

**NORTH LINCOLNSHIRE COUNCIL**

**HEALTH & WELLBEING BOARD**

**SEASONAL VACCINATION PROGRAMME**

**1. OBJECT AND KEY POINTS IN THIS REPORT**

1.1 The objective of this report is to update Health and Wellbeing Board (HWB) members on measures which are being undertaken to help maintain our residents' health and wellbeing over the winter season. In particular this report covers:

- COVID-19 seasonal booster (autumn booster) programme.
- Winter influenza (flu) programme and update on Respiratory Syncytial Virus.
- Measure which are being undertaken to support residents keeping warm over winter.

**2.0 BACKGROUND INFORMATION**

2.1 Winter 2022/23 is anticipated to place significant challenges on health and care systems, particularly across urgent and emergency care, through a combination of increased demand, workforce challenges, and high prevalence of respiratory illnesses.

2.2 NHS England has issued [guidance](#) to ICBs, who must provide assurance that plans are in place to respond to these challenges and seasonal pressures. The recent formation of the Northern Lincolnshire Health Protection Board provides additional strategic oversight and integration across health protection teams working in the locality. Working with system partners, the local health protection team within Greater Lincolnshire Public Health has set out the health protection arrangements in place to help offset winter pressures on local health and care services; such measures include:

- the local arrangements in place to support wider health and care systems prior to and during periods of operational pressure.
- Operational arrangements to be instigated in response to outbreaks of seasonal respiratory illnesses.

- System assurance on engagement and prevention measures to help minimise pressures on local services.
- Surge and escalation options to respond to the emergence of a dangerous new variant of COVID-19, or to a significant resurgence in COVID-19, especially with a concurrent flu wave, placing significant pressure on the NHS.

2.3 This paper provides the HWB with an update on three key areas which are essential to help support North Lincolnshire residents stay well over the winter period and reduce the impacts on the health and social care system – these areas include:

- COVID-19 seasonal booster (autumn booster) programme.
- Winter influenza (flu) programme and update on Respiratory Syncytial Virus.
- Measure which are being undertaken to support residents keeping warm over winter.

### 3.0 WINTER PROGRAMME UPDATES

#### 3.1 COVID-19 seasonal booster (autumn booster) programme.

- 3.1.1 One way to understand the estimated prevalence of Covid-19 is to use the ONS infection survey. The survey estimates the percentage of people testing positive for coronavirus (COVID-19) in private residential households. The latest [survey published](#) on 4 November 2022 estimated that in the week ending 24 October 2022, the percentage of people testing positive for coronavirus (COVID-19) decreased in the North East, the North West, Yorkshire and The Humber, the West Midlands, and the East of England.
- 3.1.2 People aged 50 years and over, those in care homes, and those aged 5 years and over in clinical risk groups are being offered an autumn booster of COVID-19 vaccine due to being of greater risk. In addition, the autumn booster is being offered to those at high risk of the complications of COVID-19 infection, who may have not been vaccinated for a few months. As the number of COVID-19 infections increases over the winter, this autumn booster should help people reduce their risk of developing severe infection and being admitted to hospital with complications related to COVID-19.
- 3.1.3 Locally, the [Autumn Booster Programme](#) went live through local booking systems in the middle of September, with the care home roll out beginning the first week of September.
- 3.1.4 All PCNs met the deadline to vaccinate all care homes by end of October deadline, albeit some residents have still not been vaccinated due to consent issues. Care home staff are being offered a vaccine alongside residents, where supply allows.
- 3.1.5 The current position regarding the autumn booster programme, as of the 7<sup>th</sup> November are as follows:
- The latest data can be accessed via - [Vaccinations in North Lincolnshire | Coronavirus in the UK \(data.gov.uk\)](#)

- It should be noted though that the over 50 have only had access to the autumn booster for the last 2 weeks, so numbers will be much lower than those who had access since the start of September.

