Why now?</td>
<td>- How have boroughs engaged with their communities to have conversations about historic racism?</td>
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<td>- How have organisations looked at their distribution of power?</td>
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<td>- How can we consider the role of fear as a driver for behaviours we have seen?</td>
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<td>5. 23rd March</td>
<td>Conversations to action</td>
<td>- Sustainability and legacy - can we embed ways to address health equalities as a group on the back of the huddles?</td>
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<td>- Need to work together across boroughs on specialised topics to pool resources and knowledge</td>
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<td>- Continue sharing of earning and hearing more of examples that worked such as role of music in improving uptake and engagement with faith leaders</td>
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<td>6. 30th March</td>
<td>Co-producing solutions</td>
<td>- Consider accessibility from the conception of the vaccination programme: thinking about use of language and mode of delivery for the messages</td>
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<td>- Ideas to think of innovative ways for better 'access' into our communities, and seeing people as assets, how do we create effective roles for PPGs, Community Champions, Pharmacists in vaccine uptake</td>
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<td>- Solutions included the importance of building lasting trust which request intention, integrity and investment - commitment to action. As well as the importance of coherent messaging, integrity and consistency across all public bodies.</td>
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<td>- For effective collaboration we need a common ambition, purpose, and realisation that so much of the impact of health (like vaccine uptake) lies beyond healthcare</td>
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<td>7. 6th April</td>
<td>Exploring the role of children and young people</td>
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Huddle Six – 30th March

35 Attendees

Representation from:

• Strategic Lay Forum
• Imperial College Health Partners
• Applied Research Collaborative NWL
• Imperial College London including the Institute of Global Health Innovation
• Public Health England London and NHS England and Improvement
• Healthwatch H&F and Central West London
• Thrive Tribe
• BME Health Forum
• NWL ICS and CCG
• Local Councillors
• Local authorities including H&F, RBKC, Ealing, Hounslow and Brent, Harrow
• Hounslow and Ealing CCG
• Hillingdon, Brent and Harrow CCG
• Primary Care Networks
Aim of this work – what we want to achieve:

To improve vaccine equity - through reducing variation in the uptake of CoViD-19 vaccines across our communities in north west London

Objectives – how we are going to achieve our aim:

1. Support and learn from **borough, primary care network & community engagement**
2. Combine **qualitative community insights** with **quantitative analysis** from WSIC to make sense of variation (ethnicity, deprivation, age, gender) in vaccine uptake
3. Bring together key stakeholders from across our communities, local authorities, NHS organisations & academic partners to **identify barriers** to vaccine uptake and to **coproduce potential solutions** to improve vaccine equity
4. Use **rapid implementation** of improvement methods to test and measure solutions – adapting those that don’t work, and spreading those that do
5. Use our collective learning, research evidence & behavioural insights expertise to shape how we **communicate and engage with our communities** on vaccines
6. **Share our learning** with organisations focused on vaccinating their workforce
## Our coproduction & improvement huddles

The **purpose** of these huddles are to:

- Bring together people & teams from across our health & care system who are working to improve vaccine equity
- Engage, listen & share learning - hearing from different people about their activities and engagement work
- Facilitate a weekly, inclusive digital space that people can join and contribute to co-producing tests of change

<table>
<thead>
<tr>
<th>Starting with stories, data and insights</th>
<th>Quantitative &amp; qualitative data, that articulate the current situation – updates on uptake, sentiment and learning from community engagement work, and from week 2 onwards reporting back on tests of change from the previous week</th>
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<tr>
<td>Identifying problems, gaps and barriers</td>
<td>Using the insights of everyone in the huddle to identify and prioritise key problems that need addressing</td>
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<td>Co-producing ‘tests of change’</td>
<td>Using the breadth of expertise and experience in the group to co-produce potential solutions that people in the group can action, or test (as PDSA cycles)</td>
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<td>Finalising actions &amp; process evaluation</td>
<td>Confirming agreed actions, owners, timescales and mechanisms for reporting back. Evaluate the huddle – what went well? How to improve for next time?</td>
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</table>
What have we worked through so far?

Understanding how local context - what has the data and our community been telling us

Active listening: the what, the who and the how of messaging

Building Trust: the role of trust in conversations about the vaccine

Why now: the impact of historic prejudice on vaccine equity

Conversations to Action

Where next..?
Co-producing solutions
Principles of co-production

- Recognising people as assets.
- Building on people's capabilities.
- Developing two-way, reciprocal relationships.
- Encouraging peer support.
- Blurring boundaries between delivering and receiving services.
- Facilitating rather than delivering

https://www.thinklocalactpersonal.org.uk/co-production-in-commissioning-tool/co-production/In-more-detail/
Stories, data and insights

Quantitative & Qualitative Insights
This is the current picture of vaccination uptake and decline in North West London across the JCVI cohorts 1-9

Vaccine uptake and decline by ethnicity, JCVI cohorts 1-9
(WSIC data, cumulative to 21 Mar)

Vaccine uptake and decline by deprivation, JCVI cohorts 1-9
(WSIC data, cumulative to 21 Mar)

Source: WSIC. Denominator is target population registered in WSIC aged 50+ excl. Healthcare Workers.
While we see a similar picture in the newer JCVI cohorts 5-9 which have started to receive their vaccine mid-February.