3.1.6 The following table shows achievement by Cohort:

CCG Cluster = North and North East Lincolnshire CCG = NHS NORTH LINCOLNSHIRE CCG PCN = (All)		HUMBER AND NORTH YORKSHIRE HEALTH AND CARE PARTNERSHIP COVID VACCINATION PROGRAMME AS AT 07/11/2022																
Cohort	Population	Actual Activity					Seasonal	Cumulative Assessment - From the Total Population										
		First	Second	Booster	Booster 2	Booster 3		Cumulative Uptake										
		First	Second	Booster	Booster 2	Booster 3	Seasonal	First	Second	Booster	Booster 2	Booster 3	Seasonal					
01) Care Home Residents & Residential Care W	856	840	834	781	573	1	678	98.1%	97.4%	91.2%	66.9%	0.1%	79.2%					
02) 80+ & Health and Social Care workers	21,931	21,563	21,350	19,733	7,855	27	13,068	98.3%	97.4%	90.0%	35.8%	0.1%	59.6%					
03) 75-79	8,410	8,215	8,190	8,028	6,458	15	6,851	97.7%	97.4%	95.5%	76.8%	0.2%	81.5%					
04) 70-74	9,700	9,411	9,354	9,111	559	3	7,678	97.0%	96.4%	93.9%	5.8%	0.0%	79.2%					
05) 65-69	10,040	9,589	9,524	9,179	387	2	7,334	95.5%	94.9%	91.4%	3.9%	0.0%	73.0%					
06) At Risk	27,053	24,217	23,513	19,938	934	8	10,298	89.5%	86.9%	73.7%	3.5%	0.0%	38.1%					
07) 60-64	6,228	5,739	5,683	5,366	23	0	3,018	92.1%	91.2%	86.2%	0.4%	0.0%	48.5%					
08) 55-59	7,496	6,727	6,642	6,036	11	0	2,797	89.7%	88.6%	80.5%	0.1%	0.0%	37.3%					
09) 50-54	7,571	6,594	6,483	5,751	13	0	1,784	87.1%	85.6%	76.0%	0.2%	0.0%	23.6%					
10) 40-49	13,932	10,920	10,559	8,288	16	0	269	78.4%	75.8%	59.5%								
11) 30-39	17,108	11,867	11,183	7,071	4	0	235	69.4%	65.4%	41.3%								
12) 18-29	17,873	12,499	11,329	6,248	1	0	203	69.9%	63.4%	35.0%								
13) 12-15 At Risk	403	268	198	44	0	0	38	66.5%	49.1%	10.9%								
14) 12-17 House hold contacts of immunosuppre	305	183	132	15	0	0	2	60.0%	43.3%	4.9%								
15) 16-17	3,807	2,596	1,998	469	0	0	68	68.2%	52.5%	12.3%								
16) 12-15	8,131	4,429	3,306	8	0	0	9	54.5%	40.7%									
17) 5-11 At Risk	775	145	103	0	0	0	22	18.7%	13.3%									
18) 05-11	13,835	1,318	813	0	0	0	2	9.5%	5.9%									
<b>Grand Total</b>	<b>175,454</b>	<b>137,120</b>	<b>131,194</b>	<b>106,066</b>	<b>16,834</b>	<b>56</b>	<b>54,354</b>	<b>78.2%</b>	<b>74.8%</b>	<b>69.4%</b>	<b>21.5%</b>	<b>0.1%</b>	<b>53.9%</b>					

3.1.7 Plans for an outreach model have been developed to focus on those areas of lowest uptake, inequalities and specific community groups in North Lincolnshire. Dates have been confirmed during November to attend the Isle of Axholme, Brigg and Barton to increase uptake in those areas and plans to utilise a dedicated bus to support patients attending the Vaccination Centre have been put in place.

## 3.2 Winter influenza (flu) programme and Respiratory Syncytial Virus (RSV)

### 3.2.1 Winter influenza (flu) programme

3.2.2 Flu can be caught all year round, but it is especially common in winter, which is why it is also known as seasonal flu. Seasonal flu affects many people in the UK each year, although many do not suffer serious adverse impacts it can have drastic impacts, including death for those who are particularly vulnerable. Each year a vaccine is produced to reduce the impact of seasonal flu. People with certain risk factors are encouraged to have flu vaccinations. Getting protected will be particularly important this year, given the likelihood of co-infection, where both COVID-19 and flu may be circulating through our communities at the same time.

3.2.3 The flu vaccine is given freely on the NHS for adults who are more at risk of the impact of flu. However, it is recognised that the impact of flu on lower risk groups can still be extremely unpleasant and can have a further impact on workforce capacity and business continuity. Therefore, to help protect staff's health and improve workforce resilience, North Lincolnshire Council and the NHS partners will be offering a fully funded flu vaccination to all council staff who are not eligible for an NHS vaccination. Additionally, there will be an extensive promotion campaign to increase uptake and arrangements will be developed with local pharmacies to make obtaining vaccination as accessible as possible.

3.2.4 Currently Influenza activity remains low in the Midlands, Yorkshire and Humber and nationally, however due to decreased exposure to the virus in previous seasons a seasonal influenza epidemic could be more likely in the coming months

3.2.5 Across Greater Lincolnshire (which includes North Lincolnshire) a support model has now been approved for flu vaccinations that will see those not eligible under the NHS criteria, but who are front line staff, still being offered a free flu vaccine which will be funded by the local authority.

### **3.2.6 Respiratory Syncytial Virus**

3.2.6 RSV is one of the common viruses that cause coughs and colds in winter. RSV occurs regularly each year. Epidemics generally start in October and last for 4 to 5 months, peaking in December. RSV is the most common cause of bronchiolitis in infants. Over 60% of children have been infected by their first birthday, and over 80% by 2 years of age. Only a minority of adult infections are diagnosed, as RSV is not widely recognised as a cause of respiratory infections in adults.

3.2.7 RSV levels are currently low but are also expected to rise. Historic data suggests these would usually peak prior to a peak in influenza. Recently published data has shown an increase in detections of Influenza in the European region this season compared to last season, though numbers remain lower than the pre-covid season in 2019-2020 (19% reduction compared to 2019-2020).

3.2.8 Recognising the impact that respiratory illnesses may have on local demand for healthcare systems, targeted public communications to educate families about how to manage these illnesses at home and if required, when to access A&E. As part of this work, comms and educational materials have been developed to support Local authority, teachers and parents training, change policies and practices, so that a supportive environment can be developed in schools to manage the risk of transmission.

## **3.3 Warm housing**

3.3.1 The impact of global events has impacted on the cost of fuel, increasing the risk of fuel shortages over the coming winter months. This will lead to more people being in fuel poverty which means households have to spend a high proportion of their household income to keep their home at a reasonable temperature. Fuel poverty is mainly influenced by three key factors being household income; fuel costs and energy consumption, which is dependent on a house's energy efficiency.

3.3.2 Many health conditions, including respiratory diseases such as asthma, can be caused or worsened by cold weather. The impact of fuel poverty is far reaching and includes and the effects of living in a cold home for children may include:

- Poorer physical development
- Exacerbation of ill health for children with asthma
- Poorer diet, as money is spent on fuel

- Poorer mental health

3.3.3 Living in a cold home also presents a number of physical health risks for older people including increased blood pressure and blood coagulation which can lead to a number of respiratory and circulatory conditions, including an increased risk of heart attacks and strokes. Other health risks include respiratory disease, influenza, hypothermia, heart attack and depression.

3.3.4 Work is being undertaken with the council and with partners to offer support and advice for people and families who are likely to experience the impact of increased fuel costs. Currently, work is mainly focused around 'signposting' and ensuring that people have the best advice. The council has launched a ['Keep well this winter'](#) web page, which provided advice and guidance on:

- Keeping warm
- Looking out for yourself and others
- Staying connected
- Money matters
- Money saving tips
- Being prepared
- Staying safe

3.3.5 In addition, to help support this initiative, briefing pack has been written describing in more detail the possible impacts of fuel poverty.



## 4.0 OPTIONS FOR CONSIDERATION

4.1 **Option 1:** To note the work being undertaken which will help to support winter preparations with the aim of maintaining the health and wellbeing of the residents of North Lincolnshire.

## 5.0 ANALYSIS OF OPTIONS

5.1 The council is part of the Northern Lincolnshire Health Protection Board which provides additional strategic oversight and integration across health protection teams working in the locality. This ensures that locally, we have access to the resources and workforce capacity to help respond to outbreaks. The public health intelligence teams continue to undertake surveillance around COVID-19.

5.2 The council and partners are working proactively to look at ways to maximise uptake of vaccinations, which is seen as having one of the biggest impacts on reducing the impact of seasonal flu and Covid-19.

5.3 It is recognised that people will be concerned about the rise in fuel costs and how that will impact on their day to day living. The council is working proactively to provide advice and guidance to people who may be struggling with fuel costs this winter

**6.0 FINANCIAL AND OTHER RESOURCE IMPLICATIONS (e.g. LEGAL, HR, PROPERTY, IT, COMMUNICATIONS etc.)**

6.1 Costs of providing flu vaccinations for council staff will be met from existing budgets

**7.0 OTHER RELEVANT IMPLICATIONS (e.g. CRIME AND DISORDER, EQUALITIES, COUNCIL PLAN, ENVIRONMENTAL, RISK etc.)**

7.1 None

**8.0 OUTCOMES OF INTEGRATED IMPACT ASSESSMENT (IF APPLICABLE)**

8.1 Not relevant for this report

**9.0 OUTCOMES OF CONSULTATION AND CONFLICTS OF INTERESTS DECLARED**

9.1 Not relevant for this report

**10 RECOMMENDATIONS**

10.1 That the HWB note the work being which is being undertaken to help maintain our residents' health and wellbeing over the winter season

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