Source: WSIC. Denominator is target population registered in WSIC aged 50+ excl. Healthcare Workers.
**We can see the picture shifting in the first JCVI 1-4 cohorts**

Vaccine uptake and decline by deprivation, JCVI cohorts 1-4 (WSIC data, cumulative to 21 Mar)

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Source: WSIC. Denominator is target population registered in WSIC aged 70+ (incl. CEV, excl. Healthcare Workers).
This is also observable for vaccine uptake by ethnicity…

Change in vaccine uptake by ethnicity, JCVI cohorts 1-4
(WSIC data 28 Feb – 21 Mar)

Source: WSIC. Denominator is target population registered in WSIC aged 70+ (incl. CEV, excl. Healthcare Workers).
…and vaccines declined by ethnicity

Change in vaccine decline by ethnicity, JCVI cohorts 1-4
(WSIC data 28 Feb – 21 Mar)

This rebalancing is really encouraging and reflects huge effort by vaccine teams

Source: WSIC. Denominator is target population registered in WSIC aged 70+ (incl. CEV, excl. Healthcare Workers).
Identifying problems, gaps and barriers
Identifying problems, gaps and barriers

Sharing challenges and co-producing solutions - hearing from our huddle members

What is the specific problem, issue or challenge you are facing?

What does good look like, what are you working towards?

How can this group help you overcome this challenge? What do you need?

Invitation for participants to host their own conversation to crowdsource ideas and develop solutions

One minute to present the topics to the wider group before going into 20 minute breakout sessions
Identifying problems, gaps and barriers

Sharing challenges and co-producing solutions - hearing from our huddle members

The role of trust in vaccine equity – Major Richard Wilson

How can we make greater use of the GP Surgery PPG's and how can we support the PPG's with information packs, e.g. WISC extracts for their GP Practice? – James Guest

If you were designing a vaccine pop up clinic at a GP practice, how would you go about maximising the chances of those who need the vaccine getting it? – Martha Martin

Co-producing and working collaboratively, sharing experience in Hillingdon – Marimar Carreno

More effective ways to work with our communities: working with PPGs and improving accessibility – Alaa Mohamed
Co-producing tests of change
Co-producing tests of change

**Feedback and reflect - how do we take this work forwards?**

- Did you identify any new ideas or solutions?
- What support do you need to take this work forward?
- What do you need at a local, borough and sector-level to address your challenge?
- How will you measure your progress?
# Co-producing tests of change

## Feedback and reflect - how do we take this work forwards?

### Key Themes of new ideas and solutions discussed

#### The need for Access
- The importance of access to our communities
- More intentional involvement of PPGs
- Are they currently underutilised
- More local control e.g. on identifying pharmacists to deliver vaccines in boroughs
- PPGs are required by statute, Community Champions are not, both have a complementary role
- Can PPGs have a wider remit beyond their practices and into the communities for benefits of the wider population?

#### Building Trust
- Key underpinning of everything that we do
- Trust is the bedrock for the community
- To build trust, we need to invest in
  - Consistent messaging – intentional and with integrity
- The demand of population Health means that gaining the trust of the population is the first must for any GP practice
- Different parts of the NHS are differently trusted - it isn't all or nothing - that's why (many) GP practices are good places for vaccines and similarly some pharmacies.

#### Effective collaborations
- These require a common purpose, identifying common ambitions is key
- Communications and engagement strategies produced at Integrated Care Partnership (borough) level with residents and patients could help to ensure that there are joint priorities
- Sharing and securing resources together is a must
- Ironing out the differences in ‘rules’ between health and social care so we share a common set of objectives
- Realising that so much of improving health including increasing vaccine uptake sits outside ‘healthcare’

#### Looking ahead: How do we take these forward
- Investing in relationships- relationships between organisations and relationships with our communities – the bedrock of building trust
- Getting people together and talking
- Investing locally in our workforce, and recognising the trust of health, social care and all other public departments are interlinked
Continuing our connections

How do we take this work forward?

There has been feedback about sharing contact details from these meetings so we can stay in touch and connect between the huddles.

If you would like to share your details, please go to:

https://easyretro.io/publicboard/rwnvUvwrb7XExmkvGSo5nw06gEp1/36b4a581-f463-4b47-92eb-976af5e47404

And add:
• Your name
• Role/organisations
• Email address or phone number
Spread the word

Aim to **co-produce communications outputs** to share what we are learning and to engage more people in the work.

This could be:

- Blogs
- Videos
- Photos
- Stories
- Tweets

We’re looking for **volunteers** to help us from

Get in touch with:

Hannah.fontana@nhs.net
## After action review & next steps

### What went well

- The quality of the feedback from the discussions has been so rich and valuable
- Thanks to everyone, I thought this evening’s session were very well led, thankyou
- This inspires me to go out and ask people and listen to them every week.

### Even better if

- Can I also just say 35 ppl during a heat wave after lockdown is a big success

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### Write up will be available on -